Probation inspection
Domain one characteristics

HMI Probation, March 2018
The rating characteristics indicate what will guide a lead inspector to recommend a specific rating. They provide a framework to support the lead inspector’s recommendation rather than being a checklist; we would not expect every characteristic to be present for the corresponding rating to be given.

The characteristics for ‘good’ and ‘requires improvement’ are closely aligned to the key questions and prompts in the standards framework.

The characteristics for ‘outstanding’ capture whether the organisation is:

- innovative and creative;
- forward-looking and proactive;
- open and transparent;
- supportive, empowering and inclusive;
- agile and responsive; and
- collaborative and outward-looking.

The characteristics for ‘inadequate’ capture whether the organisation is:

- solely reactive;
- defensive and blaming;
- characterised by division and conflict;
- unresponsive; and
- inward-looking.
1.1 Leadership

The leadership of the organisation supports and promotes the delivery of a high-quality, personalised and responsive service for all service users.

**Outstanding**

The leadership of the organisation fully supports and promotes the delivery of a high-quality, personalised and responsive service for all service users.

The vision and strategy is stretching and challenging while remaining achievable. It is both evidence-based and innovative, focused upon the quality of delivery for service users. The organisation’s culture is one of involvement, transparency, ownership, empowerment and improvement, with leaders consistently listening and explaining their decisions and staff feeling empowered to identify ways to improve how they do their job. Learning and collaboration networks are in place, identifying opportunities for creativity, innovation and improvement – evidence-informed innovation is celebrated and championed. A collaborative and outward-looking approach is taken to working with other organisations, maximising the benefits for service users through the appropriate exchange of expertise, resources and knowledge. The provider is represented on all relevant strategic groups, representation is consistent and those attending demonstrate appropriate decision-making authority.

There is strong evidence of the organisation anticipating risks, with mitigations and controls having proven fully effective. Staff at all levels are actively encouraged to raise concerns and those who do are supported. There is clear and regular two-way communication, with leaders having a strong track record of listening to staff concerns and acting on them in a timely, responsive manner.

It is clear how staff are to work together in delivering the service, with strong collaboration and support, clear lines of accountability and the avoidance of duplication. There is a common focus on improving the quality of delivery through service user-centred practice. Where changes are required, they are communicated in a timely and transparent way across the organisation, with a clear proactive approach to embedding and monitoring new ways of working.

**Good**

The leadership of the organisation sufficiently supports and promotes the delivery of a high-quality, personalised and responsive service for all service users.

There is a clear vision and strategy for delivering a high-quality service for all service users, adhering to the evidence-base. Leaders effectively communicate the vision and strategy to staff, partners, suppliers and other stakeholders. There is an effective governance framework and clear delivery plans, supported by productive relationships with local strategic partners, to ensure that the vision and strategy are translated into practice. Progress is monitored and the strategy regularly reviewed, with the organisation’s culture promoting openness, constructive challenge and ideas.

Risks to the service are sufficiently understood, with appropriate mitigations and controls in place. The impact on safety and security is assessed when carrying out changes to systems, processes or staffing, and appropriate arrangements are in place to ensure business continuity in the event of major incidents.
The operating model allows for personalised approaches with service users, taking account of diversity factors, and supports meaningful contact and continuity of contact. Staff understand the model, how services should be delivered and what they are accountable for. Where there are significant planned changes to the model, these are communicated and implemented effectively.

**Requires improvement**

The leadership of the organisation insufficiently supports and promotes the delivery of a high-quality, personalised and responsive service for all service users.

The vision and strategy does not sufficiently prioritise the quality of service and adherence to the evidence-base. Communication of the vision and strategy to staff, partners, suppliers and other stakeholders is inconsistent, and constructive challenge and ideas are not always encouraged. There are some shortfalls in the governance framework and delivery plans, impeding the full implementation of the strategy. Progress is not always monitored and the strategy is not consistently reviewed.

Not all risks to the service are sufficiently understood, and there are gaps in the mitigations and controls in place. The impact on safety and security is not always assessed when carrying out changes to systems, processes or staffing, and there are some weaknesses in the arrangements for ensuring business continuity in the event of major incidents.

The operating model does not allow for a personalised approach, meaningful contact or continuity of contact with all service users. Not all staff understand the model, how services should be delivered and what they are accountable for. There is some misalignment between the operating model and local plans. Where there are significant planned changes to the model, these are not always communicated and implemented effectively.

