An inspection of probation services in:

**Derbyshire, Leicestershire, Nottinghamshire and Rutland**

Community Rehabilitation Company

HMI Probation, March 2020
Acknowledgements

This inspection was led by HM Inspector Tessa Webb OBE, supported by a team of inspectors and colleagues from across the Inspectorate. We would like to thank all those who participated in any way in this inspection. Without their help and cooperation, the inspection would not have been possible.

The role of HM Inspectorate of Probation

Her Majesty’s Inspectorate of Probation is the independent inspector of youth offending and probation services in England and Wales. We report on the effectiveness of probation and youth offending service work with adults and children. We inspect these services and publish inspection reports. We highlight good and poor practice, and use our data and information to encourage high-quality services. We are independent of government, and speak independently.

Please note that throughout the report the names in the practice examples have been changed to protect the individual’s identity.

The fieldwork for this inspection started on 23 September 2019.

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The Reducing Reoffending Partnership is the prime owner of the Derbyshire, Leicestershire, Nottinghamshire and Rutland, and the Staffordshire and West Midlands Community Rehabilitation Companies (CRCs). This year, as part of our second year of inspection of CRCs, we have inspected these two organisations in tandem.

We previously inspected the Derbyshire, Leicestershire, Nottinghamshire and Rutland CRC in September 2018. At that time, we rated its work as 'Requires improvement'. It is disappointing that, despite actions taken by the leadership, the overall rating for this CRC has not changed. It is a concern that we have found a deterioration in case management practice, with all four of our standards for case supervision rated as ‘Inadequate’, meaning that less than half of the cases we looked at were judged to be satisfactory.

I reported in our summary report of the 2018/2019 inspections\(^1\) that probation services are not doing enough to identify the potential risks that some individuals pose to others and that this is particularly stark for the community rehabilitation companies. This is evident again from this inspection. Weak attention to safeguarding concerns and to the coordination of risk management work with other relevant agencies to keep people safe is the Achilles' heel for this CRC. The focus has been on managing processes, at the expense of improving quality and developing skills.

The Reducing Reoffending Partnership leadership's approach to working within a reducing year-on-year budget has been to prioritise frontline services. While this is commendable, it has left some centralised services either too thinly resourced (training and development) or too remote (the customer service centre), and this has contributed to the practice concerns we have identified.

On a more positive note, we found leaders put good effort into making sure that they are well connected to the relevant strategic partnerships at a local level. A comprehensive range of services and interventions is available to help people to turn away from crime. Impressive and innovative work takes place to train and support individuals to become peer mentors, and help others towards a crime-free life.

Additional investment provided for enhanced Through the Gate services has been used carefully and creatively, and it is pleasing to find these services rated as ‘Outstanding’, with an increase in trained staff and important initiatives to improve access to accommodation.

The Derbyshire, Leicestershire, Nottinghamshire and Rutland CRC leaders have now started detailed work with the National Probation Service to plan for a smooth transition to the future national arrangements for case management. It will be important that our recommendations in this report are attended to, as, regardless of structures, we rely on trained, skilled practitioners to manage the probation caseload safely.

Justin Russell
Chief Inspector of Probation

## Ratings

<table>
<thead>
<tr>
<th>Derbyshire, Leicestershire, Nottinghamshire and Rutland Community Rehabilitation Company</th>
<th>Score</th>
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### Overall rating

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#### 1. Organisational delivery

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<th>Requires improvement</th>
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1.1 Leadership

1.2 Staff

1.3 Services

1.4 Information and facilities

#### 2. Case supervision

<table>
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2.1 Assessment

2.2 Planning

2.3 Implementation and delivery

2.4 Reviewing

#### 3. CRC-specific work

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<tr>
<th>Good</th>
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4.1 Unpaid work

4.2 Through the Gate

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Inspection of probation services: Derbyshire, Leicestershire, Nottinghamshire and Rutland CRC
Executive summary

Overall, Derbyshire, Leicestershire Nottinghamshire and Rutland Community Rehabilitation Company (CRC) is rated as: ‘Requires improvement’. This rating has been determined by inspecting this provider in three areas of its work, referred to as ‘domains’. We inspect against 10 ‘standards’, shared between the domains. These standards are based on established models and frameworks, which are grounded in evidence, learning and experience. They are designed to drive improvement in the quality of work with people who have offended. Published scoring rules generate the overall provider rating. The findings and subsequent ratings in those three domains are described below.

1. Organisational delivery

There is a clear vision in place in Derbyshire, Leicestershire, Nottinghamshire and Rutland CRC to reduce reoffending and support individuals towards a crime-free life. Leaders at all levels work well with strategic partners to improve access to services and plan ahead. There is, however, within the operating model, a disconnect between the customer service centre and frontline services, which impairs key elements of service delivery. Influential factors linked to reoffending and risk management go unaddressed in too many instances. Action taken to address the recommendation from the previous inspection to provide high-quality case management which protects the public was not evidenced within the casework we inspected. For these reasons, we rated leadership as ‘Requires improvement’.

The CRC carries few vacancies, and benefits from relatively stable sickness absence levels. Staff at all levels describe a culture that is target-driven at the expense of quality. There are concerns that, as a result of issues being overlooked at allocation, cases are assigned to staff who have not been trained to manage the level of complexity and risk of harm indicators. Beyond attending to new entrants, the organisation lacks a credible learning and development capability, with an over-reliance on middle managers to absorb these responsibilities. There is no appraisal system and staff are managed against performance targets. Overall, we concluded a rating of ‘Requires improvement’ against the standard for staffing.

The approach to desistance is well thought through and supports the journey towards a crime-free identity. This is demonstrated well by service users who become trained peer mentors. The standard for Services is rated as ‘Good’. Data is used well to meet diverse needs and plan the timely delivery of accredited programmes and interventions. Careful attention is given to supply and demand, with waiting lists, start times and completions kept under review. An impressive range of interventions and services are in place to address a wide range of offending behaviour.

Performance against the standard for information and facilities is rated as ‘Good’. Premises are designed to be more open plan, with space shared with people reporting for supervision. This has left some staff feeling less safe, but health and

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3 Each of the 10 standards is scored on a 0–3 scale, in which ‘Inadequate’ = 0; ‘Requires improvement’ = 1; ‘Good’ = 2; and ‘Outstanding’ = 3. Adding these scores produces a total score ranging from 0 to 30, which is banded to produce the overall rating, as follows: 0–5 = ‘Inadequate’; 6–15 = ‘Requires improvement’; 16–25 = ‘Good’; and 26–30 = ‘Outstanding’.
safety is attended to well and amendments have been made to provide a secure working area. Sufficient private interview space is also available.

Staff, including those working in the prisons, are supported by reliable, modern information and communications technology (ICT), and make use of the national case management system, n-Delius, and the assessment platform, the Offender Assessment System (OASys); however, there is a gap in access to these case management systems and corporate email for unpaid work supervisors.

Key strengths of the organisation are as follows:

- The leaders work effectively with strategic partners to improve services.
- A number of individuals under supervision have opportunities to train and become peer mentors and contribute to service delivery.
- A comprehensive range of services and interventions are available, to address the reasons why people offend.
- Barriers to engagement are addressed and people under supervision are made to feel welcome at the CRC offices.

The main areas for improvement are as follows:

- The operating model contributes to poor communication and decision-making between administrators and frontline services.
- The learning and development capability within the CRC has diminished and is insufficient to meet the needs of staff.
- The reoffending analysis tool is not exploited well to support the CRC’s strategic needs analysis.
- Access to ICT systems are not made routinely available to unpaid work supervisors.

2. Case supervision

We inspected 72 community sentence cases and 57 post-release supervision cases; we interviewed 75 of the relevant responsible officers and 24 of the service users themselves. We examined the quality of assessment; planning; implementation and delivery; and reviewing. Each of these elements was inspected in respect of service user engagement and the extent to which issues relevant to offending and desistance had been addressed. For the 98 cases where there were factors related to harm, we also inspected work done to keep other people safe. The quality of each factor needs to be above a specified threshold for supervision of the case to be rated as satisfactory.

In this CRC, the fact that fewer than 50 per cent of cases we inspected met our requirements in terms of assessment, planning, implementation and delivery, and reviewing led to our judgements of ‘Inadequate’ for these standards of work. We found poor-quality risk of harm work for each standard, and that practice had deteriorated since the last inspection.

Assessment work has got worse since our last inspection. Too many assessments get off to a poor start, and there is poor attention to the factors linked to offending behaviour. We found cases where the customer service centre had started a basic (layer 1) OASys assessment inappropriately at the allocation stage, and overlooked
critical information included in pre-sentence reports, past assessments and previous conviction records. Responsible officers did not feel empowered to challenge allocation processes, describing the target-driven culture to hit the timeliness performance measures as taking priority. The CRC leadership team recognises this problem and is conducting a pilot whereby allocation is devolved to middle managers; however, this pilot approach did not apply to the case sample for this inspection, which is drawn from cases 6 months prior to the inspection visit.

In respect of planning work, we found improvement in the work to reduce reoffending and support desistance. Engagement work with service users had taken place in 70 per cent of the female cases we inspected. Responsible officers give good attention to arranging appointments so that they do not compete with employment commitments, and thereby encourage compliance. The quality of planning work varied widely between the three clusters (Derbyshire, Leicestershire and Nottinghamshire) however, and is let down by weak attention to keeping other people safe.

Staff have access to a wide range of services and interventions, and there were good examples of responsible officers taking account of personal circumstances and responding well to non-compliance, both in respect of initiating enforcement and re-engagement work. The Achilles’ heel is the weak attention to safeguarding concerns and coordinating risk management work with other relevant agencies.

The CRC’s commitment to encouraging individuals on their journey towards a crime-free life is a strength, which is recognised in work to review cases. The quality of work to review changes in factors related to risk of harm, however, was particularly poor, with the quality of management oversight in this respect also of concern.

Key strengths of case supervision are as follows:

- Planning appointments for individuals take good account of competing priorities, such as employment.
- Responsible officers can access a wide range of services to address reoffending.
- Responsible officers give good attention to enforcement processes and work effectively to re-engage individuals who do not comply.
- Review work supports compliance and the CRC’s ambition to recognise achievements on a service user’s journey towards a crime-free life.

Areas of case supervision requiring improvement are as follows:

- Allocation of cases does not take sufficient account of documentation relating to previous offending and assessment work included in pre-sentence reports.
- Factors related to offending are not reliably followed by analysis and the action required to address them.
- Management oversight of casework focuses on the completion of processes, with insufficient attention given to the action required to address risk of harm indicators.
- Other key agencies are not sufficiently involved in the development and delivery of risk management planning work.
- Responsible officers do not review work and take action reliably when presented with information relating to changes in risk of harm.
3. CRC-specific work

Our key findings about other core activities specific to CRCs are as follows:

**Unpaid work**

We inspected the management of 55 unpaid work requirements, looking at assessment and planning; safety; and implementation of the court order. We also observed five induction sessions and eight work parties, to examine the extent to which unpaid work was delivered in a way that supported desistance.

In this CRC, 74 per cent of the unpaid work cases we inspected met our requirement for assessment and planning, and 75 per cent for delivery and the appropriate implementation of the sentence. In only just over a third of relevant cases, however, was the unpaid work offer to develop employment-related skills available. Unpaid work supervisors follow the principles of prosocial modelling, contributing to the overall judgement of ‘Good’ for unpaid work.

At the time of this inspection, the CRC lacked an overarching unpaid work strategy and it was acknowledged that the delivery of unpaid work arrangements was similar to that inherited from the former probation trusts. Work is under way to implement a consistent approach across the Reducing Reoffending Partnership (RRP). The announcement of a future operating model was imminent, which would potentially reduce costs and the number of unpaid work staff. It was too early to discern whether this would have a detrimental impact on the quality of unpaid work services.

Key strengths of unpaid work are:

- Unpaid work supervisors and managers have positive, long-standing relationships with local beneficiaries.
- Induction arrangements are well planned and peer mentors may contribute to improve engagement and motivation.
- Good attention is given to health and safety in the delivery of unpaid work.
- The CRC seeks to ensure that unpaid work orders are completed within 12 months.

Areas for improvement of unpaid work are:

- Unpaid work supervisors lack access to the case management system, n-Delius, and the CRC email, which can impair communication.
- Education, training and employment (ETE) opportunities are not available to provide up to 20 per cent of unpaid work hours for relevant cases.
- There is a lack of bespoke unpaid work opportunities for women.
Through the Gate

We inspected the management of 45 cases where the CRC had delivered pre-release Through the Gate resettlement work, looking at resettlement planning; the delivery of resettlement services; and release coordination. We also held meetings with the senior manager and their deputy, who are responsible for Through the Gate services across Derbyshire, Leicestershire, Nottinghamshire and Rutland (DLNR) and Staffordshire and West Midlands (SWM) CRCs; 10 resettlement staff; seven resettlement unit managers and seven prison governors leading on resettlement work.

In this CRC, at least 80 per cent of cases met our standards for resettlement planning, including required resettlement services and release coordination. This led to an overall judgement of ‘Outstanding’ for Through the Gate services. The RRP has recruited and trained more than 60 additional staff, with the additional funding provided to implement enhanced Through the Gate services.

There are strong working relationships between CRC resettlement staff, prison leaders, and relevant partner agencies and providers, with impressive examples of collaboration and innovation. We found resettlement staff passionate about improving outcomes for people leaving prison. It was pleasing to find good attention given to risk of harm factors in resettlement plans, given the concerns we identified in the casework sample for domain two.

Key strengths of Through the Gate services are:

- Good working relationships are in place between resettlement staff and key partner agencies and providers, which contribute to collaboration and effective communication.
- Community support workers can meet individuals at the point of release and support them to access services in the community.
- Imaginative approaches are used to improve access to suitable accommodation on release.
- The Through the Gate teams provide resilience by working flexibly to support delivery across the resettlement prisons.
- Resettlement staff in the prisons have good access to the prison and community case management systems.

Areas for improvement of Through the Gate services are:

- Resettlement staff are completing resettlement plans when they are unclear about the assessed level of risk of harm, completed by prison staff, in too many instances.
- Responsible officers require support to organise their work, so they can visit prisons and consolidate learning from their training to improve their understanding of resettlement work.
Recommendations

Achievement of recommendations from the previous inspection

In our previous inspection report, we made five recommendations for the CRC. During this inspection, we investigated the extent to which these recommendations had been addressed.

We recommended that the CRC:

1. **Ensure that the quality of assessment, planning, service delivery and reviewing is improved, to help keep actual and potential victims safe, drawing on individuals and their support networks, and contingency planning for when things change.**

   **The CRC has made no progress on this recommendation.**

   The CRC had increased the use of OASys layer 3; training had been delivered to improve the quality of risk management practice by responsible officers; use of home visits was being monitored linked to risk of harm thresholds; and the number of domestic violence and safeguarding checks had improved. A quality hurdle had also been introduced to the performance management framework. However, our domain two data on a sample of individual cases provided no clear evidence of improvement and a deterioration in case management work to keep people safe.

