



**OFFENDER
MANAGEMENT
INSPECTION**

A report on Offender Management in
North Wales

An inspection led by
HM Inspectorate of Probation

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FOREWORD

We saw in North Wales some practice which had sound foundations, for example work managing Risk of Harm and protecting the public. Hard work had been put into getting the fundamentals right and sentencers and victims – two key user groups – were very positive. Staff were committed and the frequency and quality of their supervision and appraisal were good. However, not all staff were working to a high standard and we found disappointing pockets of poor practice in some of the cases we inspected. The number of cases managed at this lower standard were small – hence generally good inspection results for some elements of practice – and yet the impact remained significant and restricted the area’s progress.

Highly thought of by its partners from statutory and voluntary organisations, North Wales Probation Area achieved some good results. Frustratingly, however, in respect of a number of strategic matters we felt that it had not quite travelled as far as it might in securely embedding certain key pieces of work.

We therefore identified a need for greater consistency across the area in respect of achieving a routinely high standard of practice through clear direction and leadership from managers and the Board.

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CONTENTS

	Page
LIST OF ABBREVIATIONS/ACRONYMS	4
SUMMARY	5
SUMMARY OF SCORES	7
RECOMMENDATIONS FOR IMPROVEMENT	10
NEXT STEPS	10
SHARING GOOD PRACTICE	11
SERVICE USERS' PERSPECTIVE	13
1. ASSESSMENT AND SENTENCE PLANNING	16
1.1 General Criterion: PREPARING FOR SENTENCE	16
1.2 General Criterion: ASSESSMENT OF RISK OF HARM	17
1.3 General Criterion: ASSESSMENT OF LIKELIHOOD OF REOFFENDING	19
1.4 General Criterion: ASSESSMENT OF OFFENDER ENGAGEMENT	20
1.5 General Criterion: SENTENCE PLANNING	21
2. IMPLEMENTATION OF INTERVENTIONS	23
2.1 General Criterion: DELIVERING THE SENTENCE PLAN	23
2.2 General Criterion: PROTECTING THE PUBLIC BY MINIMISING RISK OF HARM	25
2.3 General Criterion: VICTIMS	26
2.4 General Criterion: ENSURING CONTAINMENT AND PROMOTING COMPLIANCE (Punish)	27
2.5 General Criterion: CONSTRUCTIVE INTERVENTIONS (Help and Change)	28
2.6 General Criterion: RESTRICTIVE INTERVENTIONS (Control)	30
2.7 General Criterion: DIVERSITY ISSUES	31
3. ACHIEVEMENT AND MONITORING OF OUTCOMES	32
3.1 General Criterion: ACHIEVEMENT OF INITIAL OUTCOMES	32
3.2 General Criterion: SUSTAINABILITY OF PROGRESS	34
4. LEADERSHIP AND STRATEGIC MANAGEMENT	36
4.1 General Criterion: LEADERSHIP AND PLANNING	36
4.2 General Criterion: PERFORMANCE AGAINST NATIONAL AND REGIONAL TARGETS	40
4.3 General Criterion: RESOURCE DEPLOYMENT	41
4.4 General Criterion: WORKFORCE PLANNING AND DEVELOPMENT	44
4.5 General Criterion: REVIEW AND EVALUATION	46
4.6 General Criterion: COMMISSIONING OF SERVICES	47
APPENDIX 1 Integrated Probation Performance Framework	50
APPENDIX 2 Contextual information	51
APPENDIX 3 Inspection model, methodology and publication arrangements	54
APPENDIX 4 Scoring approach	55
APPENDIX 5 Role of HMI Probation	56

LIST OF ABBREVIATIONS/ACRONYMS

CALM	Controlling anger and learning to manage it
CJSSS	Simple, Speedy, Summary justice
CO	Chief officer
DID	Drink Impaired Drivers
DOM	Director of Offender Management
DRR	Drug rehabilitation requirement
ECL	End of custody licence
EEM	European Excellence Model
ESF	European Social Fund
ETE	Employment, Training and Education
ETS	Enhanced thinking skills
FDR	Fast delivery report
HDC	Home Detection Curfew
HMI Probation	Her Majesty's Inspectorate of Probation
HMP	Her Majesty's Prison
HQ	Headquarters
ICT	Information, communication and technology
IDAP	Integrated Domestic Abuse programme
IP	Investor in People
IPPF	Integrated Probation Performance Framework
IT	Information technology
LCJB	Local Criminal Justice Board
LIAP	Low Intensity Alcohol Programme
LiMO	Living in, Moving On
LoR	Likelihood of reoffending
MAPPA	Multi-Agency Public Protection Arrangements
NOMS	National Offender Management Service
NVQ	National Vocational Qualification
OASys/eOASys	Offender Assessment System/electronic OASys
OCN	Open College Network
OGRS2	Offender Group Reconviction Score 2
OMI	Offender Management Inspection
OMU	Offender Management Unit
OSAP	Offender Substance Abuse Programme
PDM	Practice development manager
PO	Probation officer
PPO	Prolific and other priority offender
PSO	Probation service officer
PSR	Pre-sentence report
REM	Race and ethnic monitoring
RMP	Risk management plan
RoH	Risk of Harm
ROTL	Release on temporary licence
SDR	Standard delivery report
SFO	Serious further offence
SLA	Service level agreement
SMB	Strategic Management Board
SMS	Short messaging service
SMT	Senior management team
SPO	Senior probation officer
TPO	Trainee probation officer
VLO	Victim liaison officer

SUMMARY

Assessment and Sentence Planning

Court reports were generally of a high standard and feedback from sentencers supported this. The decision to use fast delivery reports where standard delivery reports should have been considered was not always clearly recorded. A likelihood of reoffending assessment had taken place in most cases, although not always at the start of sentence or updated on release. The quality of information in these assessments was mixed and opportunities to maximise the quality through the use of additional sources of information were often missed. Diversity needs were identified and assessed in the majority of cases and we saw positive examples of offender managers moderating their approach to take account of individual needs. The provision for screening for basic skills, however, was inconsistent in the cases we assessed. Offender learning was not always assessed at the start of sentence to inform sentence planning. Procedures were in place to support the timely allocation of offender managers to offenders and in the main most cases were tiered correctly. The overall quality of sentence planning was lacking. Objectives were not sufficiently outcome focused and not always based on the need identified.

Implementation of Interventions

The area had a range of interventions, both accredited and non-accredited, that supported offender management outcomes. It had invested in external staff to facilitate some of these interventions. Programme availability was a particular challenge for the area. The geography of the area and high demand for particular programmes meant long waiting times, particularly for domestic abuse and substance misuse interventions. There was a good range of education and employment interventions, but these were not always used as well as they could be. A lack of outcome-focused objectives meant that supervision needed more focus. There was limited evidence of offending work being done, aside from within programmes, and there were shortcomings in raising victim awareness. Sentence plans were not always routinely reviewed in line with the national standard or where there was a change in circumstance.

Work by victim liaison officers to support and inform victims of serious offences was of a good standard and clearly recorded on file. Victim feedback indicated a generally positive view of the work the area had done to promote their safety, in particular they felt reassured by being able to comment on additional licence conditions. More generally, action to secure offender compliance was of a good standard and enforcement action was efficiently carried out. The level of contact between offender managers and prison staff pre-release was insufficient in a number of cases. This meant that supervision in the community did not always follow on from work done in custody. While diversity issues were not always recorded in planning documents, there was evidence that they were given a higher priority in the work done with the offender.

Achievement and Monitoring of Outcomes

The achievement of outcomes was variable. The **punish** sentence objective had been achieved in the majority of cases and reconviction among the sample we assessed was limited. The level of resource used was, in the main, consistent with offenders'

likelihood of reoffending and Risk of Harm. We saw positive examples of what offenders achieved through employment, training and education interventions; although offender managers were not accessing these interventions in all cases where there was a need. Progress against identified criminogenic needs was limited and in over half the cases there was no evidence of a positive change in attitude or behaviour. In most cases the offender manager had paid sufficient attention to community reintegration issues.

Leadership and Strategic Management

There was a clear business planning process that was well managed by the area. The Board was actively engaged with senior managers to address their planning and performance. Staff were generally clear about the area's priorities and how their work contributed to these. There were examples of the area responding positively to raising performance standards and improving quality in key areas of practice. The area was open to external scrutiny as a means of continuous improvement. Partnership work was an area of strength. A comprehensive protocol governed working relationships with sentencers and feedback was positive about the area's contribution to sentencing. Partners praised the area for its proactive approach to partnership work. The area had invested in a number of projects that made a positive contribution to community safety, as well as supporting effective outcomes for offender management. Engagement with service users was seen as a key priority and the area had successfully established a range of initiatives that were recognised by the National Offender Management Service as good practice. Greater emphasis was needed on how service user views would be used in service delivery. The area at a strategic level, had led well on Multi-Agency Public Protection Arrangements, although monitoring procedures needed further refinement.

Current organisational structures had been reviewed to ensure resources were deployed more efficiently and there was greater clarity of staff roles. Staff were regularly supervised and were positive regarding the content and quality of supervision. There was some evidence that the area had used aggregated data to develop and commission new services. There was a need to ensure that all services were managed through a coherent structure and that arrangements to monitor take-up levels and outcomes were in place.

Risk of Harm

The area was praised for its contribution to Multi-Agency Public Protection Arrangements at a strategic level. Work had been undertaken to reduce the number of Level 2 and 3 cases, although we identified that Level 1 cases were not being formally managed through the correct process. A Risk of Harm screening was completed in most cases and while these were not always accurate, in the main we agreed with the classification. We were pleased to see that staff had accurately reflected Risk of Harm to the public, known adults and staff in the majority of cases. In the main, restrictive interventions were monitored and enforced properly and made a contribution to promoting victim safety.

The quality of Risk of Harm analyses needed improving, as did the risk management plan. There were gaps in relation to assessing the circumstances that triggered an increase in Risk of Harm, and previous offending was not fully taken into account in some cases. This led to instances where the full Risk of Harm analysis did not

sufficiently analyse previous offending as a predictor for future harm. Where a full analysis had been completed, Risk of Harm to children was not sufficiently captured. Victim issues in risk assessments and planning were sometimes omitted, resulting in staff working with inaccurate and irrelevant information. For the most cases Multi-Agency Public Protection Arrangements were used effectively to monitor and manage Risk of Harm. Communication of the Risk of Harm level and the Multi-Agency Public Protection Arrangements level was evident in most cases. While aspects of *assessing* Risk of Harm needed improving across all cases, there was evidence of increased attention to the *management* of Risk of Harm in Tier 4 cases.

SUMMARY OF SCORES

Outlined overleaf in Chart 1 are percentage scores for each Offender Management Inspection Criterion and for each of the sections 1-3.

Chart 1: Scoring of sections 1-3:

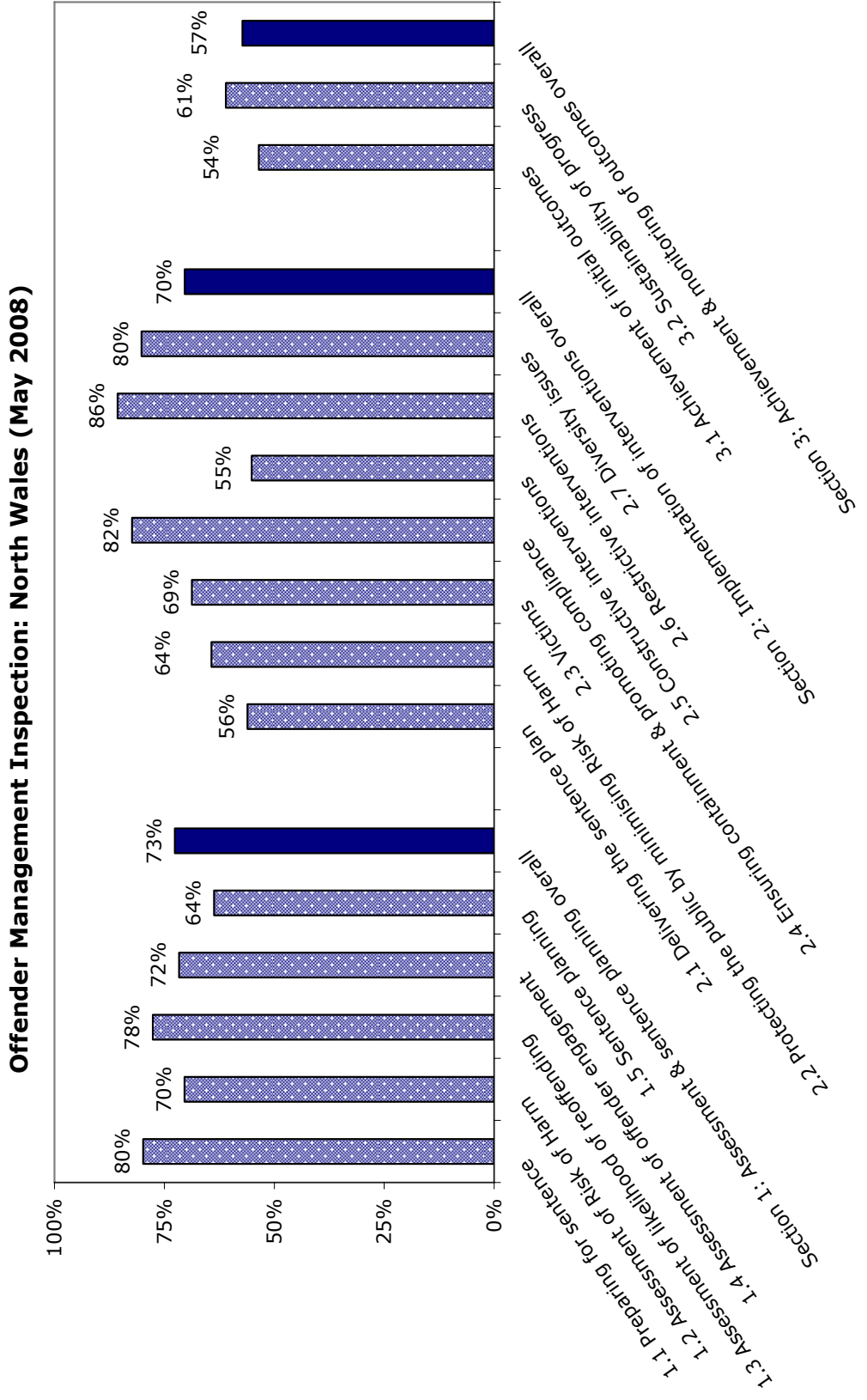


Table 1: Scoring of section 4:

Each of the criteria in the Leadership & Strategic Management section has been graded below, according to the four-point scale described in Appendix 4.