**Inadequate**

The leadership of the organisation does not support and promote the delivery of a high-quality, personalised and responsive service for all service users.

The vision and strategy is unclear, out of date, poorly aligned to the evidence-base or insufficiently focused on quality. There is minimal evidence of innovation. The organisation's culture is top-down, directive and defensive. Staff do not feel valued, supported and appreciated. They are not aware of or do not understand the vision and strategy, and their views are not sought and decisions are not explained, resulting in a lack of alignment between the issues described by staff and those understood by leaders. When staff do raise concerns, they are not treated with respect. There are no detailed or realistic plans to deliver the vision and strategy, progress is not being reviewed and leaders are out of touch with what is happening during day-to-day services. The provider is represented on few strategic groups, and/or representation is sporadic or at an inappropriate decision-making level. There is evidence of blaming others.

There is no effective system for identifying, capturing and managing issues and risks. Any mitigating actions or improvements that leaders have sought to make have been
inadequate. Consequently, leaders are not doing enough to tackle poor delivery, significantly hindering the progress of service users. The leadership is insufficiently focused upon safety and security, giving serious cause for concern.

The operating model fails to support personalised approaches, meaningful contact and continuity of contact. There is poor collaboration or cooperation between teams and high levels of division and conflict. Staff do not understand the fit between their roles and the operating model, and there is a lack of clarity about the authority to make decisions. Where changes are made, the impact on staff and the quality of delivery for service users is not recognised.

1.2 Staff

Staff within the organisation are empowered to deliver a high-quality, personalised and responsive service for all service users.

Outstanding

Staff within the organisation are fully empowered to deliver a high-quality, personalised and responsive service for all service users.

The staffing structure and levels are proactively monitored and reviewed, optimising the ability of the workforce to deliver a fully effective service. There is a focus upon current and likely future demands, reflected in the approach to recruitment, career development, mobility and succession planning. There are continual and holistic reviews of individual workloads, accounting for the differing demands of individual cases.

The workforce has the full range of skills, knowledge and experience to deliver a high-quality service and to establish trusting, supportive, challenging and meaningful relationships with service users. The mixed use of internal and external resource, including volunteers and mentors, is impressive, with a focus upon the maximum benefit for service users. The organisation ensures that staff have the necessary skills and knowledge for any specialist roles, and that staff are equipped to move into new roles as the organisation may require.

Giving and seeking timely feedback, engaging in performance discussions, and coaching are a core part of the day-to-day running of the organisation. Managers are approachable and available when needed, and meet regularly with their staff. They provide sound professional guidance, challenge, encouragement and motivation, with thoughtful, honest and constructive feedback on performance. They pay attention to personal and career development, support staff to achieve their goals, and are responsive to staff concerns. They empower staff to build on their strengths and address behaviours that are getting in the way of improved performance, with staff clearly understanding what they need to do to improve the quality of their work. New staff benefit from highly effective induction, which includes the importance of adapting work to meet the needs of service users and respecting and valuing diversity.

Continuous learning is embedded within the culture of the organisation. All staff feel deeply involved in their own professional development, and are encouraged and proactively supported to undertake self-evaluation, reflect on and debate their practice, acquire new skills and disseminate best practice, creating an open dialogue throughout the organisation. There is a comprehensive training plan, preparing staff to work with a
diverse range of service users and to take account of their distinctive needs. Attention is given to equality of access to training, with appropriate flexibility and the use of innovative solutions to meet leaning and development needs. Internal and external secondments for staff development purposes are actively supported.

There are high levels of staff satisfaction and engagement, and a culture of appreciation through which staff feel valued and recognised for their efforts and performance. They are proud of the organisation as a place to work, committed to its future success and highly motivated to deliver positive outcomes for service users. There is a strong focus within the organisation upon building staff resilience.

**Good**

*Staff within the organisation are sufficiently empowered to deliver a high-quality, personalised and responsive service for all service users.*

Staffing levels are planned and reviewed to meet the changing demands and profiles of service users, while the workloads of practitioners, middle managers and administrative staff are actively managed. Resources are redeployed, when reasonable and necessary, in response to local pressures.