2. **Provide enough staff and equip them with the knowledge and skills to carry out effective work to keep other people safe.**

   **The CRC has made no progress on this recommendation.**

   The CRC is operating with a full complement of responsible officers, but caseloads overall had not changed substantially since our previous inspection. The CRC had delivered core training to address domestic violence, safeguarding, victim awareness and completion of OASys layer 3. This approach concentrated on imparting advice and knowledge about the required process, rather than developing skills and understanding of how to manage risk of harm well. The domain two data provided clear evidence of no improvement and a deterioration in case management work to keep people safe.

3. **Improve service delivery for diverse groups of people making sure that all appropriate interventions, services and facilities are available to individuals to meet.**

   **The CRC has made sufficient progress on this recommendation.**

   The CRC offers a good range of accredited programmes and interventions to meet individual needs. The previous inspection particularly questioned the availability of women-only arrangements. Responsible officers hold semi-specialist roles for women and reported that they had received training in trauma-informed work. Dedicated women’s services are in place. Services in Mansfield are now delivered from a women’s centre, and we found evidence of delivery of interventions in the smaller Leicestershire communities.

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4. Ensure that the relationship between the customer service centre and responsible officer is working well, to provide a good, joined-up service.

The CRC has made some progress on this recommendation.

The CRC has moved accountability for the lead of the customer service centre from corporate services to the head of operations. This contributed to an improved understanding at the strategic level of the inherent problems within the operating model. Steps have been taken to pilot a scheme where case allocation is returned to local managers, and administrative staff have been seconded directly to support accredited programmes, which has contributed to improvement. RRP has been reviewing the customer service centre throughout 2019 and is now delivering a programme of work to move up to 60 per cent of the work to local delivery.

5. Work with others to improve outcomes for people leaving prison.

The CRC has made sufficient progress on this recommendation.

The CRC was an early adopter nationally of the enhanced Through the Gate services, which have been implemented well. Resettlement arrangements benefit from the strong respected working relationships with prison leaders, key partners and providers. Work has taken place to improve responsible officers’ knowledge and understanding and handover on release. Outcomes against the pathways are scrutinised and access to services has improved.

New recommendations

As a result of our inspection findings, we have made eight recommendations that we believe, if implemented, will have a positive impact on the quality of probation services.

Derbyshire, Leicestershire, Nottinghamshire and Rutland CRC should:

1. ensure that, when new cases are started and allocated, account is taken of the information available concerning risk of harm and risk of reoffending
2. improve the capacity and skills of senior probation officers (known as performance delivery managers in DLNR) to provide high-quality management oversight, so that risk of harm is managed well in relevant cases
3. provide a mechanism for organisational and individual staff learning and development needs to be captured and addressed
4. provide unpaid work supervisors with access to the CRC email and case management systems
5. for relevant cases, provide access to education, training and employment services for people completing an unpaid work requirement
6. ensure that the quality of assessment, planning, service delivery and reviewing is improved, to help keep actual and potential victims safe, drawing on individuals and their support networks, and contingency planning for when things change.

This recommendation has been repeated from the previous inspection.

7. provide enough staff and equip them with the knowledge and skills to carry out effective work to keep other people safe.

This recommendation has been repeated from the previous inspection.
The Ministry of Justice should:

8. make clear how Through the Gate services will be delivered to support resettlement planning and pre- and post-release in the future arrangements for probation services.


**Background**

**Derbyshire, Leicestershire, Nottinghamshire and Rutland CRC**

Derbyshire, Leicestershire, Nottinghamshire and Rutland (DLNR) CRC is the amalgamation of three former probation trusts, and the boundary aligns with the police force areas for Derbyshire, Leicestershire and Nottinghamshire. The profile of the communities served by the CRC varies widely. Recorded crime levels vary, with Derbyshire at 67.1, Leicestershire at 85.5 and Nottinghamshire at 94.2 per 1,000 head of population, compared with an average for England of 84.6. Nottingham has a high incidence of violent crime and there is a multi-agency partnership effort to tackle gang crime. The CRC spans a mixture of city, urban and rural communities, with a collective population of 3.3 million people. The percentage of the population with a black and minority ethnic heritage varies widely by community, ranging from 45 per cent white British in Leicester to 96 per cent in Derbyshire. Likewise, there are pockets of substantial poverty and affluence, with unemployment being noticeably higher than the national average in Nottingham.

Local authority strategic partnership arrangements, including the contracts for drug and alcohol services, vary between the cities of Derby, Nottingham and Leicester, and the towns and villages within Derbyshire, Leicestershire and Nottinghamshire. The CRC pays good attention to supporting engagement and is represented on the respective child and adult safeguarding boards, reducing reoffending boards and community safety partnerships. Derbyshire operates a distinct criminal justice board. Leicestershire and Nottinghamshire form part of the East Midlands Criminal Justice Board, which also includes Northamptonshire and Lincolnshire.

DLNR CRC provides resettlement services to six prisons: HMPs Nottingham, Ranby, Foston Hall (for women), Sudbury, Leicester, Peterborough (for the female prisoners held there), and to four non-settlement prisons: HMPs Whatton, Gartree, Stocken and Lowdham Grange.

Staff attrition and sickness levels are stable, with little use of agency practitioners. We were told that, owing to pressures in managing within a reducing budget, there are no fixed staffing numbers, and decisions as to ‘whether to replace, if someone left’ are taken by the operations board on a case-by-case basis. At the time of this inspection, the CRC employed 381 staff, with 273 (including 74 probation officers) deployed to frontline facing work, supported by 25 middle managers, called performance delivery managers (senior probation officer equivalent). Some individuals hold responsibilities across both RRP CRCs (DLNR and Staffordshire and West Midlands) or are employed directly by the RRP.

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7 Figures supplied by DLNR CRC.
In June 2019, the total caseload under supervision was 8,468, having reduced slightly from 8,746 in June 2018.\(^8\) The average caseload for a responsible officer at the time this inspection was announced was reported to be 58.\(^9\)

The following notable strategic and structural changes have taken place since DLNR was inspected by HMIP in 2018:

- In December 2018, Advanced Personnel Management (APM) bought Ingeus. The integration of Ingeus and its subsidiary RRP is ongoing, consolidating some corporate functions.
- The corporate services across DLNR and Staffordshire and West Midlands (SWM) CRCs have been reduced by between 45 per cent and 50 per cent, as a result of falling income; this involved the closure of the customer service centre in Nottingham. Case administrative work and telephony for both DLNR and SWM CRCs were managed in the Birmingham customer service centre at the time of this inspection. Some corporate RRP roles are shared with other Ingeus and APM business, based at the Birmingham office.
- The Director of Operations for DLNR CRC is responsible for both DLNR and SWM CRCs. Unpaid work, resettlement and intervention functions are managed across both CRCs.
- Following the Ministry of Justice announcement about the future of probation services in May 2019 and early termination of the CRC contracts, work has started with the NPS to support the transition of case management to the future arrangements.
- The regional manager for Derbyshire and Leicestershire county areas has recently left on secondment. The regional manager for Leicester City and Nottinghamshire is acting as the head of case management across DLNR for the period of the secondment.
- Enhanced Through the Gate services were implemented in February 2019, supported by a contractual change and additional funding by the Ministry of Justice.

The Chief Executive Officer for RRP explained that the decision-making behind the structural changes has aimed to prioritise and safeguard frontline services. This is against a background of factors, including: a reducing year-on-year budget, smaller CRC caseloads than originally predicted, and RRP’s inability to implement fully its target operating model, including its own case management recording system, Partnership Works.

**The Reducing Reoffending Partnership’s CRCs**

The DLNR CRC is wholly owned by RRP, which is itself made up of three organisations: Ingeus (a private company, now owned by APM) and two charities, St Giles Trust, and Change, Grow, Live. The RRP also owns the neighbouring Staffordshire and West Midlands CRC. The two CRCs are run by RRP broadly as one organisation, with one executive committee and one Chief Executive Officer.

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\(^9\) HMI Probation inspection data.
The operating model is common to both CRCs, and policies and practices are being harmonised, where appropriate, across them. The operating model provides each CRC with an extensive suite of interventions from a wide range of providers, with specific arrangements and interventions for women service users. At the time of this inspection, a centralised customer service centre, based in Birmingham, provided core administrative tasks, including telephony, allocation, letters and referrals, and enforcement.

For more information about this CRC, including details of their operating model, please see Annex 3 of this report.
Contextual facts

- **3,469** The total number of individuals supervised on community sentences by DLNR CRC 10
- **2,273** The number of individuals supervised post-release by DLNR CRC 10
- **44.0%** The proportion of DLNR CRC’s service users with a proven reoffence 11
- **41.7%** The proportion of CRC service users (England and Wales) with a proven reoffence 11

### Performance against key targets

- **77%** The proportion of individuals recorded as having successfully completed their community orders or suspended sentence orders for DLNR CRC. The performance figure for all England and Wales was 76%, against a target of 75% 12
- **58%** The proportion of positive compliance outcomes with licences and, where applicable, post-sentence supervision periods for Northumbria CRC. The performance figure for all England and Wales was 66%, against a target of 65% 13
- **94%** The proportion of positive completions of unpaid work requirements for the CRC. The performance figure for all England and Wales was 92%, against a target of 90% 14
- **£24 m** Total income in contract year 5, 2018/2019 15

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15 Figure supplied by DLNR CRC.
1. Organisational delivery

DLNR CRC demonstrates a strong commitment to reducing reoffending and supporting individuals towards a crime-free life. This underpins strategic decision-making, although management attention has not sufficiently addressed public protection and safeguarding. The separation of operational delivery and case administration is a cornerstone of the RRP operating model but the approach has contributed to communication barriers and undermines high-quality case management. Since our fieldwork, the CRC has announced plans to decentralise some services to local delivery.

DLNR CRC has a stable workforce and sickness absence levels. Leaders have sought to prioritise frontline services, and manage a reduction in income, by combining and reducing corporate services between DLNR and SWM CRCs. The skills, capacity and capability of managers have been stretched as they have absorbed additional responsibilities. Performance delivery managers are not providing high-quality management oversight and are unable to deliver training to develop the skills of practitioners sufficiently well. Close attention is given to performance monitoring and contract compliance, but this has been at the expense of quality and sufficient attention to safeguarding practice.

Detailed analysis informs the development of services to meet the diverse needs of service users. Careful attention is given to supply and demand, with waiting lists, starts and completions kept under review. An impressive range of interventions and services is in place to address the reasons why people commit crime. The commitment of the CRC to recruit and train some service users as peer mentors, who then provide encouragement to others who are starting their journey towards desistance, is particularly good.

Data is used well to meet needs, plan and support the delivery of accredited programmes and interventions. Staff are supported by reliable modern ICT, making use of the national case management system, n-Delius, and the assessment platform, OASys.

**Strengths:**

- CRC leaders, at all levels, contribute to and collaborate with strategic partners to improve access to services for people under supervision.
- Staff achievements and qualifications are recognised.
- The journey of individuals being supervised towards a crime-free life is encouraged and supported.
- There is an impressive range of services and interventions available to meet the diverse needs of people, to support them to turn away from crime.
- Data is used well to analyse, evaluate and plan services.
Areas for improvement:

- The task-centred approach by the customer service centre is not sufficiently connected to practice and contributes to the poor attention of safeguarding indicators which inform allocation, initial assessment and risk management.
- Training to equip practitioners with the skills to assess and manage risk of harm has concentrated on process rather than quality.
- Management oversight of cases pays insufficient attention to how risk of harm is managed and what action needs to be taken.
- Better use could be made of the reoffending analysis tool to inform local strategic needs assessments.

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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.

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Despite the best efforts of leaders at all levels, high-quality practice was not evidenced within the casework we inspected, hence the overall rating of ‘Requires improvement’ for this standard.

In making a judgement about leadership, we take into account the answers to the following three questions:

**Is there an effective vision and strategy driving the delivery of a high-quality service for all service users?**

The RRP provides a clear vision and strategy for a safer society, where people who have committed crimes are empowered to change. The ‘decisional compass’ underpins the vision and six strategic organisational priorities: performance, people, possibilities, profits, participants and protection; however, in reality, frontline staff described a ‘target-driven’ culture, at the expense of quality. Only a quarter of

\(^{16}\) HMI Probation inspection data.
responsible officers interviewed thought that the service prioritised quality; this had reduced from 44 per cent in 2018.

Leaders and staff at all levels engage effectively with partners and key stakeholders to improve the services available, with good examples of collaboration. The organisation works hard to be inclusive and support individuals under supervision in their journey to a crime-free life. This is illustrated through peer mentors being involved in the delivery of services, and the progression of ex-offenders to employment within RRP. The leadership has clear governance arrangements in place. Data is used well to monitor progress, which informs strategic decisions and restructuring plans.

As part of the 'Delivery First' programme, leaders have prioritised resources to frontline operational services at the expense of corporate and support services, to operate within a challenging budget that has reduced by 17.8 per cent since 2017. Although this is commendable, there are interdependencies between support services and operations which have contributed to unintended consequences on service delivery and quality. For instance, the leadership of unpaid work is based in Birmingham and is viewed as remote by unpaid work supervisors.

CRC leaders are working closely with NPS leaders to plan for a smooth transition to the future arrangements for probation delivery.

**Are potential risks to service delivery anticipated and planned for in advance?**

The RRP maintains a detailed risk register for both DLNR and SWM CRCs. Action is taken to mitigate risks. Staff are encouraged to be flexible and mobile, to strengthen resilience and support business continuity. Examples can be found at both corporate and operational levels – for example, operational staff from Mansfield have implemented a rota to support the Chesterfield office, and senior managers provide leadership and engagement across both DLNR and SWM CRCs.

Following the national announcement of the reintegration of offender management for probation, Through the Gate staff are unclear about their future. This has led to increased staff turnover, and senior managers have worked together to mitigate risks where they are able. Senior site host posts (office managers) have been introduced, to address increased pressures on performance delivery managers (senior probation officers). Performance against the CRC contract is closely monitored using the performance management framework, and staff at all levels report being required to take action when targets are at risk.

**Does the operating model support effective service delivery, meeting the needs of all service users?**

The RRP operating model in place at the time of this inspection separates case administration tasks and allocation from service delivery, and contributes to weak case management practice. Staff based at the customer service centre in Birmingham lack local knowledge of the communities in DLNR, and responsible officers complain that they are difficult to contact and can give out inaccurate travel directions. The customer service centre decides on the type of OASys template required at the point of allocation (layer 1 or layer 3), and we found this to contribute to poor-quality assessments. Responsible officers lacked confidence to challenge the customer service centre for a more detailed OASys assessment template (layer 3) to manage the complexity of the case.