4.1	General Criterion: LEADERSHIP AND PLANNING	Satisfactorily met
4.2	General Criterion: PERFORMANCE AGAINST NATIONAL AND REGIONAL TARGETS	Satisfactorily met
4.3	General Criterion: RESOURCE DEPLOYMENT	Satisfactorily met
4.4	General Criterion: WORKFORCE PLANNING AND DEVELOPMENT	Partly met
4.5	General Criterion: REVIEW AND EVALUATION	Partly met
4.6	General Criterion: COMMISSIONING OF SERVICES	Partly met

Table 2: Risk of Harm Thread

Table 2 indicates a score drawn from a range of indicators in the *Assessment and Sentence Planning* and *Implementation of Interventions* sections about Risk of Harm work. This score is significant in determining whether a further focused inspection will be carried out.

Score for Risk of Harm Thread	71%
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Full details of our *Scoring approach* are contained in Appendix 4.

We advise readers of reports against attempting to compare scores area by area. Such comparisons are not entirely valid as the sizes of samples vary slightly, as does the profile of cases included in each area's sample. We believe the scoring is best seen as a simple summary of what we have found in an individual probation area and needs to be seen alongside the full findings and recommendations of any particular report.

RECOMMENDATIONS FOR IMPROVEMENT

Improvements are necessary as follows:

1. Risk of Harm screenings are completed accurately in all cases and full use is made of other relevant information. The quality of Risk of Harm analyses is improved. All analyses accurately reflect the nature of Risk of Harm and fully incorporate relevant previous behaviour
2. plans to manage Risk of Harm are given a higher profile. They are sufficiently focused on how the identified risk would be managed and are appropriately updated where there are changes to offenders' circumstances
3. child safeguarding is fully assessed and a high priority is given to managing Risk of Harm to children throughout the sentence
4. a basic skills screening is undertaken in all cases and a consistent process for all offenders to access initial screenings are established
5. sentence planning shapes the delivery of the sentence through to outcomes, and the quality of initial plans and reviews is improved
6. constructive interventions, including victim awareness work, are delivered in all applicable cases to help offenders to change their behaviour and this is fully recorded in case files
7. a greater focus is given to monitoring the quality of commissioned services and utilising service users' views so that information collated is used to improve the consistency of services delivered across the area.

NEXT STEPS

An improvement plan addressing the recommendations above is needed four weeks after publication.

Further focused inspections will be carried out approximately 12 months after the original OMI when HMI Probation has a serious concern about an area's RoH work.

There will not be a further inspection in North Wales.

SHARING GOOD PRACTICE

Below are examples of good practice we found in North Wales.

Committed offender management:

**OMI Criterion: 2.1
Delivering the sentence plan**

David was sentenced to a suspended sentence order with additional requirements of supervision, OSAP and a 12-month drug rehabilitation requirement. He had a long history of drug misuse and non-compliance with community sentences. His offender manager considered the best approach to working with him based on his previous contact with the service. She arranged a professionals' meeting, which included David, to facilitate information-sharing and agree a coherent package of work. Work with David was supported by quick access to treatment and the commencement of his programme within six weeks. There was good information-sharing and contact with partners and the offender manager maintained appropriate levels of contact with David while he was on the programme. Additional support to gain suitable accommodation was also provided. David made good progress and completed his programme. He provided no positive drug tests and gained a college placement. As a result of David's progress he was asked to volunteer as a support worker for future accredited programmes.

Effectively managing RoH:

**OMI Criterion: 2.2
Protecting the public by minimising RoH**

George was subject to licence supervision following domestic abuse offences against his partner. He had a long-standing alcohol dependence that exacerbated his violent behaviour. Despite these difficulties, George and his partner were committed to their relationship. His offender manager demonstrated a good understanding of the complexities of domestic abuse relationships and put in place arrangements to safeguard his partner as it was evident they would continue to see each other. Through MAPPA the offender manager arranged a gradual resettlement from the approved premises to the partner's home. This eventually led to overnight stays. MAPPA had agreed to put a police marker on his partner's address and appropriate information was provided to the warden where she lived so that visits by George could be monitored and RoH issues responded to swiftly. With the agreement of MAPPA, George was eventually permitted to return to the address full-time. An arrangement to provide emergency contingency accommodation at the approved premises was agreed. In order to continue monitoring RoH a programme of graduated home visits was arranged.

Focus on user perspective:

OMI Criterion: 4.5 Leadership and planning

Engaging with users was a clear priority for the area. Despite having no prison in North Wales the area had sought to establish a relationship with HMP Altcourse, where a number of North Wales offenders were being held. As part of this relationship the area had actively supported the development of a Prison Service User Group to capture views on how to improve the interface between prison and the community. Senior management represented the area on the user group and practice issues that arose from the group were fed back to area staff to improve service delivery. The initiative was commended by NOMS as good practice in effective offender engagement.

SERVICE USERS' PERSPECTIVE

Offenders

We interviewed 23 offenders in total; seven of whom had been sentenced to unpaid work, four were resident at the area's approved premises and 12 were attending IDAP and CALM accredited specialist offending behaviour programmes. The unpaid work and approved premises interviews took place individually, while the offending behaviour programme interviews took place as a group, one for each programme. In addition we sent out 110 questionnaires to offenders in the inspection sample, of whom 37 responded. This was a comparatively high response rate which we were pleased to see. There were some clear themes in the offender responses in relation to sentence planning, their understanding of being on a sentence and contact with their offender manager.

All offenders had received an induction where the requirements of the sentence and expectations were set out. Thirty-four out of 37 offenders who responded to our questionnaire indicated that the rules covering supervision and breach were clearly explained. While all offenders could recall the rules for non compliance of the sentence, not all were clear about the rules relating to their specific interventions. The exception to this was unpaid work where offenders received a written contract which they had to sign.

Very few offenders recalled contributing to a sentence plan or being given a copy of one. Of those released on licence most had a negative view of their offender manager in the sentence planning process; most described little or no contact during the custodial part of their sentence. Only one offender – resident at the approved premises – had sentence planning meetings arranged while in custody but they were not sufficiently attended by the offender manager. Whereas offenders on unpaid work described a prompt start to their work placement, those on IDAP commented on lengthy delays before they commenced the programme – some nine to 11 months. Reasons given for this were lack of tutor availability and long waiting lists.

All offenders knew who their offender manager was but ongoing contact was described as limited. Those interviewed at the approved premises stated that contact with their offender manager was mainly through written or telephone correspondence rather than face to face. In the main, they felt that their offender manager worked well with other staff in respect of their case. Offenders in the approved premises and on unpaid work described positive relationships with their key workers. All felt they were treated with respect. Almost all who responded to our questionnaire indicated a good working relationship with their offender manager. One stated that *"I've always had a very negative attitude when it comes to trusting probation or anything to do with authority. Working with X has changed my attitude in a positive way. I think she is a brilliant probation officer, she has helped me put my life back on track and I will always be very grateful to her"*.

All offenders on unpaid work stated that they had had a positive experience on their placements and could see the potential benefit to the community. None, however, could recall being asked about the type of placement or about any skills they had. As such, none felt that they had developed any specific new skills or had increased existing ones. Offenders on programmes were able to talk about the victim awareness modules

contained in the programme, but very few offenders had undertaken specific victim awareness work outside of this. Despite this, most offenders described some changes in their perception of the impact on victims, with some stating that they were more aware of their own behaviour as a result. They were generally positive regarding the area's response to diversity needs. There were a few who commented on the difficulties of travelling to attend offending behaviour programmes, with one reporting a three hour round trip. All those on unpaid work were confident that discussing diversity issues with the placement supervisor at the start of sentence would ensure they were dealt with. Of those eight offenders who responded to our questionnaire that had identified a diversity issue, seven noted difficulties that hindered their ability to take part fully in their sentence; all stated that this was discussed and plans had been put in place to reduce the impact of these.

The impact of the offending behaviour programmes on offenders was variable, with only half indicating that it had had an impact on the way they thought and their attitudes to offending. While those on unpaid work did not feel that it necessarily changed their attitudes towards offending, they all saw it as a punishment. Work to access other interventions to help offenders to change their behaviour had taken place mainly with the approved premises offenders and those on accredited programmes. These described opportunities to access housing, education, training and employment and alcohol services. Most on unpaid work were unaware that they could use part of their hours for further skills development. Those who responded to our questionnaire indicated that the most significant help offered by the probation area was work on attitudes to offending and alcohol use, making up 17% and 15% of the sample respectively. Most felt that the work done with probation had helped them to think more about their offending and the victims of their crimes. Nearly a third indicated that they were less likely to reoffend as a result of this work.

Victims

Seven victims were interviewed. Out of 27 questionnaires sent, nine responded, of this four had agreed to take-up an offer of victim contact from the probation area.

Five out of the seven victims interviewed indicated timely contact by the VLO after the offender was sentenced. Although all victims received written information about the service provided, four of those victims interviewed had been confused about the roles of different agencies in relation to supporting them. This view was not supported by the nine victims who responded to our questionnaire: all felt that the information was clearly written and easy to understand. The majority of the victims reported satisfaction with the service that they received overall. Those who responded to the questionnaire were clear regarding the confidentiality principles of victim liaison work. A few, however, felt that the contact with them could have been more proactive, e.g. ongoing information on appeal processes. It was suggested that a letter stating whether there had been any new developments would have provided the reassurance that victims were being kept informed.

All felt a degree of security through the addition of appropriate conditions in licences, but not all were clear of the process if the offender were to break the conditions of their licence. Victims indicated that they felt safer as a result of their contact with the VLO and in one case, where the offender had broken the condition of non contact, appropriate action had been taken and the licence was revoked. When describing the

quality of contact all stated that the VLO service had been delivered with sensitivity and had taken account of their individual needs. A key issue identified during the interviews was the need to ensure that where the victims were children, the information on victim liaison support should always be sent to the parents in the first instance. All knew who to contact if they had concerns about their safety, although a few were unclear how the VLO would respond to their concerns. None knew whether the offender was being managed under MAPPA.

All felt that there were positive aspects to the work of the VLO, especially being consulted on additional conditions that promoted their safety and being assured that this had been put in place. All felt that they had been listened to. Some interviewed expressed a wish for a reduction in the use of jargon in letters: as lay people they felt that the language used was difficult to understand. The area had in place a victim survey however; none of the victims interviewed had been included in the area's victim survey activity before the inspection.

Courts

Nine sentencers responded to our survey. All expressed satisfaction with the quality and timeliness of court reports, including FDRs. All felt there was sufficient clarity in the type of report that needed to be produced. In the main, sentencers felt that partnership arrangements with the area were working well. Strategic relationships between areas and sentencers were seen as positive. Eight felt that managers modelled positive leadership behaviour and that they were fully engaged in the LCJB. They believed that they received sufficient information about current probation practice and policy and felt that liaison meetings provided an effective forum to discuss key issues. As one described "*Probation liaison meetings are very useful for all concerned with sentencing offenders*".