All staff have clearly-defined roles and cases are allocated to staff who are appropriately qualified and/or experienced, assisting in the development of trusting, supportive, challenging and meaningful relationships with service users. Where volunteers and mentors are used, they are appropriately selected and supported to fulfil clearly-defined roles. There is an appropriate strategy in place to identify and develop the potential of individual staff to support succession planning.

Staff are appropriately supervised, and there is an effective induction programme for new staff. The appraisal process is actively used to ensure that staff are competent to deliver a quality service, with sufficient attention given to identifying and addressing poor performance.

The organisation identifies and plans for the learning needs of all staff, and provides appropriate access to pre-qualifying training routes and in-service training. A culture of learning and continuous improvement is promoted and valued.

Staff are motivated to contribute to the delivery of a quality service. Attention is given to monitoring and improving staff engagement levels, with managers recognising and rewarding exceptional work to encourage improvement and development and retention of staff. Appropriate attention is given to staff safety and wellbeing, and building staff resilience, and reasonable adjustments are made for staff in accordance with statutory requirements and protected characteristics.

**Requires improvement**

*Staff within the organisation are insufficiently empowered to deliver a high-quality, personalised and responsive service for all service users.*

Staffing levels are not always planned and reviewed to meet the changing demands and profiles of service users, while the workloads of practitioners, middle managers and administrative staff are inconsistently managed. Resources are not always redeployed, when reasonable and necessary, in response to local pressures.
Not all staff have clearly-defined roles and some cases are allocated to staff who are insufficiently qualified and/or experienced. Where volunteers and mentors are used, they are not always appropriately selected and supported to fulfil clearly-defined roles. There are some shortfalls within the strategy for identifying and develop the potential of individual staff to support succession planning.

Not all staff receive effective supervision, and there are some shortfalls in the induction programme for new staff. The appraisal process is not always used effectively to ensure that staff are competent to deliver a quality service, with inconsistent attention given to identifying and addressing poor performance.

The organisation does not identify and plan for the learning needs of all staff, and there are some limitations in the access to pre-qualifying training routes and in-service training. A culture of learning and continuous improvement is not consistently promoted and valued.

Not all staff are motivated to contribute to the delivery of a quality service. Attention is not always given to monitoring and improving staff engagement levels, with managers missing opportunities to recognise and reward exceptional work to encourage improvement and development and retention of staff. Appropriate attention is not always given to staff safety and wellbeing, and building staff resilience, and reasonable adjustments are not made for all staff in accordance with statutory requirements and protected characteristics.

**Inadequate**

*Staff within the organisation are not empowered to deliver a high-quality, personalised and responsive service for all service users.*

There are substantial or frequent staff shortages, impacting upon workloads and the quality of the service and its ability to meet the high-level expectations for probation delivery. Staffing levels are not actively monitored and reviewed, and there is no effective workforce planning to ensure that the organisation can meet current and likely future demands.

The workforce lacks the range of skills, knowledge and expertise required to deliver a high-quality service, and this is not being addressed. The mix of internal and external resource, including volunteers and mentors, is not managed effectively, failing to deliver benefits for service users.

The culture is one in which staff are not equipped to fulfil their responsibilities or held accountable for their work. Meetings with staff are irregular, and there is a lack of quality supervision, guidance, challenge and support. Managers are not doing enough to provide feedback of good practice or to tackle poor practice. The induction programme for new staff is deficient.

The organisation does not have a training plan that ensures equality of access to training, and staff are not developing the knowledge, skills and experience to enable them to deliver a high-quality service. There is minimal evidence of learning, self-evaluation and reflective practice, and no evidence of internal and external secondments for staff development.

There are low levels of staff satisfaction, engagement and resilience, and high levels of stress, work overload and blame. Staff do not feel respected, valued, supported or appreciated. Attention is not being given to staff safety.
1.3 Services

A comprehensive range of high-quality services is in place, supporting a tailored and responsive service for all service users.

**Outstanding**

*The range and quality of services fully support a tailored and responsive service for all service users.*

There is an in-depth understanding of the characteristics of service users, based upon a wide range of recent and reliable information. Particular efforts are made to anticipate future demands and to understand complex cases and the diversity of cases, recognising the need to develop services which meet the specific needs of all service users.