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17 Figure supplied by DLNR CRC.
Operational staff at all levels within the organisation and operational partners/providers reported that the operating model did not support effective communication, and that they implemented local work-arounds, introducing inconsistency and additional work. Drug and alcohol partner providers duplicate their information to responsible officers, as they are not confident that information about cases provided to the customer service centre will be provided to them in a timely way. Managers acknowledged these issues and were considering how they could be addressed within their plans to transition case management work to the future national arrangements. As part of this work, they had piloted transferring responsibility for case allocation to local middle managers in Nottingham. This was being expanded at the time of the inspection.

Three-quarters (76 per cent) of cases we inspected in DLNR CRC had only one responsible officer during the period we looked at, indicating stability; however, some responsible officers complained that they lacked time to deliver sufficient one-to-one work, as they were also required to deliver group rehabilitation activity requirement (RAR) interventions. At the time of the inspection, in response to workload pressures, RRP was in the process of introducing reporting hubs as an integral part of its case management framework. RRP managers explained that this was in order to prioritise resources so that those individuals who have made sufficient progress, and require less contact and intervention, can be managed in a less intensive way. The reporting hub involved a responsible officer holding a high caseload, but with the assumption that they would not be required to put in extensive contact time with the individuals. We found little evidence of the application of the hub model in our fieldwork, learning that responsible officers were reluctant to embrace the approach and refer cases over to the hub specialist supervisors. While it was too early to evaluate impact, we had concerns that this approach would break continuity with the supervising officer, which is recognised as important to supporting desistance.

### 1.2. Staff

<table>
<thead>
<tr>
<th>Staff within the organisation are empowered to deliver a high-quality, personalised and responsive service for all service users.</th>
<th>Requires improvement</th>
<th>Requires improvement</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Key staffing data&lt;sup&gt;18&lt;/sup&gt;</th>
<th>Previous year</th>
<th>Current year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total staff headcount (FTE)</td>
<td>No data</td>
<td>380.6</td>
</tr>
<tr>
<td>Vacancy rate (total unfilled posts as percentage of total staff headcount)</td>
<td>No data</td>
<td>0.69%</td>
</tr>
</tbody>
</table>

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<sup>18</sup> All data supplied by CRC.
Vacancy rate probation officer (PO) or equivalent grade only (total unfilled posts as percentage of total required PO posts)  
No data  
1.82%

Sickness absence rate (all staff)  
11.8  
8.78

Staff attrition (percentage of all staff leaving in 12-month period)  
No data  
10.20%

<table>
<thead>
<tr>
<th>Caseload data</th>
<th>Previous year</th>
<th>Current year</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Average caseload PO and PSO (FTE equivalent)</strong></td>
<td>58.6</td>
<td>58.1</td>
</tr>
<tr>
<td>Percentage of PO grade or equivalent with caseload greater than local workload management tool target (FTE equivalent)</td>
<td>56%</td>
<td>9%</td>
</tr>
<tr>
<td>Percentage of PSO grade or equivalent with caseload greater than local workload management tool target (FTE equivalent)</td>
<td>41%</td>
<td>21%</td>
</tr>
<tr>
<td>Proportion of POs (or equivalent) in DLNR CRC describing workload as unmanageable</td>
<td>38%</td>
<td>57%</td>
</tr>
<tr>
<td>Proportion of PSOs (or equivalent) in this CRC describing workload as unmanageable</td>
<td>58%</td>
<td>52%</td>
</tr>
</tbody>
</table>

For the purposes of comparison, in our inspections of all CRCs between June 2018 and June 2019, 63 per cent of POs and 56 per cent of PSOs told inspectors their caseloads were unmanageable.

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19 Data supplied by DLNR CRC.
20 Data supplied by DLNR CRC.
21 Data supplied by DLNR CRC.
22 HMI Probation inspection data.
23 HMI Probation inspection data.
In making a judgement about staffing, we take into account the answers to the following five questions:

**Do staffing and workload levels support the delivery of a high-quality service for all service users?**

DLNR CRC benefits from stable staff attrition and sickness levels. Owing to reducing resources, there is no set ‘workforce number’. Decisions to recruit and replace are taken by the operational senior leadership team to manage within budget, implement structural changes and prioritise operational pressures, informed by a caseload profile tool. It should be noted that the caseload profile tool is not a workload management tool. At the time of the fieldwork, DLNR CRC was also testing the use of a community hub model for cases that required less intensive supervision, to see if this might reduce pressure. Written guidance had been issued to support staff in prioritising tasks to help them to manage their caseloads.

Thirteen per cent of responsible officers were managing a caseload above 100 per cent, according to the RRP caseload profile tool, at the time of the fieldwork for this inspection. Of those interviewed, 46 per cent of responsible officers described their workloads as manageable. This was marginally lower than at the time of the previous inspection. From the data provided by the CRC, there was negligible change in the size of caseloads compared with that in the previous year. Across the inspected cases, the average caseload was reported as 62 per full-time equivalent practitioner, with a range of 27–97. This was lower than reported by officers during focus groups, who estimated the average to be 70, but considered high. Some responsible officers also deliver RAR interventions or hold specialist roles, however, in addition to managing their caseload. No additional weighting is given to integrated offender management specialist roles. Middle managers considered responsible officers’ caseloads to be mostly manageable. The Leicestershire cluster was experiencing the greatest pressure.

As the capacity of corporate services has diminished, additional tasks have been passed to middle managers, who said that they struggled to balance competing priorities. It is possible this contributed to the weak management oversight we found in the casework sample.

**Do the skills and profile of staff support the delivery of a high-quality service for all service users?**

While 68 per cent of responsible officers considered that they were allocated cases appropriate to their skills and experience, our casework data indicated skills deficits, particularly in managing risk of harm.

The black, Asian and minority ethnic population profile varies widely by community, but overall there was good alignment with the profile of the workforce. As is the case with the national profile, there are more women than men in the workforce.

When allocating cases, a clear distinction is made between new-entrant probation services officers (PP1s), those who have completed their VQ3 qualification (PP2s) and qualified probation officers (PP3s). There were good arrangements to make sure that PP1s were not allocated complex cases. We found weaknesses in identifying risk of harm indicators at the allocation stage, which contributed to examples of probation service officers managing cases with current domestic abuse and/or child safeguarding concerns, without sufficient training.

DLNR CRC operates an impressive peer mentoring scheme, which provides high-quality training and enables service users to volunteer and qualify as peer mentors and contribute to service delivery. This approach to desistance supports the
journey towards a crime-free identity. There are opportunities for individuals who become peer mentors to progress to become paid employees, including community support workers, health trainers, unpaid work supervisors and, as in one case recently, a case manager.

**Does the oversight of work support high-quality delivery and professional development?**

Staff report that they receive reliable supervision, usually at least every two months. There is a well-developed induction/core development programme, which takes place every quarter, and practitioners are not allocated cases until they complete core modules. There is no appraisal system, and arrangements to support personal development and identify organisational training needs, beyond core qualifications, were unclear. Instead, staff are held accountable through the performance management framework (PMF), which uses a red/amber/green rating system against key performance measures and can report by cluster, team and individual. The PMF is accessible to all staff and a quality hurdle has been recently introduced.

Recently, RRP has introduced a quality case audit tool, which at the time of the inspection involved managers reviewing a sample of cases each month, using measures linked to HM Inspectorate of Probation standards. This assessment contributes to the overall PMF grading. Our casework inspection questioned the quality of management oversight; we found gaps in attention to the management of risk of harm work which had been identified as sound by the quality tool. Treatment management arrangements to quality assure the delivery of accredited programmes are in place and practitioners could apply to access clinical supervision.

**Are arrangements for learning and development comprehensive and responsive?**

The organisational learning and development capability has been reduced substantially and this has had a detrimental impact on the delivery of core training. Middle managers have been required to absorb delivery of training, with assumptions made about their skills, capacity and capability to do so. Training designed to improve the management of risk of harm has been cascaded to operational managers through a series of four half-day modules. Our casework inspection and meetings with practitioners indicated that this training focused on process and knowledge, and failed to develop important risk management skills.

One officer succinctly described the impact:

"First line managers were told to deliver domestic abuse, safeguarding and OASys training – hearts and minds had not been in this and it had been more of a briefing".

We examined the training slides that had been designed to improve the quality of OASys assessments and plans. We were struck by the attention given to making use of auto-text (9 out of 22 slides) rather than to ‘what’ action and objectives might be needed to reduce the risk of harm. The gap in the development of these critical skills is reflected across all four standards of our case inspections, where key questions concerning ‘keeping people safe’ showed a deterioration in quality.

The case management framework, which is made up of the ‘every case essentials’, ‘service user journey’ and ‘case management journey’ best practice guidance, had been refreshed since the previous inspection.

Responsible officers had mixed views, with 55 per cent saying that they were provided with sufficient access to in-service training. The ‘mind the gap’ training, to improve their understanding of resettlement work, had been well received, although
some were frustrated that they had not had time to visit a prison to consolidate their learning, as recommended. Only 51 per cent of responsible officers considered the organisation promoted a culture of continuous learning.

There are collaborative arrangements with the NPS to plan future pre-qualifying training routes, which should see an increase in PQiP (trainee probation officers) starters joining RRP. The majority of these posts, however, are destined for SWM CRC, to fill the higher number of vacancies there. Staff at all levels acknowledged that the training offer and the organisational commitment to learning and development have dwindled.

**Do managers pay sufficient attention to staff engagement?**

We found engagement with staff to be sound at local delivery cluster level. Staff reported having good access to their line managers, and that cluster leaders and the interventions/resettlement leader are visible and make efforts to keep them informed. However, other strategic and corporate senior leaders working at RRP level were described as remote. In the 2018 staff survey, only 35 per cent of operational staff were positive about engagement. A fortnightly newsletter, called ‘Take Action’, is issued to all staff, to disseminate key information.

The RRP provides an annual award and recognition ceremony, which celebrates success and qualifications achieved at individual and team level across both DLNR, and SWM CRCs. This included 140 individuals from a wide range of functions and roles in 2019. Just over a third of staff said that they did not consider that exceptional work was recognised or rewarded by managers. There is good evidence that reasonable adjustments are made to support staff whose personal circumstances or diversity characteristics require these. Peer mentors said that good efforts are made to encourage service users to contribute to organisational development. Union representatives had been invited to engage with the harmonisation and implementation of the revised absence management policies.

<table>
<thead>
<tr>
<th>Previous inspection</th>
<th>Current inspection</th>
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### 1.3. Services

<table>
<thead>
<tr>
<th></th>
<th>Previous inspection</th>
<th>Current inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>A comprehensive range of high-quality services is in place, supporting a tailored and responsive service for all service users</td>
<td>Good</td>
<td>Good</td>
</tr>
</tbody>
</table>

In making a judgement about services, we take into account the answers to the following three questions:

**Is a sufficiently comprehensive and up-to-date analysis of the profile of service users used by the organisation to deliver well-targeted services?**

<table>
<thead>
<tr>
<th>Characteristics of inspected domain two cases</th>
<th>All CRCs in year one</th>
<th>This CRC in current inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proportion of caseload who are female</td>
<td>17%</td>
<td>18%</td>
</tr>
</tbody>
</table>
Proportion of inspected cases who are black and minority ethnic  
<table>
<thead>
<tr>
<th>Previous inspection</th>
<th>Current inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>14%</td>
<td>15%</td>
</tr>
</tbody>
</table>

Proportion of inspected cases with a disability  
<table>
<thead>
<tr>
<th>Previous inspection</th>
<th>Current inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>49%</td>
<td>46%</td>
</tr>
</tbody>
</table>

Proportion of inspected cases where inspectors identified substance misuse problems  
<table>
<thead>
<tr>
<th>Previous inspection</th>
<th>Current inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>72%</td>
<td>78%</td>
</tr>
</tbody>
</table>

Proportion of inspected cases where inspectors identified domestic abuse issues  
<table>
<thead>
<tr>
<th>Previous inspection</th>
<th>Current inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>41%</td>
<td>35%</td>
</tr>
</tbody>
</table>

Proportion of inspected cases where inspectors identified child safeguarding issues  
<table>
<thead>
<tr>
<th>Previous inspection</th>
<th>Current inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>32%</td>
<td>25%</td>
</tr>
</tbody>
</table>

The RRP reoffending analysis tool provides a strategic needs analysis of the caseload by protected characteristics, offence type, factors linked to offending behaviour and safeguarding flags. Application of this tool has declined, however, as it is unable to report data by community safety partnership boundaries. Administrative support to accredited programmes is devolved, providing better communication. Data is generated to monitor the take-up and delivery of interventions, with evidence of monitoring of waiting lists and completions of accredited programmes and RAR activities.

Bespoke services for women are in place. The CRC has commissioned four programmes for women, which are delivered in groups at the following locations: New Dawn New Day Women’s Centre (Leicestershire), Women’s Work (Derbyshire) and Nottingham Women’s Centre (Nottinghamshire). Specialist responsible officers, working with women, have been trained in trauma-informed work. A community support worker attends HMP Peterborough to support women at their point of release to Leicester, and peer mentors deliver Transition and Hope RAR sessions.

Close attention is paid to monitoring the referrals, start times and completions of 21 themes which are linked to specific interventions, usually as part of RAR days or provider services. These themes include attention to: drugs and alcohol, mental health, domestic abuse, children and families, and women’s services. The CRC conducts an annual analysis of diversity monitoring of all service users, and uses this to address their individual needs and that resources are targeted appropriately.

<table>
<thead>
<tr>
<th>Does the CRC provide the volume, range and quality of services to meet the needs of the service users?</th>
<th>Previous inspection</th>
<th>Current inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wait time to start Building Better Relationships 0 – 3 months(^{24})</td>
<td>No data available</td>
<td>78.8%</td>
</tr>
<tr>
<td>Successful completion of Building Better Relationships</td>
<td>No data available</td>
<td>62.6%</td>
</tr>
</tbody>
</table>

\(^{24}\) Data provided by CRC. Wait time is calculated between first requirement transfer date and the earliest attended programme session (either pre-programme session or main session).
Wait time to start Thinking Skills Programme
0 – 3 months
No data available 60.7%

Successful completion of Thinking Skills Programme
No data available 56%

Average waiting time RAR
No data available 17 weeks

Successful completion of RAR
No data available 58.3%

Responsible officers confirmed that a comprehensive range of services are available to meet the risks and needs of service users across DLNR. Individuals living in communities that are distant from the major cities, however, may face difficult journeys to attend. The delivery of accredited programmes has been extended to Saturdays in Leicester and Chesterfield, to improve access, as the offices are also open for the senior attendance centres. Despite being faced with budget pressures, senior managers have worked hard to protect the delivery of services and support innovation, such as the Star project in Derby, which addresses unmet accommodation needs for men released from prison, and the Advance project in Leicester, which facilitates access to accommodation with mental health support.