Probation staff input in court was also described as positive, sentencers indicated that they were sufficiently knowledgeable and skilled within the court setting. Four of the respondents did not know whether the probation area provided outcome data by court report proposal and disposal compared with the successful completion of sentences.

1. ASSESSMENT AND SENTENCE PLANNING

1.1 General Criterion: PREPARING FOR SENTENCE

Activity in the phase leading up to sentence is timely, purposeful and effective.

80%

Strengths:

- (a) There were 64 court reports written for the relevant cases in the sample, the vast majority of which were of the appropriate type (82%). Nearly all reports took account of the courts' view of seriousness. Of the sentencers that responded to our survey (nine), all were satisfied with the quality of SDR and FDRs. We found examples of well-written reports that provided an analysis of the offence as distinct from a description.
- (b) In 97% of relevant cases the court report was prepared within national timescales. 95% of reports were completed using the nationally approved template. Overall 53 out of 64 reports had recommended a community proposal and this was followed by the court in 86% of cases. Of those cases managed within Tier 4 where a report was written for court, 14 out of 16 were balanced, verified and factually accurate and 12 were assessed as suitably concise.
- (c) There were 12 PPOs in the case sample, of which six had had a court report written. In all six reports the LoR had been clearly outlined. They took account of the seriousness of the offence and contained a clear and proportionate proposal in five out of six reports. In four reports the report correctly avoided labelling the defendant as a PPO.
- (d) Where there were issues of risk of self-harm, these were clearly recorded in 83% of relevant cases. There were five custodial cases where such a risk had been identified and this was communicated to prison staff in 80% of cases.

Areas for Improvement:

- (a) The area had followed the national guidance which says that the OASys RoH screening should be used as a factor in determining the appropriate court report type. While most reports were of the appropriate type, we found examples of inaccurate RoH screenings leading to FDRs being written where a full SDR should have been considered. In some cases the rationale for not completing a full RoH analysis, and thus an SDR, was not always fully evidenced and recorded.
- (b) Forty-three reports (69%) were considered suitably concise. There was evidence of staff not sufficiently editing eOASys, resulting in lengthy information being pulled through to inform the content of the report. In 40 reports appropriate victim information was included, leaving room for improvement in this important area of work. While 89% of reports made a clear proposal for sentence, only 55% contained an outline sentence plan.

Conclusion:

Performance against this criterion was good.

1.2 General Criterion: ASSESSMENT OF RISK OF HARM

RoH is comprehensively and accurately assessed using OASys in each case and additional specialist assessment tools where relevant.

70%**Strengths:**

- (a) A RoH screening was completed in 94% of all relevant cases and was assessed as accurate in 86%. The screening was completed at the start of sentence in 89% of cases and completed or reviewed on release from custody in 90% of cases.
- (b) Where a full RoH analysis was indicated, this was completed in 84% of cases. This accurately reflected the RoH to the public in 81% of relevant cases, known adults in 86% and to staff in 89%. In all Tier 4 cases where a full RoH analysis was required, this was completed.
- (c) In 91% of cases the RoH classification was assessed as correct. There were 22 cases managed at MAPPA Level 2. Communication of the RoH classification and MAPPA level to all staff involved was evident in 83% of cases.
- (d) Eighty cases required a RMP. The majority of plans were structured according to the required format for community and licence cases. In six of the eight custodial cases the plan was completed following sentence to custody and in all eight cases the structure complied with national guidance.
- (e) An appropriate referral to approved premises was made in all relevant cases. In all but one case the referral was accepted.

Areas for Improvement:

- (a) In a small number of cases the RoH screening was assessed as inaccurate. We found examples where information on RoH was missing from the screening, e.g. previous convictions for violence. This meant that not all cases had a completed full RoH analysis where there was a need for it. In such cases an exemption was not always fully recorded.
- (b) Where a full RoH analysis had been completed, a third were considered of insufficient quality. There were examples of RoH analyses omitting specific details such as previous RoH related behaviour resulting in a lack of analysis of how the offending behaviour specifically related to RoH. In some cases specific details of the current offence were also absent. There were examples of RoH assessments being countersigned by middle management where the quality was not sufficient. Key workers noted increased opportunities to contribute to the RoH assessment, e.g. joint court report interviews however this potential resource was not always used consistently.

- (c) Insufficient attention was paid to assessing child safeguarding risks. In a third of cases RoH to children was not accurately reflected in the analysis. There were examples where contact had not been made with children's social care by the offender manager when it should have been.
- (d) In 35% of relevant cases the RoH screening and analysis did not make sufficient use of previous assessments or information from other agencies. We found that offender managers were not always proactive in following up other potential sources of information. Victim issues were not included in 40% of relevant assessments. In those cases managed in Tier 4, the use of other sources of information and attention to victim issues was of a higher standard at 77% and 67% respectively. There was, however, little difference in the quality of RoH assessments in Tier 4 cases.
- (e) The quality of RMPs was insufficient in a number of different aspects and in 11 cases which should have had one, none had been prepared. Only 37% of those completed for community orders were considered comprehensive. A similar figure of 43% for all Tier 4 community cases in the sample was assessed as comprehensive. In some instances the lack of information in the RoH analysis and summary meant that the nature of RoH and how, and when risk issues would be heightened, was not sufficiently defined. In other cases RoH-related offending behaviour work recorded as a specific objective in sentence planning was absent or not clearly recorded as an action in the RMP. This had the effect of producing plans that described activities rather than detailing how the identified risk would be actively managed. We inspected five community cases where the RoH was assessed as very high. In only two out of the five cases had the RMP been completed within the timescale prescribed.
- (f) There were 28 cases where children's safeguarding issues were identified, of which the offender was the main source of RoH in 27. We were concerned that higher/middle management involvement with respect to child safeguarding was absent in 54% of relevant cases. Of those cases managed at Tier 4, ten had child safeguarding issues. Only four had had effective higher and middle management involvement.

Conclusion:

This criterion represents a priority for improvement.

1.3 General Criterion: ASSESSMENT OF LIKELIHOOD OF REOFFENDING

Likelihood of reoffending is comprehensively and accurately assessed using OASys as applicable.

78%

Strengths:

- (a) An OASys score had been calculated in 83% of all cases (90 out of 109). From the overall sample an OGRS2 score had been calculated in 13 out of the remaining 19 cases which did not require an OASys score. Positive influences such as supportive factors were identified in the assessment of the LoR in 82% cases.
- (b) 74% of OASys were completed on time. Case administrators told us that they had had a key role in initiating the preparation of these assessments. 87% of OASys for Tier 4 cases were completed on time.
- (c) Of the 12 cases identified as a PPO, ten had a comprehensive OASys completed within the five-day timescale. While internal key workers commented that they had had the opportunity to contribute to the OASys assessment, views from external key workers were less integrated into the assessment.

Areas for Improvement:

- (a) In a quarter of cases (26%) the LoR assessment was not completed within the timescales prescribed. This meant that work to address offending need was not clearly defined at the start of sentence or on release from custody.
- (b) The quality of information contained in the OASys was variable and did not always provide a clear analysis of criminogenic need. As previously identified, the use of other sources of information to verify assessments was not used to its full potential; in 28% of cases the LoR assessments did not draw sufficiently on other relevant information. While all internal key workers could access OASys, not all external ones could. This meant that in some instances the quality of OASys was not as comprehensive as it could have been. It also meant that processes for passing relevant information to external staff who had no access to internal case recording systems was unclear.

Conclusion:

Performance against this criterion was good.

1.4 General Criterion: ASSESSMENT OF OFFENDER ENGAGEMENT
Potential obstacles or challenges to positive engagement are identified and plans made to minimise their possible impact.

72%

Strengths:

- (a) The identification and assessment of diversity needs was of a good standard. In 88% of cases potentially discriminatory issues or obstacles to engagement with the sentence had been identified. We were pleased to see that plans had been put in place to minimise their impact in 91% of cases. The area had implemented the use of a joint form for monitoring race, ethnicity and disability; this also captured language of choice. While there was evidence of this being completed on case files, not all offender managers were using it to its full potential.
- (b) In nearly all cases (99%) the race and ethnicity data had been clearly recorded. Potentially discriminatory and disadvantaging factors had been taken into account in 88% of cases. We saw examples of offender managers organising contact with offenders to take account of where they lived. Diversity issues and other individual needs had been assessed in 79% of cases.

Areas for Improvement:

- (a) We found inconsistent evidence of skills for life screening on files. A screening had been completed in 55% of cases. We felt this related to the area's process of undertaking screening for skills for life at the point of induction. While most offenders sentenced to a community order were inducted in groups where screening took place, those released on licence were not. The process for accessing screening with this group was unclear.
- (b) Where a full skills for life assessment was indicated this was completed in only 57% of cases. The process for providing information on the outcomes of assessments needed improvement. External tutors indicated that information on the outcomes of assessments was given to offender managers via e-mail, but there was limited evidence of how literacy and numeracy needs were built into sentence planning.
- (c) While we saw examples of offender managers planning to minimise obstacles to engagement, these tended to be practical, e.g. arranging appointments at set times or sending text messages to remind offenders of their appointments. There was less evidence that offender managers had actively assessed or taken learning styles, intellectual ability and motivation into account. This was evident in 60% (65) of cases.

Conclusion:

Performance against this criterion was good.

1.5 General Criterion: SENTENCE PLANNING

The offender manager plans interventions in custody and the community with a view to addressing criminogenic factors and managing any RoH to others. The initial sentence plan or unpaid work assessment is designed to describe a structured and coherent plan of work for each offender.

64%

Strengths:

- (a) Planning tended to reflect the tier and sentencing purposes. There were, however, some problems with tiering which we have discussed below.
- (b) In the vast majority of cases – 99% – an offender was allocated to an offender manager within the prescribed timescales.
- (c) Where a sentence plan had been completed, interventions to address offending behaviour had been included in 82% of all cases. Arrangements for delivering the intervention were defined in 72% of cases. Planned contact levels of each requirement were evident in 75% of community cases.
- (d) In 97% of cases steps had been taken to ensure that the offender fully understood the requirements of the sentence and breach proceedings. This was supported by the offenders we interviewed, the majority of whom indicated that they were clear about what action would be taken if they failed to attend appointments.

Areas for Improvement:

- (a) As detailed above we found inconsistency in relation to the tiering of offenders. 21% of cases (23) were incorrectly tiered. A small number of cases were tiered lower than the management approach would suggest, e.g. a case allocated to Tier 2 but the work undertaken indicating a Tier 3 approach. In other cases the management approach was lower than the allocated tier. Tiering decisions were overseen by practice supervisors, but it was unclear how robust these procedures were.
- (b) The quality of sentence planning was insufficient in a number of aspects. Plans lacked relevance and were not sufficiently focused on the change needed to reduce the LoR. In just over half (56%) of the cases inspected we assessed sentence planning as giving a clear shape to the sentence, and in fewer cases did it focus on achievable change (48%). The roles and responsibilities of staff were clearly outlined in 59% of cases. There was not always a clear link between the factors identified in the LoR assessment and the interventions planned, and in some sentence plans there was no detail of key requirements of the sentence, i.e. unpaid work. The sequencing and timing of objectives were limited. We found that while offender managers understood the importance of sequencing, they were not using the format of the plan to document this; objective one did not always mean the most important objective that needed to be worked on first.

- (c) The sentence plan was completed within the appropriate timescale in 57% of cases. In many instances this related to the delay in completing the LoR assessment.
- (d) RMPs were cross-referenced to the sentence plan in only 35% of appropriate cases. There were examples of relevant offence-focused work not being included in the RMP and requirements aimed at protecting victims were not always included as a specific risk management action.
- (e) In only two of the eight custodial sentences did the sentence plan clearly state which elements would be delivered in custody and which in the community.
- (f) While offender managers demonstrated that diversity issues had been identified, these did not always feature in the sentence plan. Although we saw evidence of diversity needs being recorded on the internal case recording system, only 62% of sentence plans were sensitive to diversity needs.
- (g) In 38% of cases there was no evidence that the offender had had the opportunity to participate in the planning process. Information contained in the self-assessment questionnaire in OASys was not always fully utilised. The majority of offenders we spoke with had little recollection of seeing or signing a sentence plan.

Conclusion:

This criterion represents a priority for improvement.

2. IMPLEMENTATION OF INTERVENTIONS

2.1 General Criterion: DELIVERING THE SENTENCE PLAN

The offender manager facilitates the structured delivery of all relevant elements of the sentence.