There is a strong mix of internal and external services, and of universal, targeted and specialist services, providing the necessary range and depth of intervention to meet the full range of needs. There is sufficient flexibility and options to cater for those with often chaotic and unstable circumstances, and more vulnerable groups such as women, those with a disability or with mental health and/or addiction problems. The services are easy to access and person-centred, with all efforts having been made to identify and remove barriers to access. Robust evaluation and quality assurance is an intrinsic part of service delivery, involving other providers and agencies where appropriate, with a focus upon identifying good practice and aspects for improvement.

Collaboration with other providers, agencies and the local community is integral to how services are planned, ensuring that the services meet service user needs and allow for appropriate innovation. Opportunities to provide integrated services and pathways of delivery, particularly for service users with multiple and complex needs, are well-developed. The organisation promotes understanding of the needs of service users, and provides advice to help other agencies make sure that their services are relevant and readily accessible. There are clear and sound inter-agency protocols, including, for example, referral processes and transitional arrangements, supporting a seamless approach to accessing services. Information is exchanged in a spirit of partnership, while adhering to privacy and confidentiality requirements.

**Good**

*The range and quality of services sufficiently support a tailored and responsive service for all service users.*

The analysis of the profile of service users is sufficiently comprehensive and up to date, capturing desistance and offending-related factors, risks of harm, risks of self-harm and suicide, and diversity factors. Sufficient attention is given to local patterns of sentencing and offence types, helping to anticipate future demands.

The organisation provides the volume, range and quality of services, either in-house or through other agencies, to meet the needs and diversity of service users. The services are available and accessible to service users in appropriate locations, and sufficient attention is given to their ability to build on strengths and enhance protective factors.
The quality of services is reviewed and evaluated, with remedial action taken where required.

Relationships with other providers and agencies are established, maintained and used effectively to support desistance, including access to longer-term mainstream services, and to manage the risk of harm to others. The organisation ensures that courts are sufficiently aware of the services available, supporting their sentencing decisions.

**Requires improvement**

*The range and quality of services insufficiently support a tailored and responsive service for all service users.*

The analysis of the profile of service users is not consistently updated and does not capture the full range of desistance and offending-related factors, risks of harm, risks of self-harm and suicide, and diversity factors. Sufficient attention is not consistently given to local patterns of sentencing and offence types, limiting the ability of the organisation to anticipate future demands.

The volume, range and quality of services do not meet the needs and diversity of all service users. The services are not available and accessible to all service users in appropriate locations, and sufficient attention is not being given to their ability to build on strengths and enhance protective factors. The quality of services is not consistently reviewed and evaluated, with remedial actions not always taken where required.

Not all relationships with other providers and agencies are established, maintained and used effectively to support desistance and to manage the risk of harm to others. The courts are not regularly updated on the services provided by the organisation, impeding the effectiveness of their sentencing decisions.

**Inadequate**

*The range and quality of services do not support a tailored and responsive service for all service users.*

There is limited understanding of the needs of service users, with the profiling lacking sophistication and/or using information which is insufficiently robust, relevant and/or timely. No attention is being given to local patterns of sentencing and offence types, preventing any ability to anticipate and respond to future demands.

Needs are not being addressed, with service users frequently and consistently unable to access services in a timely way or at all. Services lack adaptability and are not set up to support people with chaotic and unstable circumstances. There are clear barriers and there has been little or no attempt to remove them, to ensure that the services are more responsive and reactive to need. There is limited availability of specialist interventions, interventions for minority groups, or interventions for people in vulnerable circumstances. There is limited or no quality assurance or evaluation of the services delivered, with leaders and managers consequently unable to address shortfalls or deteriorations in the quality of provision.

Services offered by other providers and agencies are not utilised, severely restricting the range and depth of provision available. Inter-agency protocols are under-developed, there are significant delays in referrals, attempts are not being made to improve accessibility, and the potential for integrating services is not being explored.
Courts are not aware of the services provided by the organisation, severely impeding the effectiveness of their sentencing decisions.

### 1.4 Information and facilities

Timely and relevant information is available and appropriate facilities are in place to support a high-quality, personalised and responsive approach for all service users.

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<td>Information and facilities fully support a high-quality, personalised and responsive approach for all service users.</td>
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Policies and procedures are regularly and proactively reviewed, improved and communicated to help staff assume responsibility and act quickly and effectively. Attention has been given to aligning and linking associated policies and protocols, both within the organisation and with partner agencies.