While high-quality ETE services are available to support community sentence requirements and resettlement plans, it is concerning that ETE provision to support the delivery of unpaid work is virtually non-existent.

Treatment managers confirmed that close attention is paid to quality assurance and flexible delivery to meet demand across DLNR and avoid delays. For example, 82 per cent of those given a programme requirement attended their first programme session of the Thinking Skills Programme, and 93 per cent for the Building Better relationships programme within six months of receiving the order.

We were concerned that customer service centre staff are ill equipped/trained to identify relevant information in court reports and in the records of previous convictions; they are over-reliant on offender group reconviction scores, and this contributed to inappropriate allocation and assessment of needs. These concerns have been recognised and the Nottinghamshire cluster was conducting a pilot to move the task to middle managers. As this initiative is expanded, it will be important that resources are also devolved, given that middle managers are already struggling with high workloads.

RRP has been reviewing the customer service centre throughout 2019 and is now delivering a programme of work to move up to 60 per cent of the work to local delivery. This includes telephony, scheduling of interventions, case transfers and domestic abuse and safeguarding checks. This aligns with strategic work to support the transition towards the future reintegration of case management into a national service.

Are relationships with providers and other agencies established, maintained and used effectively to deliver high-quality services to service users?

There is strong evidence, which was corroborated by external partners, that DLNR leaders work hard to encourage collaborative relationships to improve access to services to reduce reoffending. No multi-agency safeguarding hub arrangements exist in Leicester and Nottingham, although the CRC seconds staff to the Nottingham multi-agency intelligence team. CRC leaders are represented on safeguarding boards, and there are arrangements for child and adult safeguarding checks to be made and domestic abuse call-out information to be obtained. How this information is
used and acted on, however, is less certain, and this issue contributed to poor findings in our individual case inspections.

Prison resettlement leads spoke highly of the enhanced Through the Gate services, confirming that probation managers contribute to the senior leadership in prison establishments and are committed to continuous improvement. Sentencers at Crown Court would welcome further engagement and information about the services, and confirmed that they now have regular contact with the local CRC leader. DLNR CRC has recently piloted seconding an officer to the magistrates’ court, to help improve their understanding and take-up of community services.

CRC leaders are well known and respected by strategic partners, with one Police and Crime Commissioner describing them as a "partner we can do business with". Relationships vary across the drug and alcohol service providers, with some explaining that they have developed work-arounds to avoid the customer service centre, and communicate directly with responsible officers. Another explained how the CRC had recently supported their access to n-Delius, to improve communication. There is a lack of a CRC strategy to integrated offender management (IOM). The matrices for cohort selection are jointly agreed with NPS/CRC, as are individual selection meetings. The CRC sits on the governance boards for each of the IOM schemes. CRC officers in IOM teams were usually co-located with the police.

**Service user involvement**

Service users are recruited and trained to become peer mentors, contributing to the delivery of the Transitions and Hope RAR, meeting and supporting service users in reception, and helping with induction processes. Genuine opportunities are made for individuals to build on their new skills and identity. Some are able to secure employment with the CRC after they have completed their statutory supervision. Nottingham Trent University is evaluating the peer mentor project, and in-house peer mentors have given presentations to law students.

The CRC estimated that, across RRP, 60 individuals had progressed from being a service user to an employee since 2015. One responsible officer was very proud to tell us that a new colleague was an individual she had previously supervised.

We concluded that the peer mentoring initiative provided genuine opportunities for individuals to progress to a crime-free lifestyle and is an excellent example of effective practice.

User Voice provided representatives for each cluster and could contribute to CRC development. We were informed, however, that this contract had been reviewed and was to end shortly after this inspection, with intentions to build upon the peer mentoring arrangements.

We spoke with 24 individuals whose cases we had inspected. Two-thirds of this group said that their views were considered when their supervision was planned, with 88 per cent saying that they had received help to keep them out of trouble, as the following illustrates:

"She was good with my landlord and sorted out things for me".
Another said:

“She helped me get my life back on track; she has got me working with a health trainer who is helping me to go to the gym and attend other appointments”.

In addition, we met with two groups of peer mentors, and with some individuals who had completed their supervision, continued volunteering or progressed into paid employment with RRP. These individuals demonstrated impressive motivational skills and were clear that their ‘lived experience’ was valued, and could support others on their journey towards a crime-free life. Peer mentors spoke highly of the training and support they received, recognising that they had acquired new transferable skills.

**Unpaid work**

We were informed that there had been no unpaid work strategy for the DLNR area since RRP had taken responsibility in 2015, and arrangements still broadly reflected those of the respective former probation trusts. Work on an RRP-wide strategy to introduce consistency and regular training has recently started, with ambitions to develop more paid projects, with less reliance on sessional supervisors. There was a wide range of projects available for unpaid work in each cluster; however, specific women-only projects are rare, with the expectation that they either attend a mixed-gender group or are allocated to an individual placement. There are few opportunities for people undertaking unpaid work to access ETE services. CRC managers highlighted that this element is not specified in their contract. Unpaid work managers monitor the completion of unpaid work requirements to reduce the backlog of requirements that had not completed within 12 months of sentence.

Immediately following the completion of this inspection, RRP announced a new strategy for unpaid work to achieve consistency, generate savings and improve efficiency, which will result in a reduction of unpaid work staff.

**Through the Gate**

Detailed analysis of the Through the Gate cohort informs the development of services, with good attention being paid to protected characteristics. Analysis of unmet accommodation needs in Derbyshire was used to support the business case for the Star project in Derby, which, in partnership with the YMCA, provides men with supported accommodation on release from prison. Unlike case management, administrative staff work alongside resettlement staff, and demonstrate good monitoring of the throughput, needs and outcomes for this cohort. Community support workers are attached to operational teams to provide practical support, assisting in searching for move-on accommodation, and supporting people who have been released from prison to access other services.

<table>
<thead>
<tr>
<th>1.4. Information and facilities</th>
<th>Previous inspection</th>
<th>Current inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>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</td>
<td>Good</td>
<td>Good</td>
</tr>
</tbody>
</table>
In making a judgement about information and facilities, we take into account the answers to the following four questions:

**Do the policies and guidance in place enable staff to deliver a quality service, meeting the needs of all service users?**

The RRP intranet provides access to high-level organisational news, including the Take Action news bulletin. The Knowledge Management portal provides access to policy and guidance, and managers can monitor individual use of this. The case management framework is supported by the ‘every case essentials’ practice guidance.

‘Zing Tree’ provides written step-by-step guidance to support tasks relevant to specific roles, including administrators. This helps with the consistency of standardised processes such as enforcement. The majority of responsible officers interviewed confirmed that they were clear about the case recording policy. Some policies have been harmonised across RRP, for example the policy dealing with absence management. It was acknowledged, however, that policies inherited from the former probation trusts still applied to some conditions of service for staff who transferred.

Information flows between the NPS and the CRC come through the customer service centre, which is responsible for starting and terminating cases, transfers and enforcement. At the close of our fieldwork, RRP advised that it would shortly be making changes, and that some of these tasks would be devolved to frontline offices. At senior and middle management level, we found collaborative working relationships with the NPS, with regular interface arrangements and good examples of joint strategic planning and use of resources. It is not clear how these information flows between the NPS and CRC will be supported in the future.

**Do the premises and offices enable staff to deliver a quality service, meeting the needs of all service users?**

Offices are generally of a good standard and have been designed to provide an open-plan reception (zone one) and open-plan interview space (zone two) that is welcoming and supports desistance. The inclusion of site hosts and peer mentors also helps in this respect. There are sufficient group rooms and interview rooms for work that is more sensitive. The organisation was responsive to feedback from staff when the new estate was designed, including providing secure work areas (zone three). An exception is the Mansfield office, which has many problems, including vermin and no heating or hot water. This office is managed by Ministry of Justice estates, and the CRC has struggled to influence improvements.

Only 41 per cent of responsible officers said that appropriate attention was paid to staff safety. Some expressed unease about the open plan/zone two interviewing space shared with service users. We observed that there was usually sufficient private interview space available, and recognised the ambition to provide an environment that was inclusive and supported people towards a crime-free journey.

Unpaid work staff complained that the unpaid work vans, while well maintained, were old and that equipment had not been sufficiently invested in. The offices we visited were accessible, including for those with disabilities. Closed-circuit television is provided in all offices and there is sound evidence that health and safety issues are monitored.
Do the Information and Communication Technology (ICT) systems enable staff to deliver a quality service, meeting the needs of all service users?

Staff, with the exception of unpaid work supervisors, are equipped with good ICT, including mobile phones where relevant. We consider it unacceptable that unpaid work supervisors are not provided with email addresses or access to the case management systems, and have to rely on paper documentation or provide their personal email address if they wish to receive the RRP newsletter or their payslips electronically. At the close of the fieldwork, RRP advised that they would take immediate action to address this.

Telephony equipment works well but is currently managed by the customer service centre. This has caused some problems, with operational staff complaining that calls are not reliably put through to them. Service users reporting for unpaid work at 8:45am also raised concerns that calls would not be answered before 9am:

“"I’m often put on hold for 20 minutes, and this has caused me some problems with attendance”.

RRP has been reviewing the customer service centre throughout 2019 and is now delivering a programme of work to move up to 60 per cent of the work to local delivery. This includes telephony, scheduling of interventions, case transfers and domestic abuse and safeguarding checks.

Information-sharing agreements are in place with statutory partners, and supply chain providers confirmed that they are supported with timely access and can safely share relevant information. Efforts are made to support provider services with access to n-Delius, where appropriate. There is evidence of sound adherence to ICT security. The CRC relies on n-Delius, and OASys for its core case management records. The customer service centre has utilised a separate ICT platform, CSCWorks, to track and assign tasks, although this is not accessible to operational staff.

Is analysis, evidence and learning used effectively to drive improvement?

There are effective management information arrangements within RRP. The reoffending analysis tool exists to track and monitor reoffending outcomes. It is disappointing that this tool is no longer being deployed as widely as originally intended.

The performance management framework provides analysis to support the organisation to meet its contractual targets. The RRP originally invested in the development of a case management system called Partnership Works. This was abandoned in 2017, when it became clear that it would not be compatible with the Ministry of Justice strategic gateway. The full impact of the loss of this bespoke case management system remains unclear, but it would seem that it was core to the original operating model, and RRP has been required to find alternative solutions and work-arounds.

DLNR CRC collaborates with Nottingham Trent University and John Moore University to secure external evaluation and access research and the latest good practice. There is a comprehensive system to monitor complaints, and analysis and organisational learning are communicated through the Take Action newsletter. Learning from serious further offence reviews is considered at the public protection forum and disseminated through cluster management meetings. It was unclear how level 3 OASys data is analysed and used.
2. Case supervision

We inspected 72 community sentence cases and 57 post-release supervision cases; we interviewed 75 of the relevant responsible officers and 24 of the service users themselves. This included looking in detail at the quality of assessment; planning; implementation and delivery; and reviewing. Each of these elements was inspected to assess service user engagement and whether issues relevant to offending and desistance had been addressed. Of the 130 cases, 98 included factors related to harm; for these, we also inspected work to keep other people safe. The quality of work against each factor is assessed against a specified threshold, to give it a score.

Our findings on case supervision have deteriorated from our previous inspection across all four standards. Risk of harm work for each standard is of poor quality. The quality of assessment work linked to the likelihood of reoffending remains weak. Assessment work overall is inadequate. Historical behaviour and risk information included within pre-sentence reports, previous assessments or previous convictions are not taken account of sufficiently. Many assessments have been poorly completed or started off weakly, with the basic (layer 1) OASys assessments being started instead of a full (layer 3) assessment. Planning work has marginally improved in addressing reducing reoffending, but is let down by weak engagement work and poor attention to safeguarding. Despite some promising work to engage individuals and support them to access services, implementation and delivery, and reviewing practice have deteriorated since the previous inspection. The quality of management oversight is concerning.

Strengths:

- Planning of appointments for individuals takes good account of competing priorities for individuals, such as employment and training.
- Responsible officers can access a wide range of services to address reoffending.
- Responsible officers give good attention to enforcement processes and work effectively to re-engage individuals who do not comply.
- Review work supports compliance and the CRC’s ambition to encourage hope and recognise achievements on a service user’s journey towards a crime-free life.
Areas for improvement:

- Allocation of cases does not take sufficient account of documentation relating to previous offending and pre-sentence report assessment work.
- Factors related to offending are not reliably followed by analysis and assessment of the action required to address them.
- Management oversight of casework focuses on the completion of processes, with insufficient attention given to action required to address risk of harm indicators.
- Other key agencies are not sufficiently involved in the development and delivery of risk management planning work.
- Responsible officers do not review work and take action reliably when presented with information relating to changes in risk of harm.

2.1. Assessment

Assessment is well-informed, analytical and personalised, actively involving the service user

<table>
<thead>
<tr>
<th></th>
<th>Previous inspection</th>
<th>Current inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inadequate</td>
<td>Inadequate</td>
<td></td>
</tr>
</tbody>
</table>

Our rating\(^\text{25}\) for assessment is based on three key questions:

<table>
<thead>
<tr>
<th>Comparison with DLNR CRC in previous inspection and all CRCs</th>
<th>Previous inspection</th>
<th>Current inspection</th>
<th>All CRCs(^\text{26})</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does assessment focus sufficiently on engaging the service user?(^\text{27})</td>
<td>56%</td>
<td>50%</td>
<td>68%</td>
</tr>
<tr>
<td>Does assessment focus sufficiently on the factors linked to offending and desistance?(^\text{27})</td>
<td>45%</td>
<td>45%</td>
<td>63%</td>
</tr>
<tr>
<td>Does assessment focus sufficiently on keeping other people safe?(^\text{27})</td>
<td>61%</td>
<td>49%</td>
<td>55%</td>
</tr>
</tbody>
</table>

\(^{25}\) The rating for the standard is normally driven by the lowest score on each of the key questions, which is placed in a rating band, indicated in bold in the table. See Annex 2 for a more detailed explanation.

\(^{26}\) HMI Probation inspection data, from inspections conducted between June 2018 – June 2019.

\(^{27}\) The answers to these key questions are underpinned by more detailed ‘prompts’. The table in Annex 4 illustrates the percentage of the case sample with a satisfactory ‘yes’ response to each prompt.
Assessment work has got worse since our last inspection. Too many assessments get off to a poor start, and there is poor attention to the factors linked to offending behaviour.