56%

Strengths:

- (a) In 73% of cases arrangements to prepare offenders for interventions were in place. This mainly related to pre-programme work.
- (b) We saw evidence of offender managers working hard to meet the full range of offender needs by, for example, the use of community resources and work to secure and increase compliance. In 73% of all cases offender managers demonstrated commitment to their work with the offender. There was increased evidence of offender management oversight in Tier 4 cases. In 74% of cases they coordinated the input of all other workers. In 84% of Tier 4 cases we assessed the quality of communication between the offender manager and other workers was good and in 81% of cases there was evidence that they motivated and supported the offender throughout their sentence.
- (c) Of the eight custodial cases, custody reports (e.g. parole, HDC, ROTL) had been prepared for two cases and both were completed on time and considered clear with an appropriate assessment of RoH.
- (d) In 73% of all cases the sentence plan was reviewed in accordance with the national standard. This increased to 81% for Tier 4 cases. Case administrators told us that they played a key role in improving practice in this area. Each administrator had documented sentence plan review dates for each offender and would remind offender managers of this electronically.

Areas for Improvement:

- (a) As indicated previously, offender managers did not use the sentence plan format to identify the priority interventions that needed to be delivered. In 34% of cases there was no evidence that interventions were sequenced according to RoH and offending need. As well as inconsistent recording of priority objectives, offender managers indicated that they were sometimes constrained by gaps in services, e.g. substance misuse and long waiting times for accredited programmes, an issue that will be discussed later in this report.
- (b) While arrangements for pre-group work were in place for three-quarters of the sample, arrangements to reinforce skills learned in interventions after the conclusion of programmes was lacking in 47% of cases. In a few accredited programme cases there was no supervision requirement and a lack of clarity regarding the limitations of the 'responsible officer' role meant in one case no pre-programme work had been undertaken. Continuity between work in

custody and that in the community was insufficient in 46% of cases. Work in relation to offending behaviour was a key area where continuity of work was not evident.

- (c) We found examples of cases where the momentum in the delivery of the sentence plan was not sustained. A lack of attention and focus in setting the right objectives at the start of the sentence had impacted on the quality of the delivery of the plan. It was unsurprising that in only 37% of cases did objectives give a clear direction to the sentence.
- (d) There were cases where effective communication in order to facilitate the management of the sentence was absent. The coordination of other staff and oversight of work by offender managers was evident in 68% of cases. Similarly, communication between the offender manager and other workers and between all staff and the offender was assessed as good in 67% and 61% of cases respectively. In our discussions with offender managers we found that communication was happening but that this was not being routinely recorded. Key workers noted that they were not routinely contributing to sentence plans. This meant in some cases a number of different plans were in place for one offender rather than one coordinated plan of work.
- (e) In just over a quarter of cases the sentence plan was not reviewed within the national standard time limits. There were examples of assessments and objectives being 'pulled through' from previous assessments. This meant that irrelevant and inaccurate information and objectives were being used to form the basis of continued work with offenders. As identified earlier in this report, the use of other information to support the management of the offender was underutilised. Information gained from programme tutors, while clearly recorded, was not always used to evidence changes in behaviour and attitude or to support new sentence plan objectives. In 46% of cases other sources of information were not used in the review of the sentence plan.
- (f) Work between offender managers and prison staff to prepare offenders for release was lacking in just over half of the relevant cases. In only 25% of licence cases preparation for release was assessed as proactive. In a small number of cases offenders had been released under the ECL scheme and offender managers stated this had left little time to prepare them for release.
- (g) In just under a third of cases (32%) sentence requirements were not fully implemented.

Conclusion:

This criterion represents an urgent priority for improvement.

2.2 General Criterion: PROTECTING THE PUBLIC BY MINIMISING RISK OF HARM

All reasonable actions have been taken to protect the public by keeping to a minimum the offender's RoH to others.

64%

Strengths:

- (a) RoH had been reviewed no later than four months post-sentence in 76% of licence and community order cases. 90% of relevant cases had been reviewed at four monthly intervals thereafter. There was an improvement in the frequency of RoH reviews for those cases managed within Tier 4. Of the eight custodial sentences, six had been reviewed, as required, no later than 12 months after sentence. There were four custodial cases where there was a significant change in circumstances; of these the RoH had been reviewed in three.
- (b) Nine cases were managed within the MAPPAs process at Level 1 and 22 at Level 2. The arrangements were used effectively in 77% of cases. We saw examples of MAPPAs actively contributing to the management of RoH by enforcing reporting frequency and setting licence conditions. In most cases there were records of monthly minutes on file detailing action required of named professionals and key decisions made. We assessed that all staff had contributed effectively to MAPPAs in 81% of relevant cases. The area had implemented the practice of utilising the RMP in OASys as the key plan in MAPPAs meetings. Offender managers were responsible for updating the RMP within 48 hours of a MAPPAs meeting. While this ensured that there was one plan which all agencies were responsible for monitoring, we were concerned that this had not improved the quality of plans for some high RoH offenders.
- (c) There were two cases where the offender was recalled to prison. In both cases the recall was appropriately actioned and formed part of the risk management process. The offender manager had contacted one offender to reinforce the reason for the recall, and in another this was done in person directly after the recall.

Areas for Improvement:

- (a) Offender managers were not always responsive to significant changes in an offender's circumstances that might indicate a change in RoH status. In 56% of community and licence cases the RoH had been reviewed. There were too many cases (36%) where ongoing planning to address RoH to children had not been undertaken. This was consistent with our findings in the assessment of RoH to children. Home visits to monitor child safeguarding did not occur in 17 out of 28 cases.
- (b) Ongoing planning to address RoH to the public, known adults and staff was absent in a quarter of cases. In only three of the custodial cases did the offender manager and offender supervisor engage with internal risk management processes. There were improvements in ongoing planning to manage risks among all groups where the case was managed at Tier 4.

- (c) Offender managers were not always clear about the role home visits played in public protection. In relevant high or very high RoH cases, 38% had had a home visit during their sentence, none of which occurred within the ten day national standard. In half the cases no home visit had been undertaken to monitor RoH when one should have been.

Conclusion:

This criterion represents a priority for improvement.

2.3 General Criterion: VICTIMS

Consistent attention is given to issues concerning victims.

69%

Strengths:

- (a) In 27 cases there was a requirement that statutory victim liaison was offered. We were pleased to see that face-to-face contact had been offered within the prescribed timescale in 24 cases. Twenty-three cases received information about the criminal justice process. Opportunities for victims to express views about licence conditions had taken place in 94% of relevant cases. In 93% of cases the victim was notified of the offender’s release in a timely manner.
- (b) Information gained from case assessments confirmed the positive views fed back by victims in our interviews and questionnaires. We saw examples of appropriate licence conditions set to safeguard victims. Where an offender had been excluded from entering a specific area as part of the licence conditions, maps documenting the areas they were excluded from were available in case files.

Areas for Improvement:

- (a) Victim safety was given appropriate priority in only 68% of cases. In a number of cases victim issues were not sufficiently recorded in sentence planning and RMPs. There were a small number of cases (seven) where it was not clear, for example, how restrictive conditions to safeguard victims would be monitored. This was important given the concerns expressed by victims on how offenders who broke conditions would be dealt with. Additionally, evidence of offender managers maintaining sufficient contact with VLOs as part of the sentence management process was inconsistent.
- (b) In 60% of relevant cases no victim awareness work had been undertaken. These issues were not always given priority in sentence planning or identified as a key objective of change. The offenders we spoke with indicated that outside of offending behaviour programmes, work on victim awareness was limited.
- (c) While we saw excellent examples of work between the offender manager and prison-based offender supervisor promoted victim

safety but this was not consistent. Of the eight custodial cases inspected we found evidence of work in relation to victim safety in only half.

Conclusion:

This criterion represents a priority for improvement.

2.4 General Criterion: ENSURING CONTAINMENT AND PROMOTING COMPLIANCE (Punish)
Contact with the offender and enforcement of the sentence is planned and implemented to meet the requirements of national standards and to encourage engagement with the sentence process.

82%

Strengths:

- (a) All offenders in the custody sample were held in institutions that appropriately restricted their liberty and none had absconded or escaped.
- (b) The area had implemented the policy of group induction for community orders, which included the provision to screen for basic skills. In 96% of cases offenders received a prompt induction post-sentence. Those we spoke to commented that the induction process provided them with information on the expectations of the sentence and what action would be taken if they failed to comply.
- (c) The frequency of appointments conformed to the national standard in 90% of all cases and met any RoH considerations in 76%. Offender managers frequently used SMS texts as a way of reminding offenders of appointments. Where offenders failed to comply, judgements as to whether their absence was acceptable or not were consistent and appropriate in 90% of cases. Where breach action was required, this took place within the national timescale in 83% of cases. There were numerous examples of offender managers using the breach process positively to set clear boundaries and, where necessary, secure improved compliance. Where PPO cases required enforcement action, this was undertaken promptly and facilitated by good liaison with the police.
- (d) For unpaid work cases, the frequency of appointments increased to 96% of relevant cases and facilitated the requirements of the sentence in 88%. The area had a variety of placements including high profile projects that attracted significant media attention. Overall, in 92% of cases the unpaid work placements were considered beneficial to the local community; 88% were considered to be suitably demanding. A number of offenders whom we spoke to stated that their placements generally involved physical work.
- (e) The monitoring of exclusion and curfew requirements was considered satisfactory in 15 out of the 18 relevant cases.

- (f) There were 12 cases where the offender was identified as a PPO. In nine of these cases a reporting pattern had been established that supported all elements of the sentence.
- (g) Offender managers demonstrated an appropriate level of oversight of offenders' attendance in 92% of cases. We found examples of full and timely case entries from programme tutors and other key workers responsible for delivering interventions.
- (h) Nearly all cases (99%) had REM detail clearly recorded and 86% were considered well organised. The recording of information was considered clear in 80% of cases and timely in 81%.

Areas for Improvement:

- (a) As noted previously in this report, the level of contact between offender managers and prison staff pre-release was insufficient in 43% of cases. In some cases this meant that offender managers were unaware of the work that the offender had done while in custody and this resulted in a lack of coherent planning to support effective offender management outcomes in the community.
- (b) The area had acknowledged that its PPO scheme required further development to ensure that all offenders received an appropriate enhanced level of service. In a small number of cases there was no evidence of increased reporting to address the LoR.
- (c) While recording of information was in the main assessed as clear and timely, there were a number of cases where it was insufficient (35%). Information recorded did not always provide a record of the work done and objectives achieved during the course of supervision. This meant that over time offender progress could not be easily tracked.

Conclusion:

Performance against this criterion was good.

2.5 General Criterion: CONSTRUCTIVE INTERVENTIONS (Help and Change)

Interventions are delivered to identified ends and to meet the requirements of the sentence: help and change.

55%

Strengths:

- (a) Sufficient work and resources were directed at community reintegration issues in 71% of cases. Offenders interviewed at the approved premises spoke positively about the range of interventions they were able to access including the LiMO programme. There were also arrangements to provide weekly community drug and alcohol services. This meant that they could gain speedy access to assessments and treatment. This provision, however, was available in only three offices.

- (b) Although there were only three cases with a DRR, regular reports were prepared in two of them. These were comprehensive and outlined the progress the offender had made in their treatment, the level of compliance and number of positive or negative drug tests. There was evidence on file of regular communication of the results of drug tests to offender managers.
- (c) Offenders were offered a wide range of learning choices through the area's partnership working. They could learn carpentry, gardening, construction, ICT, bakery skills, warehousing, fork lift truck driving, drama and photography or work in the care sector. A number had gone on to volunteer and eventually work in the probation service, offering support and help to others. There was good access to a range of qualifications. Offenders could achieve accredited awards in basic skills and a range of vocational qualifications.
- (d) The area had invested in a number of accredited and non accredited interventions as a way of supporting offender management outcomes. A short alcohol programme – LIAP – had been developed.

Areas for Improvement:

- (a) Disappointingly, we found no evidence in 54% of cases that constructive interventions sufficiently challenged the offender to accept responsibility for their offending. This is consistent with our earlier findings on the quality of sentence planning at the initial stages. Not all the offenders to whom we spoke felt that they had gained new skills or developed the way in which they thought about their offending. In other cases there was an absence of offence-focused and victim awareness work. Internal key workers commented that targeting to programmes was not always accurate, resulting in ill-prepared and inappropriate offenders being referred to groups. While this was not a significant problem its impact was noticeable. A new targeting matrix had been developed by the area and was due to be issued soon after our inspection.
- (b) Following on from the lack of consistent screening for basic skills, arrangements to provide an intervention once a need had been identified were similarly insufficient. In only 37% of relevant cases was an intervention provided to meet literacy, numeracy and life skills development needs. Offender managers indicated inconsistency in delivery across the area, with parts of the area having no access to basic skills provision at all. This meant that there was spare capacity that was not being fully utilised.
- (c) There were 35 cases with an additional programme requirement. The majority of these were for general offending programmes and substance misuse. Of these only 19 commenced the programme as set out in the sentence plan. Of the remaining 16 where this did not happen there was an acceptable explanation in only eight cases. This finding concurred with the feedback from offenders about the delay they experienced in commencing programmes. Internal key workers highlighted the difficulties of providing a consistent service across a large geographical area where transport links were not

always sufficient. There were also particular issues in relation to programme demand especially for IDAP and substance abuse interventions.