The physical premises and offices are accessible to all staff and service users and support a rehabilitative culture through encouraging positive and open interactions while meeting the requirements of safety, security, privacy and confidentiality.

The Information and Communication Technology (ICT) systems support effective and integrated service delivery, with the ability to record and access key information whenever and wherever required. The systems and associated protocols support robust information exchange, with information being provided responsibly and critical information made available without delay. The management information capabilities are fully developed, providing timely, targeted and user-friendly reports.

Leaders and managers have an in-depth understanding of the organisation’s strengths, weaknesses and capabilities. There are comprehensive arrangements in place to analyse, trend and benchmark performance, using reliable and timely information. A range of approaches are used to gain feedback from service users and other stakeholders, with a focus upon inclusivity. Potential new ways of working are explored through self-evaluation and through learning from others and applying findings from reviews, research and scrutiny. Good practices and areas for development, improvement, creativity and innovation are identified, with the organisation taking decisive steps to improve delivery. There are high levels of awareness regarding performance and effectiveness across the organisation, with relevant information communicated to staff in readily-accessible formats.

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The necessary policies and guidance are in place to enable staff to deliver a quality service, meeting the needs of all service users. They are communicated effectively to all those to whom they apply, and they are regularly reviewed.
The premises and offices are sufficiently accessible to staff and service users. They provide a safe environment for working with service users, and support effective engagement and the delivery of appropriate personalised work.

The ICT systems enable staff to plan, deliver and record their work in a timely way, and to access information as required, supporting remote working. The systems produce the necessary management information and facilitate the exchange of information with partners and other key stakeholders.

There is a clear understanding of performance across the organisation, supported through assurance systems, performance measures, the views of service users and other key stakeholders, and learning from audits, inspection and other review processes. Service delivery is further appraised through evaluation and development of the underlying evidence base. All these sources of learning and evidence are used to drive improvement, with actions taken promptly when required.

**Requires improvement**

Information and facilities insufficiently support a high-quality, personalised and responsive approach for all service users.

The necessary policies and guidance for delivering a quality service, meeting the needs of all service users, are not all in place. They are not always communicated effectively to all those to whom they apply, and they are not reviewed consistently.

Not all the premises and offices are sufficiently accessible to staff and service users. They do not provide a safe environment for working with all service users, or support effective engagement and the delivery of appropriate personalised work in all cases.

The ICT systems do not always enable staff to plan, deliver and record their work in a timely way, or to access information as required, with limitations in their ability to support remote working. The systems do not produce all necessary management information or facilitate the exchange of all required information with partners and other key stakeholders.

There are some gaps within the organisation’s assurance systems and performance measures. The views of service users and other key stakeholders are not consistently obtained, and the learning from audits, inspection and other review processes is not always evaluated. Service delivery is not consistently appraised through evaluation and development of the underlying evidence base. The sources of learning and evidence are not always used to drive improvement, with actions not always taken promptly when required. Current levels of performance are not understood by all staff.

**Inadequate**

Information and facilities do not support a high-quality, personalised and responsive approach for all service users.

There are significant gaps in policies and guidance, impeding the delivery of a quality service. Those that are in place have been poorly communicated and are not well understood, and many require reviewing. The policies to help keep individuals safe are insufficient.
Many of the facilities and premises have poor accessibility and/or are inappropriate, failing to offer the necessary levels of safety, security, privacy and confidentiality, and hampering effective engagement.

The ICT systems do not support the recording of timely, relevant and reliable data and fail to provide key information for planning and delivering services. Remote working is impeded. The systems fail to support robust information exchange, with data not submitted to external organisations as required and critical information not being provided promptly. Management information is produced in a way that is unhelpful.

Performance indicators are not reported to an acceptable standard, and the information used to monitor performance is unreliable, out of date or not relevant. There is very limited or no monitoring of performance trends and outcomes. Service users’ views are not heard or acted on, and there is a defensive attitude to complaints and a lack of transparency in how they are handled. Lessons to be learned and good practice are rarely identified through feedback from other stakeholders, and there are limited or no performance discussions with other providers and agencies. The organisation rarely seeks to learn from others, and opportunities to benefit from research, learning reviews and scrutiny are not valued. There is minimal evidence of the sources of learning and evidence being used to drive improvement, and actions are not taken when required. Relevant information is rarely communicated to staff, who thus lack awareness regarding performance.