**Does assessment focus sufficiently on engaging the service user?**

Opportunities to engage people when completing assessments were missed or not reliably acted on. During our inspection in 2018, the CRC issued guidance that a fuller assessment (layer 3 OASys) should be completed on more complex cases. DLNR CRC reported an increase from 11 per cent to 45 per cent of layer 3 OASys completions. We hoped that this would lead to substantial improvement in the quality of assessment in the cases we looked at, but this has not materialised in this inspection.

While self-assessment tools were completed at induction, too often it was not clear how the information had contributed to the assessment. The CRC guidance 'every case essentials' recommends: ‘describe the service user’s diversity characteristics and how these will be considered’; however, important protected characteristics were not addressed often enough.

Where attention to recognising diverse needs took place, it was possible to see the benefits:

<table>
<thead>
<tr>
<th>Good practice example</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dabir is a white British man, who converted to Islam. He was convicted of theft from cars. Prior to his release, he was allocated to a faith and cohesion worker and referred to the Nottingham Islam Information Point. Support was provided throughout his licence and post-sentence supervision, which helped him secure accommodation and attend the local mosque. He was supported to maintain his tenancy and abstain from drugs.</td>
</tr>
</tbody>
</table>

Attention to meeting the needs of women was stronger, although the offer to attend women-only facilities varied by location; for example, in Leicestershire New Dawn New Day provides a women-only environment, and in Nottingham women could be instructed to report straight from court to the Nottingham Women’s Centre. Women living outside the cities, however, might be expected to travel further, introducing additional barriers to engagement.

**Does assessment focus sufficiently on the factors linked to offending and desistance?**

The CRC had made little progress during the previous year in improving how practitioners assess and analyse factors linked to the likelihood of reoffending, and practice was a long way below the aggregate measure for the CRCs inspected in 2018/2019. Too many assessments lacked the identification and analysis of key factors linked to offending behaviour, such as relationships and accommodation. There was a lack of analysis to understand individual personal circumstances, such as how drug dependency and homelessness might have an impact on a person’s ability to comply and not commit further offences.

In respect of attention to an individual’s strengths and protective factors, inspectors commented that these required analysis as to how they could be encouraged to support desistance, for example:
Poor practice example

They had some supportive family members, but there was no clarity on what support they could offer him and how they could be engaged in his sentence.

Previous convictions and pre-sentence reports were available, but the way that this information contributed to the assessment of factors linked to the current pattern of offending behaviour was inadequate.

**Does assessment focus sufficiently on the risk of harm to others?**

Despite the delivery of core training to address domestic abuse, safeguarding, victim awareness and the quality of OASys assessments, there had been a deterioration in the quality of work to assess risk of harm since the inspection in 2018/2019. Furthermore, practice was below the average for CRCs inspected in 2018/2019.

Evidence was provided that the customer service centre had increased the number of domestic abuse enquiries they made to the police, yet we found that 54 per cent of the case sample had not had the necessary check completed when assessed as necessary and 39 per cent had not undertaken necessary checks for the sharing of child safeguarding information. While there is evidence of volumes increasing, senior leaders explained the difficulties of the wider system being able to cope with an aspiration of being nearer 100 per cent. Critical information relating to risk of harm was available in documentation, including pre-sentence reports, previous convictions, restraining orders, police callouts and safeguarding checks, but this was not analysed or sufficiently addressed.

We examined the core training material that had been delivered by middle managers to bring about improvement. These modules covered a lot of information about what processes should be completed, but it was unclear how risk management skills were to be developed. An inspector commented:

> "What the training package doesn’t do is explain the purposes of a well-completed OASys – i.e. identify risks of reoffending and harm, and how best to address those to reduce reoffending, help the individual change and manage their risk of harm".
2.2. Planning

Planning is well-informed, holistic and personalised, actively involving the service user  
Requires improvement  
Inadequate

Our rating\(^{28}\) for planning is based on three key questions:

<table>
<thead>
<tr>
<th>Comparison with DLNR CRC in previous inspection and all CRCs</th>
<th>Previous inspection</th>
<th>Current inspection</th>
<th>All CRCs(^{29})</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does planning focus sufficiently on engaging the service user?(^{30})</td>
<td>55%</td>
<td>55%</td>
<td>63%</td>
</tr>
<tr>
<td>Does planning focus sufficiently on reducing reoffending and supporting the service user’s desistance?(^{30})</td>
<td>59%</td>
<td>65%</td>
<td>64%</td>
</tr>
<tr>
<td>Does planning focus sufficiently on keeping other people safe?(^{30})</td>
<td>53%</td>
<td>35%</td>
<td>46%</td>
</tr>
</tbody>
</table>

In respect of planning work, we found improvement in the work to reduce reoffending and support desistance. The quality of planning work varied widely between the three clusters (Derbyshire, Leicestershire and Nottinghamshire), however, and is let down by weak attention to keeping other people safe.

**Does planning focus sufficiently on engaging the service user?**

High-quality planning work is achieved when the person under supervision is involved and account is taken of their personal circumstances and readiness to change. Some improvement was evident in how the requirements of supervision were planned to be delivered within the available timescales.

Too often, it remained the case that an initial plan had been completed without evidence that the service user had been involved. Responsible officers cited that the priority to get a plan completed to meet the target turnaround time was driving this response.

Engagement work with women was more encouraging, with readiness and motivation taken into account for 70 per cent of women, compared with 58 per cent of men. Opportunities to engage and recognise barriers were overlooked; for example, there was a lack of support for young adults leaving care, or of taking account of a person’s...
mental health and learning difficulties, which could affect their engagement and compliance.

Peer mentors’ contribution to support induction and deliver the Transition and Hope RAR work encouraged engagement. It was disappointing, therefore, that this was rarely mentioned in planning records. We spoke to a small number of service users who considered that attention had been given to their protected characteristics, but this finding was not reflected across the wider case sample.

Responsible officers were attentive to organising appointments so that they did not interfere with employment commitments. Other initiatives included supporting people who worked long days during the week by extending the delivery of accredited programmes to Saturday mornings.

**Does planning focus sufficiently on reducing reoffending and supporting the service user’s desistance?**

Planning work to address factors identified to reduce reoffending and support desistance had improved, but the quality of planning varied widely by local delivery cluster. In Derbyshire, practice was strong, with 89 per cent of the cases we inspected being satisfactory, contrasting with Leicestershire, where this figure was only 48 per cent, and Nottinghamshire where it was 61 per cent. Responsible officers had access to a wide range of services to target factors linked to reoffending, as noted by one inspector:

> “Planning included engaging with the CRC’s community support worker to support Tris in his everyday needs, such as attending accommodation and drug services and engaging with victim awareness to challenge his offending behaviour”.

In three out of four cases, inspected planning work with women built on their strengths and protective factors.

Opportunities to support desistance were missed where planning did not address key factors linked to the likelihood of reoffending, as explained by an inspector:

> “They were identified as a rough sleeper with mental health issues, but neither accommodation, mental health nor emotional wellbeing were addressed in planning”.

**Does planning address appropriately factors associated with the risk of harm to others?**

Planning work to manage the risk of harm was weak, and compared poorly with the aggregate finding for CRCs from the 2018/2019 inspections.

Good planning should prioritise risk of harm factors, with careful attention to identifying both constructive and restrictive interventions to help manage and reduce the risk of further harm; however, this was met in only half of the case sample. The involvement of other agencies to develop multi-agency plans and incorporate them into contingency planning was lacking. In Leicestershire, only 29 per cent of plans made appropriate links to the work of other relevant agencies.

Overall, in just over a third of relevant cases we found sufficient planning to address child safeguarding or child protection issues. Adequate planning to address domestic abuse issues took place in only 53 per cent of the case sample. Poor research and
insufficient account of existing information pertinent to risk of harm contributed to risk of harm factors not being addressed, as illustrated by an inspector in the following example:

**Poor practice example**

Colin was sentenced to a suspended sentence order for shoplifting and assault. The assessment and planning were completed without any review of his case history. Failure to review the information meant the responsible officer knew nothing of the previous domestic violence incidents and identifiable victims, leading to inadequate risk management planning.

<table>
<thead>
<tr>
<th>Previous inspection</th>
<th>Current inspection</th>
</tr>
</thead>
</table>

2.3. Implementation and delivery

High-quality, well-focused, personalised and coordinated services are delivered, engaging the service user

Requires improvement

Inadequate

**Our rating**\(^{31}\) for implementation and delivery is based on three key questions:

<table>
<thead>
<tr>
<th>Comparison with DLNR CRC in previous inspection and all CRCs</th>
<th>Previous inspection</th>
<th>Current inspection</th>
<th>All CRCs(^{32})</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the sentence/post-custody period implemented effectively, with a focus on engaging the service user?(^{33})</td>
<td>80%</td>
<td>73%</td>
<td>70%</td>
</tr>
<tr>
<td>Does the implementation and delivery of services effectively support the service user’s desistance?(^{33})</td>
<td>59%</td>
<td>66%</td>
<td>52%</td>
</tr>
<tr>
<td>Does the implementation and delivery of services effectively support the safety of other people?(^{33})</td>
<td>50%</td>
<td>44%</td>
<td>41%</td>
</tr>
</tbody>
</table>

Staff have access to a wide range of services and interventions, and there were good examples of responsible officers taking account of personal circumstances and responding well to non-compliance. The Achilles’ heel is the weak attention to

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\(^{31}\) The rating for the standard is driven by the lowest score on each of the key questions, which is placed in a rating band, indicated in bold in the table. See Annex 2 for a more detailed explanation.

\(^{32}\) HMI Probation inspection data, from inspections conducted between June 2018 – June 2019.

\(^{33}\) The answers to these key questions are underpinned by more detailed ‘prompts’. The table in Annex 4 illustrates the percentage of the case sample with a satisfactory ‘yes’ response to each prompt.
safeguarding concerns and coordinating risk management work with other relevant agencies.

Is the sentence/post custody period implemented appropriately, with a focus on engaging the service user?

The CRC made good efforts to engage people being supervised. The working relationship with individuals under supervision was usually effective. We found many good examples of practitioners organising delivery flexibly to meet individual circumstances, and this was confirmed by our interviews with service users from the case sample; for instance, one said:

“I had problems attending the women’s centre, due to anxiety. The officer agreed to home visits and has arranged for another support worker to see me at home”.

Responsible officers in the community were not credited with contact time with prisoners prior to their release. This may have contributed to the finding that less than half of prisoners received what we assessed as a proportionate level of contact before release. Resettlement workers in the prison completed resettlement planning, which was communicated to the responsible officer, but this did not necessarily facilitate any pre-release communication between the officer in the community and the prisoner.

Attention to non-compliance and enforcement processes were mostly reliable, with good evidence of officers seeking to re-establish contact following breach and recall.

Do the services delivered focus sufficiently on reducing reoffending and supporting the service user’s desistance?

The CRC provides a good range of interventions and services, which were often local to the specific cluster. Responsible officers worked well with partner and provider services to coordinate implementation and access, as one inspector noted:

“Through Turning Point, Mark completed and engaged well in alcohol detox, the mindfulness programme, the recovery course, and he was on the list for the substance misuse detox programme. In addition, he had completed the first module of the Foundations of Rehabilitation RAR and had sessions with the ETE workers to update his CV”.

In over three-quarters of cases, individuals benefited from continuity with their supervising officer. Good efforts were made to build a non-criminal identity and support motivation to change. Greater effort was required to encourage delivery of ETE services.

This CRC performed notably better in comparison with the 2018/2019 aggregate finding for CRCs, with two-thirds of services delivered effectively to support the individual’s desistance.

Do the services delivered focus appropriately on managing and minimising the risk of harm to others?

Overall, practice to implement and deliver services that were attentive to supporting the safety of others was not good enough. This finding applied to all three local delivery clusters, but was particularly weak in Leicestershire.
Attention to protecting known and potential victims during the implementation period of supervision had deteriorated. Inspectors found a lack of attention and action to address concerns, combined with a lack of curiosity and of coordination with multi-agency safeguarding measures to protect children or known adults at risk; for example, one inspector noted:

“Rufus was released following a sentence for 44 weeks’ custody for offences of theft. He initially moved around before returning to live with his mother, despite this address not being approved pre-release due to disclosure of a recent assault. The officer had discussions with Rufus and his mother, but no police callout checks were undertaken, no information was exchanged with the police and no home visit was completed to assess the domestic circumstances and assess any vulnerability issues. The manager reviewed the case and judged [that] no further action was required, noting that the mother and her partner could protect themselves”.

This example also illustrates our concern that there was evidence of poor-quality management oversight, which frequently related to the management of risk of harm. Home visits can be a powerful tool by which to assess the current circumstances and manage the risk of harm to others, but these had not been deployed in 7 out 10 occasions where we considered them to have been necessary.

<table>
<thead>
<tr>
<th></th>
<th>Previous inspection</th>
<th>Current inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reviewing of progress</td>
<td>Inadequate</td>
<td>Inadequate</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2.4. Reviewing

Reviewing of progress is well-informed, analytical and personalised, actively involving the service user

Our rating for reviewing is based on three key questions:

<table>
<thead>
<tr>
<th>Comparison with DLNR CRC in previous inspection and all CRCs</th>
<th>Previous inspection</th>
<th>Current inspection</th>
<th>All CRCs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does reviewing focus sufficiently on supporting the service user’s compliance and engagement?</td>
<td>No comparable data available</td>
<td>71%</td>
<td>65%</td>
</tr>
</tbody>
</table>

34 The rating for the standard is driven by the lowest score on each of the key questions, which is placed in a rating band, indicated bold in the table. See Annex 2 for a more detailed explanation.

35 HMI Probation inspection data from inspections conducted between June 2018 - 2019.

36 The answers to these key questions are underpinned by more detailed ‘prompts’. The table in Annex 4 illustrates the percentage of the case sample with a satisfactory ‘yes’ response to each prompt.
Does reviewing focus sufficiently on supporting the service user’s desistance?\textsuperscript{36}

<table>
<thead>
<tr>
<th></th>
<th>No comparable data available</th>
<th>65%</th>
<th>60%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does reviewing focus sufficiently on keeping other people safe?\textsuperscript{36}</td>
<td>43%</td>
<td>40%</td>
<td>44%</td>
</tr>
</tbody>
</table>

The CRC’s commitment to encourage individuals on their journey towards a crime-free life is a strength, which is recognised in work to review cases. The quality of work to review changes in factors related to risk of harm, however, was particularly poor, with the quality of management oversight in this respect also of concern.

**Does reviewing effectively support the service user’s compliance and engagement?**

The quality of review work to support an individual’s compliance and engagement is strong, and reflected well the CRC’s ambition to encourage hope and recognise achievements on a service user’s journey towards a crime-free life. It is important that changes in circumstances are taken account of, and that planning remains achievable, with necessary adjustments to support compliance and delivery of the sentence.