- (d) A range of interventions was offered in the area's two approved premises. In the main not all interventions identified in the resident's sentence plan were delivered during the period of their residency.
- (e) Reflecting our earlier comments on the limited extent of liaison pre-release between prison staff and offender managers, work to preserve community links was lacking in four cases and work to promote the positive factors in the offender's life was absent in five of the eight relevant custody cases.

Conclusion:

This criterion represents an urgent priority for improvement.

2.6 General Criterion: RESTRICTIVE INTERVENTIONS (Control)
Interventions are delivered to identified ends and to meet the requirements of the sentence: control.

86%

Strengths:

- (a) Restrictive interventions were fully monitored in 93% of cases. Whilst reasonable action to minimise RoH was taken in 83% of relevant cases, it did leave eight cases where more work could have been done. There was evidence in some cases of offender managers making regular checks with the police to ensure that restrictive conditions were complied with.
- (b) In all ten applicable cases approved premises had been used effectively to manage offenders who represented a high RoH to others. Both approved premises provided individual curfews and good links with the police to monitor restrictive conditions.
- (c) In 90% of licence cases, where additional requirements were required, these were assessed as comprehensive and proportionate to minimise RoH and the LoR. Additional licence requirements were proportionate to the protection of victims in 86% of cases.

Conclusion:

Performance against this criterion was good.

Strengths:

- (a) Arrangements for interventions had taken account of diversity issues in 84% of cases. We found that offender managers were generally responsive to diversity needs and this view was supported in our feedback from offenders. Issues of disability were appropriately addressed in 85% of cases. As previously commented on, the use of the joint race and disability monitoring form was positive. While diversity issues and disadvantaging factors were not always recorded in the sentence plan, there was evidence that this had been given a higher priority in the actual supervision of the case. In all seven of the relevant approved premises cases the regime had taken account of the offender's diverse needs.
- (b) In five out of six relevant cases the offender had been asked for their consent to undertake group work activity in either an all white or all male setting. In the two cases where this occurred, arrangements had been put in place, in both cases, to support the offender's engagement.
- (c) In 94% of cases the offender had been informed that discriminatory behaviour would not be tolerated. This concurred with the feedback from offenders who, when asked about this, indicated that it had been thoroughly covered and fairly applied.

Area for Improvement:

- (a) The management of literacy needs and dyslexia was insufficient in 65% of relevant cases. It was not clear how offender managers took account of offenders' intellectual ability when delivering interventions. While key workers had made amendments to programme materials and administered psychometric tests through a more participative approach in order to meet dyslexia and literacy needs, this was an area of work that needed more development.

Conclusion:

Performance against this criterion was good.

3. ACHIEVEMENT AND MONITORING OF OUTCOMES

3.1 General Criterion: ACHIEVEMENT OF INITIAL OUTCOMES *Planned objectives are efficiently achieved.*

54%

Strengths:

- (a) There was evidence that offender managers had been responsive to changes in RoH in a small number of cases, both in relation to an increase and decrease in the control element of the sentence. There was an increase in restrictive interventions in 11 cases and in 14 cases the offender had been moved to a higher tier. In six cases the offender's behaviour had led to a decrease in MAPPA level, five of these were managed within Tier 4.
- (b) Eighty-six offenders (80% of the sample) had not been convicted of a further offence. 69% of offenders who responded to our questionnaire indicated that they were less likely to offend as a result of the work of the probation area.
- (c) The **punish** sentence objective had been achieved in 92% of all cases.
- (d) In the majority of cases the level of resource used was consistent with the RoH and LoR. There was a small number of cases where the amount and intensity of interventions was inconsistent with the tier within which the case was being managed and the required skills and knowledge of the allocated offender manager. There were a small number of PPO cases (three) where the resources allocated were not consistent with the PPO status.
- (e) Some partnership projects helped offenders progress successfully. For example, offenders were very positive about the Intermediary Labour Market project in social care. This provided challenging, personal development workshops where offenders were enabled to gain certificates in basic skills, first aid, food hygiene, and health and safety. The course lasted six weeks and there was a five week placement. The project had a 95% success rate. One offender who completed the course had gone on to work as a support worker in a homeless centre and was working towards an NVQ Level 2 in social care.
- (f) There was evidence of unpaid work schemes being of benefit to the local community. We saw a sample of schemes that had been established as community safety partnership projects which, in the main, focused on environmental cleaning to promote safer and cleaner areas. Some promoted social inclusion opportunities as they involved offenders working alongside other community agencies.
- (g) Most learners on ETE interventions achieved a qualification. They achieved other awards that enhanced their job prospects, for example: basic skills, first aid, manual handling, health and safety, IT and the drivers' theory test. There was a culture of celebrating

offenders' success. The area held award ceremonies for offenders to recognise their achievements. These were held in quality venues, with high profile speakers and award presenters. For many learners this was the first time they had achieved such an award and this was seen as a positive step to help them reintegrate into communities.

Areas for Improvement:

- (a) Given our earlier comments on the lack of specific objectives on victim awareness during sentence planning and limited attention to this in the delivery of the plan, it was not surprising that in 78% of cases there was no evidence that the offender demonstrated increased victim awareness. The area had developed a one-to-one victim awareness package but this was underutilised by offender managers.
- (b) Although 67% of the case sample had complied with the requirements of the sentence, this left a sizeable minority that had not and more work needed to be done to improve this.
- (c) Where OASys had been re-scored (70 out of 106) the most recent score showed an improvement in only 27 cases. Thinking and behaviour was the most common offending need identified followed by alcohol misuse. Of those offending related needs that were assessed as a priority, there had been no change or a deterioration in 70% of cases.
- (d) In only a quarter of cases was there evidence that learning outcomes and skills had been applied. In 59% of cases there was no evidence of a demonstrable change to the offender's attitude or behaviour.
- (e) The **control** sentence objective was achieved in 63% of relevant cases. This meant that in a sizable minority of high RoH cases offenders were not adequately controlled. In ten cases it was unclear whether contact had been made with the police Domestic Violence Unit to check whether there had been any call outs. The **help** objective was achieved in just over half of all relevant cases. The **change** objective, the most difficult to achieve, had been achieved in only 16% of cases. There were no significant differences in the achievement of sentence objectives in Tier 4 cases as compared to those managed within lower tiers.
- (f) In a quarter of cases the resources used were not sufficient to achieve planned objectives. As previously discussed in the report, although resources were available for offence-focused and victim work, offender managers were not always proactive in undertaking this work where there was a need to. We felt that this was partly to do with the view held by some offender managers that interventions were delivered by interventions staff. We also saw examples of work being done with offenders that did not relate to the sentence objectives.

Conclusion:

This criterion represents an urgent priority for improvement.

3.2 General Criterion: SUSTAINABILITY OF PROGRESS

Results are capable of being sustained between different phases of a sentence and beyond the end of supervision.

61%**Strengths:**

- (a) In 82% of cases the offender manager ensured that the offender was aware of community resources that would address their offending needs. Overall in three-quarter of relevant cases we assessed that sufficient attention had been given to long-term community reintegration issues.
- (b) The area had invested in a range of initiatives that supported core probation work and created opportunities for offenders to gain skills and employment.

Areas for Improvement:

- (a) While the area was to be congratulated for allocating offender managers to cases promptly, their continuity was a less positive picture. Continuity of offender management had been achieved in 36% of all cases. In 43% of cases there had been two changes of offender manager and in 21% of cases there were three or more changes. A contributory factor to this was the increased use of FDRs which were typically completed at court by staff other than the offender manager. Of greater concern was that in 61% of cases where there had been a change on more than three occasions, this had impacted negatively on the management of the sentence. There was evidence to suggest better continuity of offender manager in Tier 4 cases however; of the ten cases where there were three or more changes, we assessed this had had a negative impact on sustaining progress in seven.
- (b) Structured sentence planning had been given sufficient priority in only 46% of cases. We found that initial plans that were inaccurate or of insufficient quality had continued to be used to inform the work done with offenders. In a number of cases, planning was not sufficiently updated to reflect changes in their circumstances or indeed progress. This meant that over time the content, pace and management of the sentence was not sufficient to support outcomes.
- (c) The area through its partnership work enabled tutors to access a wide range of learning opportunities for offenders across the area. However, in a small number of cases there was little timely partnership working at the end of offenders' programmes to move them onto college courses where appropriate. More could be done to consolidate or progress learning further.

Conclusion:

This criterion represents an urgent priority for improvement.

4. LEADERSHIP AND STRATEGIC MANAGEMENT

4.1 General Criterion: LEADERSHIP AND PLANNING

There is active leadership in the implementation of national policies via local policies and procedures which are regularly monitored and reviewed, through proactive planning with other key agencies, and by promoting the diversity agenda.

Satisfactorily met

Strengths:

- (a) For 2008/2009 the area had developed a combined business plan and development strategy that took account of national changes and the prospective move towards trust status. The plan included local, regional and national objectives and focused on efficient staff deployment, public protection, meeting targets and managing within budget. There was also an emphasis on greater partnership work to improve efficiency both internally and through the delivery of services for offenders. The area had taken a consultative approach in its planning process by seeking views from a range of relevant service management groups, which included the Staff Care Advisory Group. The Board was actively involved in monitoring the progress of the plan through quarterly reports.
- (b) The staff development plan, team plans and individual performance objectives all followed from this strategic planning process. Of those staff that we interviewed, the vast majority indicated that their individual appraisal was linked to the area business plan. The area had implemented the process of twice-yearly visits to teams to promote the aims of the plan and take account of staff views. 80% of those we interviewed felt well informed about the policies which had been established.
- (c) The area had worked hard to foster positive relationships with sentencers. Partnership arrangements were supported by a comprehensive protocol covering the area's contribution to court work, the process for escalating concerns and a review process. A protocol had been established since 1999 and revised in 2005 and in 2007; this demonstrated a long-standing commitment by the two agencies to work collaboratively. Strategic partners were particularly complimentary regarding the area's contribution to court work, in particular the role that the increased use of FDRs had made in working to report timeliness outcomes identified in the CJSSS. Board members were represented on the Strategic Sentencer Liaison Forum, which enabled the area to contribute to strategic decision making. There were also local liaison forums for local benches. The importance of effective liaison arrangements with sentencers was further demonstrated by the area's commitment to gaining feedback. A bi-annual sentencer survey had been conducted since 2003. The results of the most recent survey were available in March 2008 and

the area had achieved a response rate of 35%. On the whole sentencer satisfaction across a range of work streams had increased steadily over five years, in particular sentencers' confidence in the area to manage community sentences effectively.

- (d) Strategic partners felt strongly that the area was proactive in its engagement with them. It was appropriately represented on all key statutory groups. Changes in the area structure aimed to strengthen representation on more local committees by establishing three local partnership forums, managed by the three area managers, where issues specific to that area could be discussed. The area had gained representation on a number of Welsh Assembly Government groups such as substance misuse and strategic housing. The role of partnership work was a clear priority for the SMT, the CO and Board Chair. Strategic partners were particularly impressed with the range of services in which the area had engaged, some of which had longer term benefits for offender management and public protection, e.g. the conditional cautioning project. They were equally impressed by the creativity of some of the arrangements. For example, the area had engaged in Intermediary Labour Market projects and had utilised these to support offender learning and skills and employment prospects. A proactive commitment to commissioning through pooled resources also meant that the area maximised its contribution to offender management outcomes particularly in the area of substance misuse.
- (e) Partner agencies confirmed the positive contribution the area made to public protection. The development of MAPPAs had been led by the area and the SMB was currently chaired by the police to strengthen ownership of the process. An agreement to co-locate the police and probation MAPPAs coordinators had been established further to support this aim. While there was a need to improve the overall monitoring of MAPPAs processes, the area had worked to reduce the number of Level 2 and 3 offenders by 28%. The area demonstrated its commitment to improving RoH practice in MAPPAs procedures by establishing the process of using the OASys RMP as the overarching plan in MAPPAs cases. We were pleased with this development and the focus on creating better continuity of practice in high and very high RoH cases. All staff were required to undertake specific RoH training over an 18-month period. This included a process of signing off individual staff by the SPO as competent in managing RoH. The area had also invested in delivering three workshops to support RoH training. There was evidence of MAPPAs engaging with housing and a pilot project to provide floating housing support for high RoH offenders in Denbighshire had been commissioned.
- (f) The area was engaged in, and had developed an impressive array of diversity forums, some of which linked into wider diversity forums both pan-Wales and across England and Wales. Oversight of the work in this area was the responsibility of the Board who received an annual diversity and equality report. It was evident that the area had taken the Welsh Language Scheme seriously. Diversity monitoring forms included the offender's language of choice, and the area had

specifically recruited Welsh-speaking staff to meet the language needs of offenders. The area had shown a willingness to deliver interventions in Welsh and had translated ETS and was in the process of translating DID. Court report interviews were also available in the medium of Welsh. Partner agencies commented that a policy of providing services in Welsh had been agreed and implemented.