While there remains room for improvement, it was encouraging to see improved attention to review work, especially where this was explained to the individual. One service user said:

“*I was told what my plan would be and so I did not have much input. But it was explained clearly to me what I needed to do and why I needed to do it, and so this was acceptable. I had some difficulties mid-way... the CRC supported me so that I did not miss my appointments*”.

**Does reviewing effectively support progress towards desistance?**

The quality of review work to identify changes in factors linked to desistance and offending was good in almost three-quarters of the cases. Adjustments to plans took account of these changes in two-thirds of the cases inspected and we found good examples of adjustments being made to support desistance. Reviews can provide opportunities to improve access to services, as the following case illustrates:

“*The responsible officer recognised a change in Drew’s presentation. They liaised with the mental health trust, Aquarius, and his GP, as well as carrying out a police check. They also consulted their line manager, and this led to an additional appointment and assisting Drew in a mental health referral process. Although it took some time for interventions to start, once work started it was a holistic approach and focused on offending behaviour*."

Reviewing practice can take place in a number of ways – informally in supervision and at the completion of RAR requirements or accredited programmes. Almost two-thirds of formal reviews being completed recorded progress towards the individual’s desistance.
Does reviewing focus sufficiently on keeping other people safe?

Overall, practice to use review work to manage risk of harm had deteriorated, with only a quarter of the cases being satisfactory in relation to reviewing identifying and addressing changes in factors relating to risk of harm to others. Harmful behaviour that can put others at risk is dynamic, and changes need to be investigated, verified and responded to promptly. Here, we look to find evidence of the increased use of home visits and multi-agency working to strengthen risk management planning. In this CRC, we found that high-quality reviews did not happen in far too many instances.

While we were informed that police and child protection enquiries could be made, these were not always triggered when necessary and, furthermore, the information received back from other agencies was not incorporated into reviews or acted on well. The following provides an example of our concerns:

<table>
<thead>
<tr>
<th>Poor practice example</th>
</tr>
</thead>
<tbody>
<tr>
<td>Malcolm was sentenced to a suspended sentence supervision order for burglary. He had an extensive offending history of acquisitive crime and violence. Part-way through his order, Malcolm disclosed some difficulties with his neighbour. Although this was discussed with Malcolm, there was no meaningful exploration of problem solving and emotional management strategies. Contact should have been made with the housing provider, particularly when he was arrested for an alleged assault against his neighbour. No contact was made with the police to ascertain details and why ‘no further action’ was taken, and there was also no consideration of how any potential risks to his neighbour would be managed. No formal review was undertaken.</td>
</tr>
</tbody>
</table>

The following provides an example of the quality of practice that inspectors wished to find:

<table>
<thead>
<tr>
<th>Good practice example</th>
</tr>
</thead>
<tbody>
<tr>
<td>The programme facilitator fed back about Jack driving while being on a ban and that he had now got back together with his partner. The responsible officer promptly completed a risk review to address this change in circumstances and risk factors. This triggered a police check to be carried out.</td>
</tr>
</tbody>
</table>
3. CRC-specific work

### 4.1. Unpaid work

Unpaid work is delivered safely and effectively, engaging the service user in line with the expectations of the court

<table>
<thead>
<tr>
<th>Previous inspection</th>
<th>Current inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Good</td>
<td>Good</td>
</tr>
</tbody>
</table>

Due to changes in inspection standards and methodology between the first and second rounds of CRC inspections, the rating for unpaid work is not directly comparable with the rating for the previous year.

We inspected the management of 55 unpaid work requirements, looking at assessment and planning; safety; and implementation of the court order. We also observed five induction sessions and eight work parties, to examine the extent to which unpaid work was delivered in a way that supported desistance.

The CRC provided reliable opportunities for people to complete unpaid work to meet the requirements of the court, but there were few opportunities for people to access ETE services. Managers highlighted that this element was not specified in their contract.

Delivery of unpaid work varied slightly by county, and managers said that there had not been substantial changes to the arrangements inherited from the three former probation trusts in 2014. Long-standing strong relationships existed with local strategic partners and beneficiaries. Unpaid work supervisors complained that there had been limited investment in unpaid work vans and new equipment by the CRC.

Since the previous inspection, RRP had introduced a strategic lead for unpaid work across both DLNR and SWM CRCs. We were told that there was no organisational strategy for unpaid work at the time of this inspection. The RRP was on the cusp of announcing organisational changes to achieve consistency, generate savings, and increase efficiency. This will also result in a reduction of unpaid work staff. It was too early to evaluate the impact of these planned changes.

**Strengths:**

- The CRC pays good attention to ensure that unpaid work orders are completed within 12 months.
- Unpaid work supervisors demonstrate good behaviour to service users.
- Peer mentors may contribute to group induction, which can improve engagement and motivation.
- Unpaid work staff pay good attention to health and safety requirements.
- Induction to unpaid work starts promptly and is delivered well.

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37 CRC aspects of domain three work are listed in [HMI Probation's Standards](#) as 4.1 and 4.2.
Areas for improvement:

- There is a lack of clear organisational strategy to manage unpaid work.
- Unpaid work supervisors lack access to the case management system, n-Delius, and the CRC ICT, which can impair communication.
- ETE opportunities are not available to provide up to 20 per cent of unpaid work hours for relevant cases.
- The provision of bespoke unpaid work opportunities for women is marginal.
- In Leicestershire, the shortage of unpaid work supervisors could increase the possibility of insufficient work being available and individuals being stood down.

Unpaid work key data

<table>
<thead>
<tr>
<th></th>
<th>Previous inspection</th>
<th>Current inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average unpaid work stand-down rate in previous 12 months(^{38})</td>
<td>No data</td>
<td>2.66%</td>
</tr>
<tr>
<td>Percentage of successful completion of unpaid work requirements in previous 12 months</td>
<td>93.6%</td>
<td>94.4%</td>
</tr>
<tr>
<td>Percentage of unpaid work hours completed as ETE activity in previous 12 months(^{39})</td>
<td>No data</td>
<td>0.26%</td>
</tr>
</tbody>
</table>

Our rating\(^{40}\) for unpaid work is based on four key questions:

<table>
<thead>
<tr>
<th>Current inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the assessment and planning of unpaid work personalised?(^{41})</td>
</tr>
<tr>
<td>Is unpaid work delivered safely?(^{41})</td>
</tr>
<tr>
<td>Do arrangements for unpaid work maximise rehabilitative elements and support desistance?</td>
</tr>
<tr>
<td>Is the sentence of the court implemented appropriately?(^{41})</td>
</tr>
</tbody>
</table>

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\(^{38}\) Data supplied by DLNR CRC.

\(^{39}\) Data supplied by DLNR CRC.

\(^{40}\) The provisional rating for the standard is driven by the lowest score on each of the key questions, which is placed in a rating band, indicated in bold in the table.

\(^{41}\) The answer to this key question is underpinned by more detailed 'prompts'. The table in Annex 4 illustrates the percentage of the case sample with a satisfactory 'yes' response.
In this CRC, 74 per cent of the unpaid work cases we inspected met our requirement for assessment and planning, and 75 per cent for delivery and the appropriate implementation of the sentence. In only just over a third of relevant cases, however, was the unpaid work offer to develop employment-related skills available.

**Is the assessment and planning of unpaid work personalised?**

While induction arrangements varied by locality, it was clear that processes were attentive to both the initial assessment and individual circumstances. Good effort was made to take employment commitments into consideration, and, where possible, individual placements were used to cater for meeting diverse needs, such as English not being the first language or health disabilities. The offer of women-only group work placements was very limited but female service users were consulted before being instructed to work in a mixed-gender group.

In Leicestershire, we observed a peer mentor outlining at induction what to expect during the unpaid work requirement, which helped to break down barriers and encourage engagement.

**Is unpaid work delivered safely?**

The initial risk of harm assessment was mostly considered at the start of unpaid work. While unpaid work supervisors had reliable telephone access to the CRC office while out on placements, they did not have routine access to n-Delius or access to the CRC secure email, and were reliant on paperwork about the profile of individuals on the unpaid work placement. Unpaid work supervisors told us that this was not always detailed, and we came across examples where the supervisor lacked sufficient information.

There was good attention to health and safety, with service users equipped with appropriate protective clothing. Our inspectors observing projects on site witnessed good examples of individuals being told how to handle equipment safely and more effectively. Each project was carefully risk-assessed, and included detailed maps and information about risks and tasks, as well as beneficiary details.

The information on how an individual had performed on unpaid work was recorded reliably and made available to responsible officers. Efforts were made to sequence the completion of unpaid work orders before other requirements. There was good attention to monitoring attendance and enforcement processes.

**Do arrangements for unpaid work maximise rehabilitative elements and support desistance?**

The offer to complete ETE work as a contribution to the unpaid work order was aspirational, as supervisors and managers confirmed that access to these services was very difficult to source. One service user went as far as submitting a complaint, as he was not provided with this opportunity. He was told that, owing to funding problems, ETE was not currently available.

There was a wide range of views among the service users we spoke to while visiting unpaid projects, with some accepting unpaid work as an appropriate punishment for their crime, and others looking to gain new skills. Most had a good understanding of how their work benefited the local community. A constructive example was provided by one individual who had a disability:

“**They’ve been great at making sure I only do work I can manage, and they let me choose. I never thought I would do this type of work – I’ve never used a strimmer**
Is the sentence of the court implemented appropriately?

The CRC arrangements varied slightly by locality. In the major cities, it was possible to schedule regular slots for group inductions, which facilitated unpaid work to start promptly. In Leicestershire, those living outside the city experienced long journeys to attend induction and to report for projects. We found that 62 per cent had been allocated work within 7 days of the CRC being allocated an unpaid work placement, rising to 78 per cent by 14 days. Once assessed and assigned to unpaid work, regular arrangements were usually planned for the duration of the order, which enabled individuals to develop a routine.

There was good attention to enforcement, with appropriate judgements applied to non-attendance and good efforts made to issue instructions to complete outstanding hours. The CRC kept a watchful eye on orders that were at risk of not completing within the 12-month period, with actions taken to address barriers.

As in our inspection in 2018/2019, Leicestershire had problems in recruiting unpaid work supervisors and struggled to ensure that there would be enough work. Due to a standard practice of over-instructing people to attend projects, based on a predicted attrition rate, unpaid work staff accepted that some projects might be over-subscribed. This practice ran the risk that some might attend, only to learn that there was insufficient work that day. Although this applied to less than 3 per cent of unpaid work sessions, it applied to 36 per cent of the cases we inspected. This was higher than the aggregate finding for our year one inspections of CRCs, which was 25 per cent.

4.2. Through the Gate

Through the Gate services are personalised and coordinated, addressing the service user’s resettlement needs

We inspected the management of 45 cases where the CRC had delivered pre-release Through the Gate resettlement work, looking at resettlement planning, delivery of resettlement services, and release coordination. We also held meetings with: the RRP senior manager and her deputy, who are responsible for Through the Gate services, ten resettlement staff, seven resettlement unit managers and seven prison governors leading resettlement work in their prisons.

In our previous inspection, we rated Through the Gate services as ‘Good’. It was pleasing to see that this foundation has been built upon, and that the opportunities afforded by the additional funding for enhanced services have been planned, deployed and implemented well. We found good examples of leadership and innovation, supported by enthusiastic staff and providers who are committed to providing effective services to prepare people for release from prison.
Since January 2018, a senior manager has held responsibility for Through the Gate services across both of the RRP’s CRCs. For DLNR CRC, this includes HMPs Nottingham, Ranby, Foston Hall (for women), Sudbury, Leicester, Peterborough (for the female prisoners held there) and four non-settlement prisons: HMPs Whatton, Gartree, Stocken and Lowdham Grange.

The RRP has led the way as the HM Prisons and Probation Service’s early adopter of enhanced Through the Gate services. CRCs received additional funding to deliver an enhanced specification from April 2019. The RRP did not fundamentally change its approach but used the funding to recruit and train additional staff. Unlike some other CRC models, the staff are employed by the CRC, with teams made up of resettlement workers, housing advisers, ETE staff and administrators, supported by a management structure. St Giles Trust also trains prisoners to become peer advisers in their prison.

The expectation is that, while most resettlement staff are located at a specific prison, they can deliver services to other prisons supported by the CRC. At the time of this inspection, the future Ministry of Justice plans for Through the Gate services were uncertain, which was a cause of concern to this workforce, with a number already leaving or looking for other jobs. We were told that the CRC and the prisons it supports had identified this issue on their risk registers.

Strategic working relationships are strong, and these are supported by prison partnership plans with each resettlement prison.

Strengths:

- Working relationships between Through the Gate staff and key partner agencies and providers are effective, which encourages collaboration and good communication.
- The St Giles Trust peer adviser model provides prisoners with opportunities to learn new skills and offer support to others pre-release.
- Community support workers can meet individuals at the point of release, and support them to access services in the community.
- The Through the Gate teams work flexibly to support service delivery.

Areas for improvement:

- An up-to-date assessment of risk of harm needs to inform each resettlement plan.
- Responsible officers require support to organise their work so that they can visit prisons, thereby consolidating their learning and improving their understanding of resettlement work.
Our rating\(^{42}\) for Through the Gate is based on three key questions:

<table>
<thead>
<tr>
<th>Comparison with previous inspection and all CRCs</th>
<th>Previous inspection</th>
<th>Current inspection</th>
<th>All CRCs(^{43})</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does resettlement planning focus sufficiently on the service user’s resettlement needs and on factors linked to offending and desistance?(^{44})</td>
<td>83%</td>
<td>84%</td>
<td>69%</td>
</tr>
<tr>
<td>Does resettlement activity focus sufficiently on supporting the service user’s resettlement?(^{44})</td>
<td>78%</td>
<td>83%</td>
<td>62%</td>
</tr>
<tr>
<td>Is there effective coordination of resettlement activity?(^{44})</td>
<td>89%</td>
<td>80%</td>
<td>59%</td>
</tr>
</tbody>
</table>

In this CRC, at least 80 per cent of cases met our standards for resettlement planning, including required resettlement services and release coordination. This led to an overall judgement of ‘Outstanding’ for Through the Gate services. There are strong working relationships between CRC resettlement staff, prison leaders, and relevant partner agencies and providers, with impressive examples of collaboration and innovation.

**Does resettlement planning focus sufficiently on the service user’s resettlement needs and on factors linked to offending and desistance?**

The CRC produces high-quality resettlement plans, and these involve the prisoner, take good account of their individual needs, and draw upon relevant information. We found examples of good practice; for example, one inspector said:

> “The plan draws on available sources of information and highlights the domestic abuse, safeguarding concerns and restraining order in place”.