A single equality monitoring form was in use accompanied by guidance to staff, as well as a process for capturing information to provide diversity reports. Equality schemes for race, disability and gender were in place with accompanying action plans, and the area was working towards a single equalities scheme. All functions and policies had had an initial diversity impact assessment, which then led to a full impact assessment on key priority areas. One outcome from the impact assessment of unpaid work identified the need to assess all female offenders' suitability to complete their sentence in agency placements, or work in a group where other women were present. A further example was the use of a quality assurance process on all reports written on women. At the time of the inspection a full impact assessment of human resources policies had not been undertaken where the need indicated.

- (g) The area had been commended by NOMS for its initiatives to engage effectively with service users. Four specific projects, including the establishment of a Prison Service User Group were identified as best practice. The group was a particular achievement given that there were no custodial establishments in North Wales. There was also an inspiring volunteering programme developed by the North Wales Community Justice Partnership. This aimed to increase community volunteering in criminal justice and had the added benefit of engaging with, and exposing the local community to the work of probation staff and other criminal justice and social care sectors. These initiatives were supported by the routine collation of offender views across a broad spectrum of groups.
- (h) The area was receptive to feedback from NOMS regarding performance. The use of findings from external bodies was seen as a positive process. It had established internal audit procedures to identify key areas for improvement, e.g. the programme review report. The area had continued to use EEM to inform improvement objectives within the business plan. The whole process had been externally validated via Wales Quality Centre assessment and the area had achieved Wales Quality Centre public sector awards on two occasions. It had also achieved IiP status on two separate occasions and had maintained this status.

Areas for Improvement:

- (a) Although a clear business planning approach was in place, the risk log for the current plan was in draft form. Risks identified did have a business owner but actions to mitigate the risks were absent. As a consequence, clarity about how the risks would be managed was not

documented well enough. A separate interventions plan had been completed but this was also in draft form and had not added value to the overall planning documentation.

- (b) Whilst there was a significant amount of partnership activity, at the time of the inspection there was no written 'reducing reoffending strategy' that provided a coherent framework for meeting offending related needs linked to identified strategy pathways.
- (c) While there was a strong commitment to collating service user views and actively engaging with them, more could be done to utilise the outcomes from these activities to inform business planning and develop service delivery more widely. The area was aware of this and had established a management post to develop a user engagement strategy.
- (d) It became apparent during inspection that MAPPA Level 1 cases were not routinely managed through the formal MAPPA process. Strategic partners commented on the absence of a clear audit and monitoring process for all such cases. They also indicated that not all actions identified in MAPPA forums were actively followed through and identified a need for further training for chairs of MAPPAs.
- (e) 67% of the 80 offender managers interviewed said that managers demonstrated a professional approach and 56% felt that they modelled positive leadership behaviour. While most offender managers were complimentary regarding their immediate line manager, comments towards senior management were less positive. Some staff expressed concerns regarding the impending restructure and felt there had been too many organisational changes in recent years. At the time of the inspection the area was engaged in a restructuring process and this was likely to have had an impact on staff views of management.

4.2 General Criterion: PERFORMANCE AGAINST NATIONAL AND REGIONAL TARGETS
Key performance targets are consistently met, with careful attention to diversity issues throughout.

Satisfactorily met

Summary of results for North Wales from the NOMS IPPF: April-December 2007	
IPPF domain	
Public Protection	Good performance
Offender Management	Good performance
Interventions	Passable performance
Operational Capability, Resource Use and Strategy	Passable performance

Area score	Good performance
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Detailed results for each metric making up the above domains are at Appendix 1.

Strengths:

- (a) The area was committed to continued performance improvement. There were a number of performance measures where it was either meeting or exceeding its targets. Of particular note was the increase in the timeliness of court reports. There was also good performance in the NOMS public protection measures, although our findings indicated a need for improvement in the quality of work. Under the NOMS IPPF North Wales for April 2007 to December 2007 received an overall score of 3, which translated to good performance.
- (b) The Board was committed to performance improvement and it was clear that middle managers were aware of their role in performance management. The area performance report format was explicitly linked to SLAs with the DOM and a comprehensive reporting structure broken down to team and individual performance level was in place. This was provided to Board members and middle managers on a monthly basis. There was evidence of a sustained effort to improve performance in key areas such as DRR targets. The area had acted responsibly to this challenge by establishing a specific Practice Development Group to oversee improvements and had additional support from NOMS. While the area was unlikely to achieve its target for 2008/2009, there was evidence that it had developed a clearer understanding of what impeded performance and how this could be remedied.
- (c) There was good engagement with regional partners to improve practice. Annual quality assurance reports for OASys were produced on a pan-Wales basis in order to increase the quality of OASys completion. As indicated earlier, the area had also contributed

significantly to the court targets on speedy and efficient justice through the increased use of FDRs. It had contributed to community safety and led on the decision to pool funding to provide a wider range of drug interventions for offenders. The area had also contributed to wider community safety initiatives through joint community payback schemes.

Areas for Improvement:

- (a) Whilst the area had met a number of its performance targets, there was room for improvement in several areas. Performance on the LCJB target of resolving breaches within 25 days was an ongoing challenge. Strategic partners had also noted this as an area for improvement and plans were in place to provide training to offender managers on how to prosecute a breach efficiently. 56% of the sentencers that responded to our questionnaire felt that the resolution of breach was working well in part.
- (b) Performance in relation to the timeliness of initial OASys reviews needed improving. There was evidence that management were aware of this and the OASys Quality Assurance Group was tasked to take forward the activities outlined in the improvement plan.
- (c) There was some attention to diversity issues in meeting targets, but this was underdeveloped. While the area was to be congratulated on the range of interventions available, these tended to be geographically based and meant that not all offenders could access key resources. The inconsistent provision of skills for life and accredited programmes across the area was an example of this. Some offenders, based on where they lived, were disadvantaged by not being able to access basic skills services or programmes. The geography and appropriate transport links were a particular challenge for the area. While efforts had been made to remedy this, we had identified gaps in services that had had a negative impact on the management of the offender in 21% of all cases in our inspection sample.

4.3 General Criterion: RESOURCE DEPLOYMENT
There is a strategic approach to deploying resources to deliver effective performance and support diversity initiatives and there are positive indications in relation to value for money.

Satisfactorily met

Strengths:

- (a) The area had reviewed its current structures to ensure resources were deployed to support offender management within tight financial constraints. Corrective action had been taken to increase the number of offender managers, streamline senior management to create three area management posts and promote greater clarity between the role of the SPO and PDM. The Board was fully involved

in agreeing the priorities for the restructure and took a leading role in communicating the rationale and the new proposals to staff. The SMT had taken a consultative approach which included union and staff discussions. The area's openly progressive approach to partnership work meant that it was able to increase programme output; externally recruited staff had a responsibility for delivering DID and OSAP. Additionally, the area had engaged in a range of external agency placements for unpaid work. This meant that 44% of all hours worked in unpaid work were the result of partnership placements.

- (b) RoH was given a priority through the deployment of staff. As with most areas, high and very high RoH cases were allocated to PO grade offender managers who mainly worked within Tier 3 and 4. Cases where the RoH was medium to low were typically managed by PSOs. The area had also developed two programme teams – one which managed high RoH interventions, and the other substance misuse and general offending behaviour interventions. The role of a psychologist to provide additional guidance and support was seen as positive, although concerns were expressed that accessibility was limited as there was only one post. It was noticeable in our discussions with staff that offender managers responsible for higher RoH offenders did not typically have lower caseloads than those who managed cases where the RoH and complexity of the case was lower, and this was a concern.
- (c) Workload allocation was aided by the use of the national workload management tool. Further local refinements had been made to incorporate tiering. Middle managers commented that the management of workloads was a continuing challenge and whilst the tool provided some guidance it was fairly rudimentary and was limited in its use for interventions staff.
- (d) The area had engaged in a number of diversity initiatives, although the outcomes from many of these were unknown. The performance and planning officer had a specific role in monitoring diversity across the area. An SLA had been agreed with North Wales Race Equality Network, which enabled the area to receive consultancy on issues of diversity. A key resource issue for the area was the production of court reports in Welsh. As OASys was not available in languages other than English this had meant that the area had to translate the report pulled through from the assessment. Investments had been made to increase interpreter services for offenders whose first language was not English. As previously mentioned, the area was actively monitoring the use of the Welsh language and a recent audit had indicated a number of key areas where additional investment was required. The SMT had commissioned a best value review on offender travel to ensure that offenders were not disadvantaged in attending appointments. The review had taken account of practice in Dyfed Powys, given similarities in geography, as well as Merseyside and Greater Manchester. As noted earlier, some offenders had commented on the distance they had to travel to access programmes. In these cases, however, the area had

always provided them with appropriate means to attend appointments.

- (e) Court staffing levels were considered appropriate. All but one of the sentencers that responded to our questionnaire felt that probation staff were sufficiently skilled and knowledgeable within the court setting.
- (f) The area demonstrated a strong approach to maximising funding from additional sources. In a number of initiatives it did not provide direct funding but had worked to influence the scope of the initiative in order that it included the offender population thus creating additional benefits. The area had been awarded the NOMS third sector demonstrator project, a pilot project involving the voluntary sector; namely future skills. The total value of the project was £400,000 for all four areas in Wales and involved the development of a modular skills programme linked to the OCN. The project intended to bring in local partners to deliver this and consideration had been given to using it as a virtual attendance centre for specified activities. The area had also succeeded in gaining additional ESF funding of £1 million to support the DAWN initiative; this was a coalition of services linked to reducing reoffending pathways that offenders could access.

Areas for Improvement:

- (a) The SMT had identified a lack of role clarity as a significant risk in the effective delivery of the new organisational structure. The previous structure had resulted in SPOs having a range of work that was too broad. In addition clarity regarding management oversight of staff needed strengthening. While the new structure went some way to resolve this, further work was needed to ensure that role clarity in the new PDM role was well embedded and understood by all staff.
- (b) Through interviews with offender managers and our case file assessments, we saw that resources were not always prioritised according to RoH. An internal programme review report, focused on the east of the area, identified inconsistency in targeting to accredited programmes which meant that offenders were being referred to programmes inappropriate to their needs and RoH profile. An outcome from this was an increased demand for programmes that impacted on their availability for other eligible offenders.
- (c) There were considerable gaps in the provision of an enhanced service for PPOs and this had been acknowledged by the area. We saw examples, albeit it small in number, of offenders receiving minimal input and reporting levels where their LoR required a more intensive approach. A review was under way to provide a more coordinated and consistent service and this had been supported by a PPO coordinator post jointly-funded by the area and the police. While the area was confident that the existing matrix was identifying offenders correctly, the level of other agency engagement was

limited and impacted negatively on the scope and amount of interventions available for PPOs. There was no consistent format for chairing PPO meetings and aggregated performance data on PPOs, that focused on the quality of input and outcomes, had not yet been established.

4.4 General Criterion: WORKFORCE PLANNING AND DEVELOPMENT

Workforce planning and development leads to a good match between staff profile and service delivery requirements. Relevant diversity legislation is observed in staff recruitment and deployment.

Partly met

Strengths:

- (a) As previously noted the area had engaged in a difficult restructuring exercise to ensure that it had the correct staff profile to meet defined demand. It acknowledged that managing the demands from court within finite resources was a particular difficulty and had taken the pragmatic decision to recruit a further ten TPOs for 2008. The area had anticipated the requirements of the new offender manager staff training framework and had included work-based training as part of the new PDM role.
- (b) The area had a current training plan that detailed the training requirements for the current year (2007/2008). Priority was given to those elements of training that focussed on RoH and the development of TPOs. The introduction of the new PDM with a clearer accountability for supporting TPO learning was seen as a positive step by management. 78% of offender managers we interviewed said that their training and development needs had been well met by the area. This was echoed by the six TPOs we interviewed, all of whom felt that appropriate attention had been paid to supporting their professional development and providing appropriate learning opportunities. The post-qualifying scheme provided staff with the opportunity to study for an external qualification. The area had also committed to funding 50% of the costs of such training where appropriate. A small number of staff (four) had made use of this facility in the last financial year.
- (c) 90% of staff interviewed said that they were clear regarding their role within the offender management model.
- (d) There was evidence of a mature relationship between senior managers and the union, supported by regular meetings between union representatives and the CO. Consultation had taken place on key events, in particular the new organisational structure. Union representatives formed part of the Staff Care Advisory Group that had a role in commenting on all workforce related priorities in the business plan and developing strategies to promote staff health care.

- (e) 79% of staff interviewed received regular frequent supervision; 88% described satisfaction with the overall quality. A significant minority, 37%, said that supervision was excellent and this was a positive result. Most staff interviewed stated that supervision was focused on quality of practice, although a small number were concerned that too much time was focused on meeting national standard targets. Staff also received regular notes of supervision. 89% had had an appraisal within the last 12 months and, as noted earlier, a similar proportion were aware that their appraisal linked to the area business plan.