While it was pleasing to find the majority of cases took into account factors related to risk of harm, it was concerning that 25 per cent of plans were prepared without the resettlement worker being clear about the risk of harm level.

**Does resettlement activity focus sufficiently on supporting the service user’s resettlement?**

As highlighted in our recent thematic inspection of post-release supervision for short-term prisoners,\(^{45}\) access to safe and suitable accommodation on release from prison is a basic need and underpins a person’s motivation and capacity to engage with other services and interventions. It was therefore positive to note that, in all

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\(^{42}\) The rating for the standard is driven by the lowest score on each of the key questions, which is placed in a rating band, indicated in bold in the table. See Annex 2 for a more detailed explanation.

\(^{43}\) HMI Probation inspection data, from inspections conducted between June 2018 – June 2019.

\(^{44}\) The answers to these key questions are underpinned by more detailed ‘prompts’. The table in Annex 4 illustrates the percentage of the case sample with a satisfactory ‘yes’ response to each prompt.

relevant cases, action was taken by resettlement staff to address accommodation needs.

The Through the Gate staff are not direct housing providers but worked imaginatively to improve access to suitable accommodation. For example, local authority housing managers were invited into Nottingham prison to improve their understanding of the issues for prisoners facing release. The CRC has collaborated with the YMCA and Derby Homes (a subsidiary of Derby City Council) to establish an accommodation facility; this provides up to thirteen six-month accommodation places and move-on support. In Nottingham, the city council paid the CRC to second prison navigators to guide rough sleepers pre-release towards supported accommodation. It was frustrating that, despite these efforts, it remained the case that access to stable accommodation at the point of release remained out of reach for almost half of those identified in our case sample as being in need, highlighting the lack of supply to meet demand in the community.

Community support workers have been recruited to provide additional support; this includes meeting prisoners at the gate, accompanying people to find accommodation, and helping them to apply for universal credit and access mental health services.

We found good levels of coordination and communication with provider services and partners to support referrals. Unlike the CRC case management arrangements, the Through the Gate teams were joined by administrators who had access to the case management system in the prison (P-Nomis) and in the community (n-Delius). These roles were seen as pivotal to facilitating referrals and monitoring performance.

In both the previous and current inspections of DLNR CRC, practice to support access to resettlement services was notably better than the aggregate for the CRCs across the first year of inspections.

There were good examples of collaboration and strong partnerships with other statutory agencies. St Giles Trust provided trained prisoner peer advisers, who were involved in co-delivering interventions, as well as following through release planning work with prisoners on the wings.

Bespoke women’s services in the community linked with HMP Foston Hall resettlement workers. A specific workshop to support women to achieve safe management of their finances had been developed, linked to domestic abuse experiences.

**Is there effective coordination of resettlement activity?**

Communication by Through the Gate staff with other services in the prisons was applauded by senior prison service managers. At HMP Nottingham, the CRC resettlement unit manager was a valued member of the senior leadership team and worked well with other leaders in the prison.

Since the previous inspection, the CRC had delivered training, and worked with responsible officers in the community to improve their understanding of pre-release resettlement work. From our interviews with responsible officers as part of our domain two case inspection, we learned that, while they now made better use of resettlement plans, the well-intentioned ambition to enable them to visit a prison to
improve their understanding of Through the Gate work had been difficult to achieve, due to workload pressures. Nonetheless, we found good examples of coordination at the point of release, as noted by one inspector:

**Good practice example**

Julian, aged 41, was sentenced to 24 weeks in custody for theft. A detailed resettlement plan was developed with Julian, and took account of his disability and his relationships to support his release. Appointments were arranged to help Julian access benefits, with the housing department, his responsible officer and his doctor. There was evidence in this case of a coordinated approach to resettlement planning between the responsible officer and resettlement worker.
Annex 1: Background of probation services

Around 255,000 adults are supervised by probation services annually.\(^{46}\) Probation services supervise individuals serving community orders, provide offenders with resettlement services while they are in prison (in anticipation of their release) and supervise, for a minimum of 12 months, all individuals released from prison.\(^ {47}\)

To protect the public, probation staff assess and manage the risks that offenders pose to the community. They help to rehabilitate these individuals by dealing with problems such as drug and alcohol misuse and lack of employment or housing, to reduce the prospect of reoffending. They monitor whether individuals are complying with court requirements, to make sure they abide by their sentence. If offenders fail to comply, probation staff generally report them to court or request recall to prison.

These services are currently provided by a publicly owned National Probation Service (NPS) and 18 privately owned Community Rehabilitation Companies (CRCs) that provide services under contract. The government has announced its intention to change the arrangements for delivering probation services, and has given notice to CRCs that it will terminate their contracts early, by spring 2021, with responsibility for offender management passing to the NPS at that point.

The NPS advises courts on sentencing all offenders, and manages those who present a high or very high risk of serious harm or who are managed under Multi-Agency Public Protection Arrangements. CRCs supervise most other offenders who present a low or medium risk of harm.

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\(^{46}\) Source: Offender Management Caseload Statistics as at 30 June 2019, Ministry of Justice (based on the average of total offenders supervised in the previous four quarters to the end of June 2019).

\(^{47}\) All those sentenced, for offences committed after the implementation of the Offender Rehabilitation Act 2014, to more than one day and less than 24 months in custody are supervised in the community for 12 months post-release. Others serving longer custodial sentences may have longer total periods of supervision on licence.
Annex 2: Methodology

The inspection methodology is summarised below, linked to the three domains in our standards framework. We focused on obtaining evidence against the standards, key questions and prompts in our inspection framework.

Domain one: organisational delivery
The provider submitted evidence in advance and the CRC’s Chief Executive Officer delivered a presentation covering the following areas:

- How does the leadership of the organisation support and promote the delivery of a high-quality, personalised and responsive service for all service users?
- How are staff in the organisation empowered to deliver a high-quality, personalised and responsive service for all service users?
- Is there a comprehensive range of high-quality services in place, supporting a tailored and responsive service for all service users?
- Is timely and relevant information available, and are there appropriate facilities to support a high-quality, personalised and responsive approach for all service users?
- What are your priorities for further improvement, and why?

During the main fieldwork phase, we interviewed 75 individual responsible officers, asking them about their experiences of training, development, management supervision and leadership. We held various meetings with groups and individuals, which allowed us to triangulate evidence and information. In total, we conducted 43 meetings, which included meetings with senior managers, operational partners and stakeholders, and with middle managers and frontline staff. The evidence collected under this domain was judged against our published ratings characteristics.48

Domain two: case supervision
We completed case assessments over a two-week period, examining service users’ files and interviewing responsible officers and service users. The cases selected were those of individuals who had been under community supervision for approximately six to seven months (either through a community sentence or following release from custody). This enabled us to examine work in relation to assessing, planning, implementing and reviewing. Where necessary, interviews with other people closely involved in the case also took place.

We examined 130 cases from all local delivery unit clusters: Derbyshire, Leicestershire and Nottinghamshire. The sample size was set to achieve a confidence level of 80 per cent (with a margin of error of 5), and we ensured that the ratios in relation to gender, type of disposal and risk of serious harm level matched those in the eligible population.

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In some areas of this report, data may have been split into smaller sub-samples – for example, male/female cases, PO/PSO cases. Where this is the case, the margin of error for the sub-sample findings may be higher than five.

**Domain three: CRC work**

We completed case assessments for two further samples: unpaid work and Through the Gate. As in domain two, the sample size for unpaid work is set to achieve a confidence level of 80 per cent (with a margin of error of 5). Published data is insufficient to calculate accurate margins of error for Through the Gate work, so the size of the case sample for that element of work is estimated, based on overall workload and previous inspection data.

**Unpaid work**

We examined 55 cases with unpaid work requirements that had begun at least three months previously. The sample included cases managed by the NPS, as well as those managed by the CRC. We ensured that the ratios in relation to gender and risk of serious harm level matched those in the eligible population. We used the case management and assessment systems to inspect these cases.

We observed eight unpaid work projects and five unpaid work induction sessions, to gather qualitative evidence.

We also held meetings with the following individuals/groups, which allowed us to triangulate evidence and gather additional information:

- the senior manager with overall responsibility for the delivery of unpaid work
- the middle manager with responsibilities for unpaid work
- a group of supervisors of unpaid work, from a range of geographical locations.

**Through the Gate**

We examined 45 custodial cases in which the individual had been released on licence or post-sentence supervision from the CRC’s resettlement prisons, over a four-week period, shortly before inspection fieldwork. The sample included those entitled to pre-release Through the Gate services from the CRC who were then supervised post-release by the CRC being inspected. We used the case management and assessment systems to inspect these cases.

We also held meetings with the following individuals/groups:

- the senior manager in the CRC responsible for Through the Gate services
- the heads of resettlement for prisons supported by DLNR Through the Gate services
- the middle managers responsible for Through the Gate services in specific prisons
- a group of CRC resettlement workers directly responsible for preparing resettlement plans and/or meeting identified resettlement needs.

**Ratings explained**

Domain one ratings are proposed by the lead inspector for each standard. They will be a single judgement, using all the relevant sources of evidence. More detailed information can be found in the probation inspection domain one rules and guidance on the website.
Domain two and three standard ratings are based on the results of the inspection of individual cases. Ratings are at the standard level, and based on consolidated results (at key question level) of all cases inspected in the relevant domain. In CRC inspections only, the rating for unpaid work in domain three may also be influenced by evidence from observations.

For each standard, the rating is aligned to the lowest banding at the key question level, recognising that each key question is an integral part of the standard.

<table>
<thead>
<tr>
<th>Lowest banding (key question level)</th>
<th>Rating (standard)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minority: &lt;50%</td>
<td>Inadequate</td>
</tr>
<tr>
<td>Too few: 50-64%</td>
<td>Requires improvement</td>
</tr>
<tr>
<td>Reasonable majority: 65-79%</td>
<td>Good</td>
</tr>
<tr>
<td>Large majority: 80%+</td>
<td>Outstanding ⭐</td>
</tr>
</tbody>
</table>

We use case sub-samples for some of the key questions in domains two and three. For example, when judging whether planning focused sufficiently on keeping other people safe, we exclude those cases where the inspector deemed the risk of serious harm to be low. This approach is justified on the basis that we focus on those cases where we expect meaningful work to take place.

An element of professional judgement may be applied to the standards ratings in domains two and three. Exceptionally, the ratings panel considers whether professional discretion should be exercised where the lowest percentage at the key question level is close to the rating boundary, for example between ‘requires improvement’ and ‘good’ (specifically, within five percentage points of the boundary or where a differing judgement in one case would result in a change in rating). The panel considers the sizes of any sub-samples used and the percentages for the other key questions within that standard, such as whether they fall within different bandings and the level of divergence, to make this decision.

**Rating unpaid work**

For the unpaid work standard, domain three case inspections provide data on key questions 4.1.1, 4.1.2 and 4.1.4. Analysis of that data provides an indicative rating for the unpaid work standard, aligned with banding, as above. Qualitative evidence for key question 4.1.3 is obtained from observations during the fieldwork, other written evidence provided by the CRC, and evidence obtained from relevant meetings. This qualitative evidence may be used to increase or decrease the indicative rating for unpaid work by one band. If the lead inspector believes that is justified, the proposal is put to the ratings panel, for ratification or rejection.

**Overall provider rating**

Straightforward scoring rules are used to generate the overall provider rating. Each of the ten standards will be scored on a 0–3 scale in which ‘Inadequate’ = 0; ‘Requires improvement’ = 1; ‘Good’ = 2; ‘Outstanding’ = 3. Adding these scores produces a total score ranging from 0–30, which is banded to produce the overall rating, as follows:

- 0–5 = Inadequate
- 6–15 = Requires improvement
- 16–25 = Good
- 26–30 = Outstanding.
We do not include any weightings in the scoring rules. The rationale for this is that all parts of the standards framework are strongly linked to effective service delivery and positive outcomes, and we have restricted ourselves to those that are most essential. Our view is that providers need to focus across all the standards, and we do not want to distort behaviours in any undesirable ways. Furthermore, the underpinning evidence supports including all standards/key questions in the rating, rather than weighting individual elements.

**Comparative data**

Where HMIP have comparative data, our internal data analysis calculates whether any changes are statistically significant or not (using the Z-score test, with a significance level of 0.1). We do not publish that level of detail, but where inspectors are referring to changes in data that meet this significance test, they will use the word ‘significant’. They use different words to describe other changes in data, which do not meet the significance test.
Annex 4: Inspection data

The answers to the key questions that determine the ratings for each standard are underpinned by answers to more detailed ‘prompts’. These tables illustrate the proportions of the case sample with a satisfactory ‘yes’ response to the prompt questions. It should be noted that there is no mechanistic connection between the proportion of prompt questions answered positively, and the overall score at the key question level. The ‘total’ does not necessarily equal the ‘sum of the parts’. The summary judgement is the overall finding made by the inspector, having taken consideration of the answers to all the prompts, weighing up the relative impact of the strengths and weaknesses.

Where we have changed the standard, key question or prompt since the previous round of inspections, no comparative data is available.