Areas for Improvement:

- (a) While the area had undertaken corrective action to ensure that the profile of staff matched offender management outcomes, evidence of a coherent approach to workforce planning was limited. Work had been undertaken that set out the number of hours/days that intervention staff would be required to deliver to meet defined need. There was, however, no workforce plan available during the inspection that clearly set out the number of PSO and PO offender manager grades needed to deliver offender management efficiently. A resource allocation system was identified as a key objective in the Business Plan for 2008/2009.
- (b) The current training plan was not sufficiently updated from the previous year's plan. For example, the training needs analysis for this year had not fully analysed the outcomes from the previous training programme. Given the impending restructure it was not clear enough how the current training programme would meet the needs of the new structure.
- (c) While some of the staff we interviewed felt clear about their role within the model, this was not applicable across all. In a small number of cases offender management staff stated that it was not their role to deliver interventions, where they would have been the best person to do so. This view, perhaps inadvertently, was supported by the area's business plan and development strategy that stated that the role of the offender manager was solely to commission rather than deliver interventions directly. The area had not clearly identified those situations where it would be appropriate for the offender manager to undertake offence-focused work with an offender. We were concerned about the potential for staff to absolve themselves of responsibility to undertake such work as part of their role. This was particularly worrying given the earlier evidence we found, where in a number of cases there was a lack of offence-focused and victim awareness work.
- (d) The appropriate resourcing of case administrators and clarification of role was noted as a key finding in the EEM report dated September 2007. This was also reflected as a key objective in the area's business plan. Case administrators we interviewed, while positive about the benefits of the new model, felt that the lack of standardised core procedures resulted in some confusion of role and blurring of tasks. This was heightened by the need to employ

receptionists in all offices. Case administrators indicated that the demand of the new role meant covering reception duties was a task that impacted negatively on their ability to manage their workload. A number interviewed told us that there were limited opportunities for specific training related to their role.

- (e) The level of sickness absence was higher than the target set by NOMS. The area was aware of this and had appropriately identified it as a key business risk. Resources had been invested in actively monitoring sickness absence and regular monthly reports were submitted to the SMT as well as additional scrutiny by the audit committee. The area had identified that while short-term sickness was relatively low, it was long-term sickness that had contributed to the increase. Work had been done to ensure that the sickness policy was rigorously implemented. Middle managers were particularly positive about the support they received in managing sickness and gaining appropriate advice and guidance from human resources. More positively 93% of staff said they were aware of the area's procedures in relation to addressing sickness absence. Additional investment in the Staff Care Advisory Group, which had been established for several years, was seen as making a positive contribution by management, to developing healthy workforce strategies.
- (f) The area had a range of schemes to comply with equalities legislation. As identified earlier in the report, initial impact assessments had been undertaken on most priority functions and policies. Full impact assessments on all work streams had not yet taken place and a single equalities scheme and action plan had not yet been finalised. While NOMS performance on collating ethnic monitoring data was good, we were concerned that only 82% of staff we interviewed did not recall completing an ethnic monitoring questionnaire in the last 12 months. A possible explanation for this was that the area collected ethnicity data on appointment or where the job role had changed. As such staff would have had data on ethnicity collated but not necessarily reviewed on an annual basis.

4.5 General Criterion: REVIEW AND EVALUATION
Outcomes of interventions are assessed and reviewed using available data.

Partly met

Strengths:

- (a) The area had engaged in a range of service user initiatives that were commended as good practice examples by NOMS, including offender involvement in volunteering and help in the development of user guides. The production of a user guide for approved premises, which all offenders could access, was one outcome from this initiative.
- (b) There was strong evidence that the area used monitoring information to promote improved compliance with key standards. It was beginning to recognise the importance of quality practice, and whilst this was relatively underdeveloped, we were pleased to see

the development of the OASys Good Practice Guide and the focus on improving the quality of RMPs as a positive step.

- (c) There was evidence that the area had used aggregated OASys data to inform further service provision. The alcohol screening tool and the short alcohol programme LIAP had been developed as a result of analysing OASys data, which identified alcohol services as an area of acute need. We saw several examples of the audit tool being used and offenders being referred to, and undertaking LIAP in our case assessments. Additionally, the use of OASys data had informed the bid for the future skills demonstrator project commented on earlier in this report.
- (d) A clear process was in place to share lessons learned from SFO reviews with Board members and individual staff. Board members received an annual report that provided a careful analysis of all SFOs during a specific year and any key areas of practice that required further attention in relation to managing RoH. Individual offender managers would receive feedback either by the reviewing manager or their immediate line manager and these would be recorded in supervision.

Areas for Improvement:

- (a) While there was evidence that the area used aggregated OASys data to inform practice and service delivery, there was less evidence that other outcome data were routinely used to develop services. This meant that the area was not always aware of the quality of provision that was being delivered to offenders and recognised this as an area for improvement.
- (b) There was no evidence that the area collated and evaluated concordance data relating to outcomes from sentences imposed. Of those sentencers that responded to our survey, 44% did not know whether the area collated sentence/outcome data.

4.6 General Criterion: COMMISSIONING OF SERVICES
There is efficient provision of effective services to support offender management outcomes and to ensure equal access to provision for offenders.

Partly met

Strengths:

- (a) The area had taken a mature and progressive approach to commissioning services and had been planning to appoint a business development manager to increase its research capacity. They were highly respected by external agencies for their proactive and collaborative approach to partnership work and was noted for their active role on commissioning bodies. The area had engaged in a wide range of interventions, some of which were co-commissioned, whilst in others it actively contributed to the design of provision. There was a considerable investment in SMT resources and senior

managers estimated that 30% of their time was spent on expanding partnership resource. The area was spending a total of 14% of its budget on commissioned provision, 3% of which was used for discretionary activity. This meant that the combination of direct and indirectly commissioned services resulted in a range of provision that was beyond the figure of 14%. The DAWN project was seen as a good example of collaborative working. The project was a consortium of services that provided interventions to meet a wide range of needs based on reducing reoffending pathways. Provision from this consortium was available both in the community and in HMP Altcourse to support community reintegration for released offenders.

- (b) The approach of bringing partnership provision in-house had been adopted. External staff were recruited to deliver substance abuse programmes as a means of expanding programme tutor capacity and maximising the delivery of interventions. The area was also committed to pooling budgets to enhance the commissioning process. It had successfully led on the pooling of drug interventions programmes, arrest referral and other legacy funding to create a joint budget of £1.8 million that could be used more flexibly to meet offender need.
- (c) The area had demonstrated its commitment to achieving efficiency by adopting a shared service arrangement with Cheshire Probation Area. These joint arrangements included shared support services such as IT and financial services. The agreement was supported by a comprehensive Memorandum of Understanding that required ratification by both Boards and was subject to regular review by the Consortium Board.
- (d) In those cases where additional services were required, offender managers generally rated these as sufficient, with employment services a clear strength. In 93% of relevant cases employment services were rated as sufficient. There were concerns regarding the quality of basic skills services provided and in 24% of cases services to meet the literacy and numeracy needs of offenders were assessed as insufficient.
- (e) There was no prison in North Wales, which represented a particular challenge. The area had responded positively to this and had developed a high-quality relationship with HMP Altcourse which was the only establishment that took a number of offenders from North Wales courts. Communication between the two agencies was described as excellent by the Head of the OMU in the prison and the area was praised for its commitment to joint work. Regular meetings to monitor the effectiveness of joint arrangements had been implemented between the probation senior manager for offender management and the prison Head of the OMU. A culture of joint training had also been established and the probation liaison officer based in the prison had responsibility for attending community team meetings to discuss and, where possible, resolve potential difficulties. Arrangements for facilitating prison visits had been

established, as had monthly monitoring arrangements for the projected number of offender manager visits.

Areas for Improvement:

- (a) While the user perspective was a key factor in developing provision within HMP Altcourse, this was not evident across all areas of work. A strategic approach to collating and evaluating service user views to inform commissioning was at an early stage of development.
- (b) While the area had concentrated on increasing the *range* of services commissioned, the focus on the *quality* of services provided needed strengthening. There was no overarching strategy that governed partnership provision and provided clarity of accountability. We were concerned that the area was not monitoring fully which offenders attended which provision. Equally, information on outcomes and monitoring systems to ensure that commissioned services were of a high quality were undeveloped. An example that illustrated this was the SLAs in place for basic skills and other ETE related programmes. The quality measures for providers were not explicit enough and it was not clear how outcomes would be recorded by the providers and how the quality of provision would be monitored by the area. While in the main services met a range of offending need, there was inconsistency in their delivery, for example limited basic skills provision in one part of the area. A complex commissioning environment meant that for some initiatives funding arrangements limited the area's scope to deliver services more widely.
- (c) Despite the positive and proactive work of the area in HMP Altcourse and the provision of briefings on Phases II and III of the offender management model, the quality of engagement between offender managers and prisons was insufficient in 31% of cases. Not all offenders on the area's caseload would serve their sentence at HMP Altcourse. We saw examples of poor communication and insufficient attention to sentence planning, both in custody and on release. Some offender managers attributed this to high workloads and indicated that they prioritised those high and very high RoH cases in the community over those in custody.

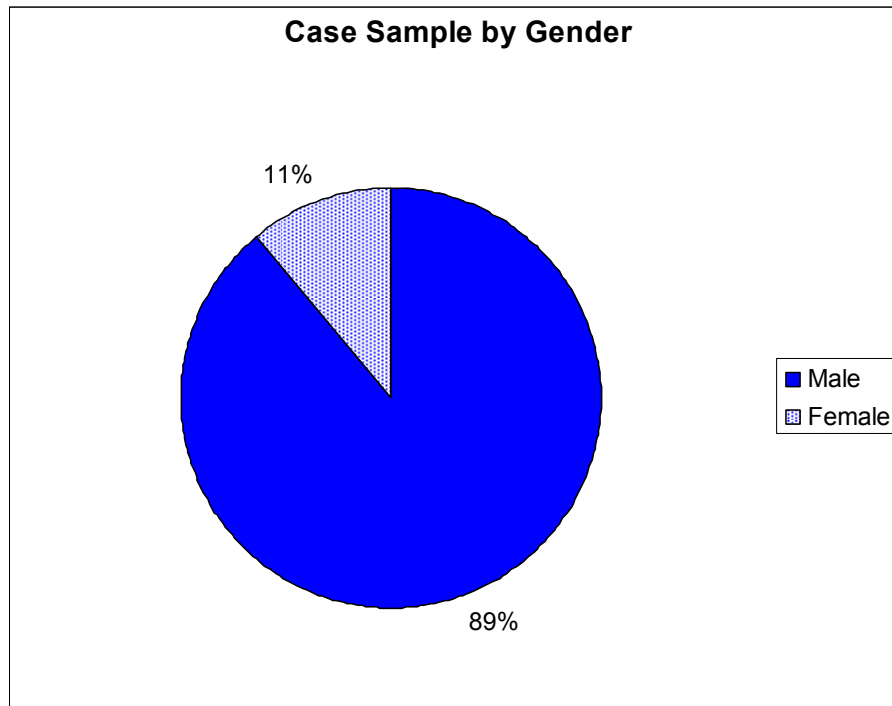
APPENDIX 1 IPPF: April-December 2007

IPPF		IPPF Area Score					North Wales					
		Q3			3							
IPPF Domain Score:		IPPF Domain Score:			IPPF Domain Score:			IPPF Domain Score:				
Public Protection		Actual	Target / Milestone	National	Previous Year - Q3	IPPF Grade	Interventions	Actual	Target / Milestone	National	Previous Year - Q3	IPPF Grade
NS Public Protection	92%	90%	87%	81%	4	NS Interventions	67%	90%	65%	68%	1	
Tier 4 OASys Assess	99%	90%	96%	n/a	4	Upaid Work Completions	685	525	41823	524	4	
PPO OASys Assess	###	90%	97%	n/a	4	Accredited Programme Completions	175	117	9499	215	4	
Tier 1, 2 & 3 OASys Assess	66%	90%	69%	n/a	1	Sex Offender Treatment Programme Completions	2	0	681	5	4	
Victim Contact	99%	90%	94%	97%	4	Domestic Violence Programme Completions	29	20	1624	25	4	
Approved Premises	23.5	30.0	26.4	n/a	2	DTTO/DRR Starts	109	123	12277	76	1	
OM Phase II OASys Assess	Data Availability Under Review											
Management Information												
Reduce Re-offending	Actual	Predicted	Difference	Significant?	IPPF Grade	Management Information						
	9.8%	8.5%	1.3%	No	2	% Completions Of Unpaid Work	79%	n/a	68%	74%	4	
						OBP Attrition	34%	n/a	38%	38%	3	
						Employment Gained	202	n/a	16493	n/a	n/a	
						DTTO/DRR Completions	35	n/a	4548	35	n/a	
						Alcohol Treatment Requirement Starts	0	n/a	3698	n/a	n/a	
						Alcohol Treatment Requirement Completions	4	n/a	1099	n/a	n/a	
Operational Capability, Resource Use & Strategy												
Sickness Absence	12.4	9.0	12.2	9.8	1	Employment Sustained For 4 Weeks	132	147	12244	183	1	
Ethnic Monitoring	98%	95%	97%	95%	3	% UPW Days Lost Due To Stand-Downs	5.7%	2.5%	5.0%	3.9%	1	
Budget Variance	8861	8789	826668	8504	2	DRR Retention	88%	75%	85%	n/a	3	
Sub-Contracting	Data Availability Under Review											
IPPF Grade												
Outstanding Performance												
Good Performance												
Passable Performance												
Poor Performance												

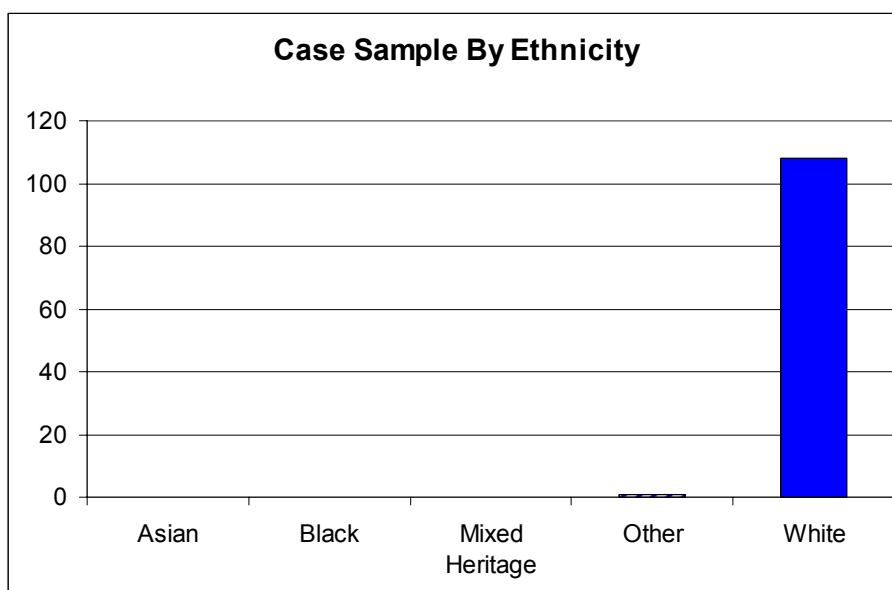
IPPF is the performance framework operated by NOMS. Under this, for each probation area, a score is assigned for each of four 'domains' as indicated, based on results for the metrics specified. Using these scores, an overall score for the probation area is also assigned.

APPENDIX 2 Contextual information

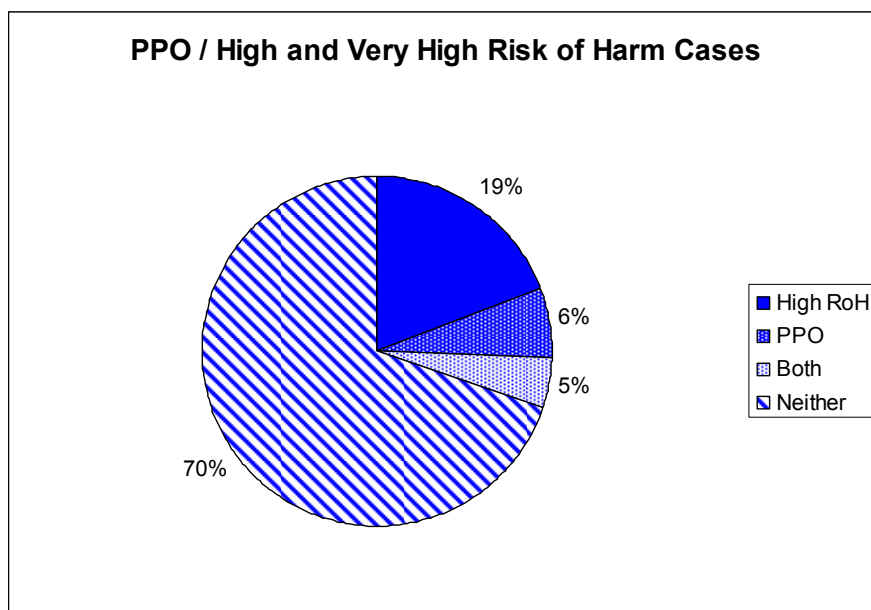
The chosen sample takes into consideration the number of female offenders in the area. A representative number is then included in the sample of cases.



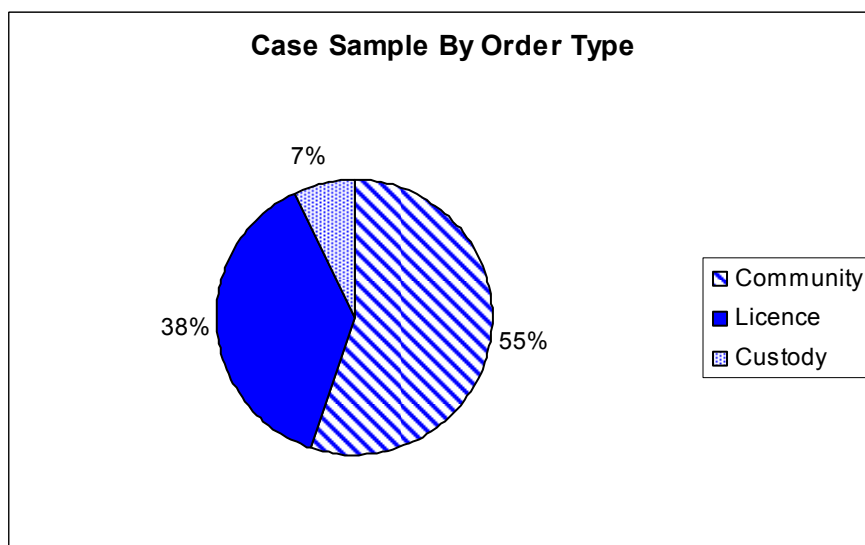
The chosen sample takes into consideration the number of black and minority ethnic offenders in the area. A representative number is then included in the sample of cases.



Each case sample contains a representative number of high risk and PPO cases.



Each sample is made up of 40 licence cases, 60 community order cases and ten custody cases.



Caseload at end of March 2007

Total caseload	3,032
% <i>White</i>	98.6%
% <i>Minority ethnic*</i>	1.4%
% <i>Male</i>	89.6%
% <i>Female</i>	10.4%
Number of cases subject to MAPPA:	6.2%
Level 1	0
Level 2	181
Level 3	8
Number of PPO cases	73
* Excluding cases for which ethnicity information is not available.	

The local definition of a PPO case – on which the above figure is based – is based on the Police National Intelligence Model, augmented with information from other agencies.

Main resource grant in 2007/2008: £9.744

Main resource grant in 2008/2009: £10.080

Approved premises: Plas-Y-Wern – 23
Ty Newydd – 23

APPENDIX 3

Inspection model, methodology and publication arrangements

Model

- The OMI programme started in May 2006. All NOMS areas in England and Wales are being inspected over a three year cycle, region by region. We hope to identify and promote effective work with offenders and disseminate information about good practice.
- Probation areas are being assessed on how well they have met defined inspection criteria focusing on:
 - Assessment and sentence planning carried out on offenders
 - Implementation of interventions delivered to offenders
 - Achievement and monitoring of outcomes
 - Leadership and strategic management.Particular attention will be given to RoH issues – it is performance against these measures which will determine whether a re-inspection is carried out.
- The inspection takes account of the regular NOMS performance data. These are produced by NOMS which is responsible for their collection and quality assurance.
- Each inspection takes place over one week. The area is asked to identify a random sample of 110-120 offenders (more in the largest areas) who have been managed by a probation offender manager for approximately six months. We then ensure that there is a minimum number of the following types of cases: high/very high RoH; PPOs; approved premises residents; statutory victim contact; black and minority ethnic offenders. The cases are drawn from community orders, licences, and those in custody.

Methodology

- During the inspection we examine the probation case file and carry out an in-depth interview with the offender manager. We also interview offenders, victims, key workers and case administrators. We send questionnaires to offenders and victims whose cases arise in the sample and to a selection of magistrates, judges, and legal advisers involved in sentencing. Colleague inspectors from Estyn work alongside us, examining offender learning.
- We interview senior and middle managers, Board members of the probation area, and partners.
- Inspection of about a third of the cases in the sample is carried out by area assessors, experienced staff/managers of the probation area being inspected. We think this provides a positive experience both for the area and the staff directly involved and that it increases ownership of the findings.

Publication arrangements

- Summary verbal feedback is given to the area at the end of the inspection week.
- A draft report is sent to the area for comment four to six weeks later. Publication follows approximately 12 weeks after inspection. A copy is sent to NOMS HQ and copies are also made available to the press and placed on our website.
- Reports on offender management in Wales are published in both Welsh and English.

APPENDIX 4

Scoring approach

This describes the methodology for assigning the scores to each of the general criteria, to sections 1 to 3 and to the *RoH Thread*. A fuller detailed description is on HMI Probation's website at:

<http://www.inspectorates.homeoffice.gov.uk/hmiprobation>

For each of the ***general criteria in sections 1 to 3*** – i.e. those sections based on the scrutiny of the case sample – that is:

Section 1: Assessment and sentence planning

- 1.1 Preparing for sentence
- 1.2 Assessment of risk of harm
- 1.3 Assessment of likelihood of reoffending
- 1.4 Assessment of offender engagement
- 1.5 Sentence planning

Section 2: Implementation of interventions

- 2.1 Delivering the sentence plan
- 2.2 Protecting the public by minimising risk of harm
- 2.3 Victims
- 2.4 Ensuring containment and promoting compliance (Punish)
- 2.5 Constructive interventions (Help and Change)
- 2.6 Restrictive interventions (Control)
- 2.7 Diversity issues

Section 3: Achievement and monitoring of outcomes

- 3.1 Achievement of initial outcomes
- 3.2 Sustainability of progress

The score is based on an average, across each of the questions in the Offender Management Tool for that criterion, of the proportion of relevant cases in the sample where the work assessed by that question was judged sufficient ('above the line'). (In the calculation, the results for the individual questions and for the summary question are weighted 80/20. Further details are given in the description on the website.)

The ***score for each of sections 1 to 3*** is then calculated as the average of the scores for the component general criteria.

The ***score for the RoH Thread*** is calculated as an average, over all the questions in the Offender Management Tool in sections 1 and 2 relating to RoH, of the proportion of relevant cases where work was judged 'above the line'.

For ***each of the general criteria in section 4***, that is:

Section 4: Leadership and strategic management

- 4.1 Leadership and planning
- 4.2 Performance against national and regional targets
- 4.3 Resource deployment
- 4.4 Workforce planning and development
- 4.5 Review and evaluation
- 4.6 Commissioning of services

A score of either **well met**, **satisfactorily met**, **partly met** or **not met** is assigned on the basis of the performance across the specific criteria which make up that criterion. (Details are given in the description on the website.)

APPENDIX 5

Role of HMI Probation

Statement of Purpose

HMI Probation is an independent Inspectorate, funded by the Ministry of Justice and reporting directly to the Secretary of State. Our purpose is to:

- report to the Secretary of State on the effectiveness of work with individual offenders, children and young people aimed at reducing reoffending and protecting the public, whoever undertakes this work under the auspices of the National Offender Management Service or the Youth Justice Board
- report on the effectiveness of the arrangements for this work, working with other Inspectorates as necessary
- contribute to improved performance by the organisations whose work we inspect
- contribute to sound policy and effective service delivery, especially in public protection, by providing advice and disseminating good practice, based on inspection findings, to Ministers, officials, managers and practitioners
- promote actively race equality and wider diversity issues, especially in the organisations whose work we inspect
- contribute to the overall effectiveness of the criminal justice system, particularly through joint work with other inspectorates.

Code of Practice

HMI Probation aims to achieve its purpose and to meet the Government's principles for inspection in the public sector by:

- working in an honest, professional, fair and polite way
- reporting and publishing inspection findings and recommendations for improvement in good time and to a good standard
- promoting race equality and wider attention to diversity in all aspects of our work, including within our own employment practices and organisational processes
- for the organisations whose work we are inspecting, keeping to a minimum the amount of extra work arising as a result of the inspection process.

The Inspectorate is a public body. Anyone who wishes to comment on an inspection, a report or any other matter falling within its remit should write to:

*HM Chief Inspector of Probation
2nd Floor, Ashley House
2 Monck Street
London SW1P 2BQ*