<table>
<thead>
<tr>
<th>2.1. Assessment</th>
<th>Previous inspection</th>
<th>Current inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does assessment focus sufficiently on engaging the service user?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does assessment analyse the service user’s motivation and readiness to engage and comply with the sentence?</td>
<td>53%</td>
<td>46%</td>
</tr>
<tr>
<td>Does assessment analyse the service user’s diversity and personal circumstances, and consider the impact these have on their ability to comply and engage with service delivery?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>No comparable data available</td>
<td>42%</td>
</tr>
<tr>
<td>Is the service user meaningfully involved in their assessment, and are their views taken into account?</td>
<td>59%</td>
<td>55%</td>
</tr>
<tr>
<td>Does assessment focus sufficiently on the factors linked to offending and desistance?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does assessment identify and analyse offending-related factors?</td>
<td>27%</td>
<td>32%</td>
</tr>
<tr>
<td>Does assessment identify the service user’s strengths and protective factors?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>No comparable data available</td>
<td>62%</td>
</tr>
<tr>
<td>Does assessment draw sufficiently on available sources of information?</td>
<td>49%</td>
<td>52%</td>
</tr>
</tbody>
</table>

49 Comparable data between the previous and current inspection are not available. This is due to a methodological change.
### Does assessment focus sufficiently on the risk of harm to others?

| Does assessment clearly identify and analyse any risk of harm to others, including identifying who is at risk and the nature of that risk?[^50] | No comparable data available | 38%  
| --- | --- | --- |
| Does assessment analyse any specific concerns and risks related to actual and potential victims?[^50] | No comparable data available | 42%  
| Does assessment draw sufficiently on available sources of information, including past behaviour and convictions, and involve other agencies where appropriate? | No comparable data available | 36%  
| Were domestic abuse checks undertaken?[^50][^51] | No comparable data available | 46%  
| Did child safeguarding information sharing take place in cases where required?[^50][^52] | No comparable data available | 61%  

### 2.2. Planning

#### Does planning focus sufficiently on engaging the service user?

| Is the service user meaningfully involved in planning, and are their views taken into account? | 44% | 52%  
| --- | --- | --- |
| Does planning take sufficient account of the service user’s diversity and personal circumstances, which may affect engagement and compliance?[^50] | No comparable data available | 58%  
| Does planning take sufficient account of the service user’s readiness and motivation to change, which may affect engagement and compliance? | 53% | 60%  

[^50]: Comparable data between the previous and current inspection are not available. This is due to a methodological change.  
[^51]: Expected in all cases.  
[^52]: Expected in all cases where the service user has children, is in contact with children or presents a potential risk of harm to children.
<table>
<thead>
<tr>
<th>Question</th>
<th>Percentage</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does planning set out how all the requirements of the sentence or licence/post-sentence supervision will be delivered within the available timescales?</td>
<td>64%</td>
<td>68%</td>
</tr>
<tr>
<td>Does planning set a level, pattern and type of contact sufficient to engage the service user and to support the effectiveness of specific interventions?</td>
<td>63%</td>
<td>63%</td>
</tr>
<tr>
<td>Does planning focus sufficiently on reducing reoffending and supporting the service user’s desistance?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does planning sufficiently reflect offending-related factors and prioritise those which are most critical?</td>
<td>63%</td>
<td>71%</td>
</tr>
<tr>
<td>Does planning build on the service user’s strengths and protective factors, utilising potential sources of support?[^53]</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does planning set out the services most likely to reduce reoffending and support desistance?</td>
<td>61%</td>
<td>72%</td>
</tr>
<tr>
<td>Does planning address appropriately factors associated with the risk of harm to others?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does planning sufficiently address risk of harm factors and prioritise those which are most critical?</td>
<td>59%</td>
<td>45%</td>
</tr>
<tr>
<td>Does planning set out the necessary constructive and/or restrictive interventions to manage the risk of harm?</td>
<td>56%</td>
<td>50%</td>
</tr>
<tr>
<td>Does planning make appropriate links to the work of other agencies involved with the service user and any multi-agency plans?[^53]</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does planning set out necessary and effective contingency arrangements to manage those risks that have been identified?</td>
<td>44%</td>
<td>31%</td>
</tr>
</tbody>
</table>

2.3. Implementation and delivery

**Is the sentence/post-custody period implemented appropriately, with a focus on engaging the service user?**

<table>
<thead>
<tr>
<th>Question</th>
<th>Percentage</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do the requirements of the sentence start promptly, or at an appropriate time?</td>
<td>86%</td>
<td>68%</td>
</tr>
</tbody>
</table>

[^53]: Comparable data between the previous and current inspection are not available. This is due to a methodological change.
<table>
<thead>
<tr>
<th>Question</th>
<th>Percentage</th>
<th>Previous Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is sufficient focus given to maintaining an effective working relationship with the service user?</td>
<td>82%</td>
<td>79%</td>
</tr>
<tr>
<td>Are sufficient efforts made to enable the service user to complete the sentence, including flexibility to take appropriate account of their personal circumstances?</td>
<td>87%</td>
<td>88%</td>
</tr>
<tr>
<td>Post-custody cases only: Was there a proportionate level of contact with the prisoner before release?</td>
<td>49%</td>
<td>44%</td>
</tr>
<tr>
<td>Are risks of non-compliance identified and addressed in a timely fashion to reduce the need for enforcement actions?</td>
<td>70%</td>
<td>72%</td>
</tr>
<tr>
<td>Are enforcement actions taken when appropriate?[^54]</td>
<td>No comparable data available</td>
<td>79%</td>
</tr>
<tr>
<td>Are sufficient efforts made to re-engage the service user after enforcement actions or recall?</td>
<td>87%</td>
<td>79%</td>
</tr>
<tr>
<td><strong>Do the services delivered focus sufficiently on reducing reoffending and supporting the service user's desistance?</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are the delivered services those most likely to reduce reoffending and support desistance, with sufficient attention given to sequencing and the available timescales?</td>
<td>57%</td>
<td>64%</td>
</tr>
<tr>
<td>Wherever possible, does the delivery of services build upon the service user's strengths and enhance protective factors?[^54]</td>
<td>No comparable data available</td>
<td>66%</td>
</tr>
<tr>
<td>Is the involvement of other organisations in the delivery of services sufficiently well coordinated?[^54]</td>
<td>No comparable data available</td>
<td>71%</td>
</tr>
<tr>
<td>Are key individuals in the service user’s life engaged, where appropriate, to support their desistance?[^54]</td>
<td>No comparable data available</td>
<td>53%</td>
</tr>
<tr>
<td>Is the level and nature of contact sufficient to reduce reoffending and support desistance?</td>
<td>61%</td>
<td>52%</td>
</tr>
</tbody>
</table>

[^54]: Comparable data between the previous and current inspection are not available. This is due to a methodological change.
<table>
<thead>
<tr>
<th>Question</th>
<th>Level of Engagement</th>
<th>Data Availability</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are local services engaged to support and sustain desistance during the sentence and beyond?</td>
<td>No comparable data available</td>
<td>72%</td>
<td></td>
</tr>
<tr>
<td><strong>Do the services delivered focus appropriately on managing and minimising the risk of harm to others?</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is the level and nature of contact offered sufficient to manage and minimise the risk of harm?</td>
<td>68%</td>
<td>62%</td>
<td></td>
</tr>
<tr>
<td>Is sufficient attention given to protecting actual and potential victims?</td>
<td>No comparable data available</td>
<td>39%</td>
<td></td>
</tr>
<tr>
<td>Is the involvement of other agencies in managing and minimising the risk of harm sufficiently well coordinated?</td>
<td>No comparable data available</td>
<td>53%</td>
<td></td>
</tr>
<tr>
<td>Are key individuals in the service user’s life engaged, where appropriate, to support the effective management of risk of harm?</td>
<td>No comparable data available</td>
<td>50%</td>
<td></td>
</tr>
<tr>
<td>Are home visits undertaken, where necessary, to support the effective management of risk of harm?</td>
<td>No comparable data available</td>
<td>30%</td>
<td></td>
</tr>
<tr>
<td><strong>2.4. Reviewing</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Does reviewing effectively support the service user’s compliance and engagement?</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>In cases where it is needed, does reviewing consider compliance and engagement levels and any relevant barriers?</td>
<td>No comparable data available</td>
<td>78%</td>
<td></td>
</tr>
<tr>
<td>In cases where it was needed, were any necessary adjustments made to the ongoing plan of work to take account of compliance and engagement levels and any relevant barriers?</td>
<td>No comparable data available</td>
<td>68%</td>
<td></td>
</tr>
<tr>
<td>Is the service user meaningfully involved in reviewing their progress and engagement?</td>
<td>No comparable data available</td>
<td>58%</td>
<td></td>
</tr>
</tbody>
</table>

---

55 Comparable data between the previous and current inspection are not available. This is due to a methodological change.
<table>
<thead>
<tr>
<th></th>
<th>data available</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are written reviews completed as appropriate as a formal record of actions to implement the sentence?</td>
<td>No comparable data available</td>
<td>64%</td>
</tr>
<tr>
<td><strong>Does reviewing effectively support progress towards desistance?</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does reviewing identify and address changes in factors linked to offending behaviour, with the necessary adjustments being made to the ongoing plan of work?</td>
<td>No comparable data available</td>
<td>58%</td>
</tr>
<tr>
<td>Does reviewing focus sufficiently on building upon the service user’s strengths and enhancing protective factors?</td>
<td>No comparable data available</td>
<td>68%</td>
</tr>
<tr>
<td>Is reviewing informed by the necessary input from other agencies working with the service user?</td>
<td>No comparable data available</td>
<td>67%</td>
</tr>
<tr>
<td>Are written reviews completed as appropriate as a formal record of the progress towards desistance?</td>
<td>No comparable data available</td>
<td>57%</td>
</tr>
<tr>
<td><strong>Does reviewing focus sufficiently on keeping other people safe?</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does reviewing identify and address changes in factors related to risk of harm, with the necessary adjustments being made to the ongoing plan of work?</td>
<td>No comparable data available</td>
<td>24%</td>
</tr>
<tr>
<td>Is reviewing informed by the necessary input from other agencies involved in managing the service user’s risk of harm?</td>
<td>No comparable data available</td>
<td>45%</td>
</tr>
<tr>
<td>Is the service user (and, where appropriate, key individuals in the service user’s life) meaningfully involved in reviewing their risk of harm?</td>
<td>35%</td>
<td>24%</td>
</tr>
<tr>
<td>Are written reviews completed as appropriate as a formal record of the management of the service user’s risk of harm?</td>
<td>No comparable</td>
<td>32%</td>
</tr>
</tbody>
</table>

56 Comparable data between the previous and current inspection are not available. This is due to a methodological change.
### 4.1 Unpaid work

<table>
<thead>
<tr>
<th>Question</th>
<th>Available Data</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Is the assessment and planning of unpaid work personalised?</strong></td>
<td>No comparable data available</td>
<td>71%</td>
</tr>
<tr>
<td>Does assessment consider the service user’s diversity and personal circumstances, and the impact these have on their ability to comply and engage with unpaid work?</td>
<td>No comparable data available</td>
<td>72%</td>
</tr>
<tr>
<td><strong>Does unpaid work build upon a service user’s strengths and enhance their protective factors?</strong></td>
<td>No comparable data available</td>
<td>78%</td>
</tr>
<tr>
<td><strong>Is the allocated work suitable, taking account of the service user’s diversity and personal circumstances?</strong></td>
<td>No comparable data available</td>
<td>76%</td>
</tr>
<tr>
<td><strong>Is unpaid work delivered safely?</strong></td>
<td>No comparable data available</td>
<td>76%</td>
</tr>
<tr>
<td>Does the delivery of unpaid work take account of risk of harm to other service users, staff or the public?</td>
<td>No comparable data available</td>
<td>82%</td>
</tr>
<tr>
<td>Does unpaid work consider issues relating to the health and safety or potential vulnerability of the service user?</td>
<td>No comparable data available</td>
<td>82%</td>
</tr>
<tr>
<td>Where the responsible officer is engaged in other activity/work with the service user, does regular communication take place?</td>
<td>No comparable data available</td>
<td>71%</td>
</tr>
<tr>
<td><strong>Is the sentence of the court implemented appropriately?</strong></td>
<td>No comparable data available</td>
<td>55%</td>
</tr>
<tr>
<td>Does unpaid work commence promptly and happen regularly?</td>
<td>No comparable data available</td>
<td>55%</td>
</tr>
</tbody>
</table>

---

57 Comparable data between the previous and current inspection are not available. This is due to a methodological change.
<table>
<thead>
<tr>
<th>Question</th>
<th>Status</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do arrangements for unpaid work encourage the service user’s engagement and compliance with the order?</td>
<td>No comparable data available</td>
<td>83%</td>
</tr>
<tr>
<td>Are professional judgements made in relation to decisions about missed appointments?</td>
<td>No comparable data available</td>
<td>88%</td>
</tr>
<tr>
<td>Are enforcement actions taken when appropriate?</td>
<td>No comparable data available</td>
<td>77%</td>
</tr>
<tr>
<td>4.2 Through the Gate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does resettlement planning focus sufficiently on the service user’s resettlement needs and on factors linked to offending and desistance?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is there a clear and timely plan for how the service user’s resettlement needs will be addressed?</td>
<td>91%</td>
<td>87%</td>
</tr>
<tr>
<td>Does the plan sufficiently draw on available sources of information?</td>
<td>80%</td>
<td>89%</td>
</tr>
<tr>
<td>Is the service user meaningfully involved in planning their resettlement and are their views considered?</td>
<td>91%</td>
<td>96%</td>
</tr>
<tr>
<td>Does the resettlement plan identify the service user’s strengths and protective factors and consider ways to build upon these?</td>
<td>80%</td>
<td>79%</td>
</tr>
<tr>
<td>Does the plan take sufficient account of the service user’s diversity and personal circumstances?</td>
<td>85%</td>
<td>89%</td>
</tr>
<tr>
<td>Does the resettlement plan take account of factors related to risk of harm?</td>
<td>No comparable data available</td>
<td>80%</td>
</tr>
<tr>
<td>Does resettlement activity focus sufficiently on supporting the service user’s resettlement?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are resettlement services delivered in line with the service user’s resettlement needs, prioritising those which are most critical?</td>
<td>No comparable data available</td>
<td></td>
</tr>
</tbody>
</table>

---

58 Comparable data between the previous and current inspection are not available. This is due to a methodological change.
Wherever possible, do resettlement services build upon the service user's strengths and enhance their protective factors?59

<table>
<thead>
<tr>
<th>Question</th>
<th>Data Available</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wherever possible, do resettlement services build upon the service user's strengths and enhance their protective factors?59</td>
<td>No comparable data available</td>
<td>82%</td>
</tr>
</tbody>
</table>

Does resettlement activity take sufficient account of the service user’s diversity and personal circumstances?59

<table>
<thead>
<tr>
<th>Question</th>
<th>Data Available</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does resettlement activity take sufficient account of the service user’s diversity and personal circumstances?59</td>
<td>No comparable data available</td>
<td>90%</td>
</tr>
</tbody>
</table>

Does resettlement activity take sufficient account of any factors related to risk of harm?59

<table>
<thead>
<tr>
<th>Question</th>
<th>Data Available</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does resettlement activity take sufficient account of any factors related to risk of harm?59</td>
<td>No comparable data available</td>
<td>82%</td>
</tr>
</tbody>
</table>

Is there effective coordination of resettlement activity?

<table>
<thead>
<tr>
<th>Question</th>
<th>Data Available</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is there effective coordination of resettlement activity with other services being delivered in the prison?59</td>
<td>No comparable data available</td>
<td>80%</td>
</tr>
</tbody>
</table>

Is there effective communication with the responsible officer in the community, prior to and at the point of release?

<table>
<thead>
<tr>
<th>Question</th>
<th>Data Available</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is there effective communication with the responsible officer in the community, prior to and at the point of release?</td>
<td>89%</td>
<td>90%</td>
</tr>
</tbody>
</table>

Do resettlement services support effective handover to local services in the community?59

<table>
<thead>
<tr>
<th>Question</th>
<th>Data Available</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do resettlement services support effective handover to local services in the community?59</td>
<td>No comparable data available</td>
<td>76%</td>
</tr>
</tbody>
</table>

---

59 Comparable data between the previous and current inspection are not available. This is due to a methodological change.