



Her Majesty's  
Inspectorate of  
Probation

An inspection of probation services in:  
**Durham Tees Valley**  
Community Rehabilitation Company

HMI Probation, April 2020

## **Acknowledgements**

This inspection was led by HM Inspector Simi Badachha, 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 Monday 11 November 2019.

© Crown copyright 2020

You may re-use this information (excluding logos) free of charge in any format or medium, under the terms of the Open Government Licence. To view this licence, visit [www.nationalarchives.gov.uk/doc/open-government-licence](http://www.nationalarchives.gov.uk/doc/open-government-licence) or email [psi@nationalarchives.gsi.gov.uk](mailto:psi@nationalarchives.gsi.gov.uk).

Where we have identified any third-party copyright information, you will need to obtain permission from the copyright holders concerned.

This publication is available for download at:

[www.justiceinspectorates.gov.uk/hmiprobation](http://www.justiceinspectorates.gov.uk/hmiprobation)

Published by:

Her Majesty's Inspectorate of Probation  
1st Floor Civil Justice Centre  
1 Bridge Street West  
Manchester  
M3 3FX

Follow us on Twitter [@hmiprobation](https://twitter.com/hmiprobation)

## Contents

---

<b>Foreword .....</b>	<b>4</b>
<b>Ratings.....</b>	<b>5</b>
<b>Executive summary .....</b>	<b>6</b>
<b>Recommendations.....</b>	<b>11</b>
<b>Background.....</b>	<b>14</b>
<b>Contextual facts .....</b>	<b>16</b>
<b>1. Organisational delivery .....</b>	<b>17</b>
<b>2. Case supervision .....</b>	<b>32</b>
<b>3. CRC-specific work .....</b>	<b>42</b>
<b>Annexe 1: Background to probation services.....</b>	<b>52</b>
<b>Annexe 2: Methodology .....</b>	<b>53</b>
<b>Annexe 3: Organisational design and map.....</b>	<b>57</b>
<b>Annexe 4: Inspection data.....</b>	<b>59</b>

## Foreword

---

In our previous inspection, we found that while Durham Tees Valley Community Rehabilitation Company (CRC) had strong leadership and a positive operating model rooted in community hubs,<sup>1</sup> this was not translating into good-quality case supervision, which we rated as inadequate in many areas. We made a number of recommendations, particularly to improve management oversight and the quality of work relating to risk of harm. I am pleased to see that, in response to our recommendations, the CRC has now improved the quality of case supervision while maintaining outstanding leadership, with particularly impressive performance on Through the Gate services. As a result, its overall rating in this inspection has increased to 'Good' from our previous score of 'Requires improvement'.

Experienced and committed leaders in the CRC are driving change and developing the skills of the workforce to improve the quality of work. Scrutiny and oversight at a senior level have ensured that the leadership team better understands areas for continuous improvement. A review of the roles and responsibilities of managers and responsible officers has contributed to a greater focus on audit, structured supervision, opportunities for reflective practice discussions and significant improvements in quality assurance approaches.

While the quality of work relating to risk of harm has improved since the last inspection, the management of domestic abuse work and child safeguarding still needs to improve. Although the CRC uses information on past behaviours and convictions, it often accepts this at face value. Further analysis of the information obtained, applying professional curiosity and assessing the potential impact on reoffending and risk of harm are, therefore, key areas of improvement for the CRC.

Community hubs are accessible, which promotes engagement and compliance. Local partners and agencies attend the community hubs to offer services alongside responsible officers. It was particularly pleasing to see the involvement of mental health practitioners. Despite the range of both internal and external interventions available, sufficient structured work is not carried out with service users and information from colleagues working with the same service user is not always shared.

Opportunities for individuals in unpaid work, particularly for those with education, employment and training needs, are impressive. The CRC has an agreement with Three:13<sup>2</sup> that involves individuals gaining nationally recognised qualifications while undertaking unpaid work as part of their sentence.

The Ministry of Justice investment in enhanced Through the Gate since April 2019 has contributed to much-improved services for those being released from prison. All aspects of resettlement planning, activity and coordination of release have improved. The work of peer mentors and volunteers is rated as 'Outstanding', and is carried out with passion and a commitment to make a difference to the lives of individuals.



**Justin Russell**  
Chief Inspector of Probation

---

<sup>1</sup> Community hubs offer a multi-agency approach to supporting service users on probation, with a number of agencies working together to provide joined up services in one location.

<sup>2</sup> Three:13 delivers training and develops enterprises that help to tackle the root causes of poverty and social exclusion faced by some of the most disadvantaged people in the North East: [www.three13.co.uk](http://www.three13.co.uk)

## Ratings

Durham Tees Valley  
Community Rehabilitation Company

Score

19/30

**Overall rating**

**Good**



### 1. Organisational delivery

1.1 Leadership

Outstanding



1.2 Staff

Good



1.3 Services

Good



1.4 Information and facilities

Outstanding



### 2. Case supervision

2.1 Assessment

Requires improvement



2.2 Planning

Requires improvement



2.3 Implementation and delivery

Requires improvement



2.4 Reviewing

Requires improvement



### 4. CRC-specific work<sup>3</sup>

4.1 Unpaid work

Good



4.2 Through the Gate

Outstanding



<sup>3</sup> CRC aspects of domain three work are listed in *HMI Probation's Standards* as 4.1 and 4.2.

## Executive summary

---

Overall, Durham Tees Valley Community Rehabilitation Company (CRC) is rated as: **‘Good’**. 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 improvements in the quality of work with people who have offended.<sup>4</sup> Published scoring rules generate the overall provider rating.<sup>5</sup> The findings and subsequent ratings in those three domains are described here.

---

### 1. Organisational delivery



Since our last inspection, the CRC has maintained its ‘Outstanding’ rating in leadership and increased its rating to ‘Outstanding’ for information and facilities. The ratings for staff and services remain ‘Good’. Senior leaders in the CRC are committed to addressing areas for improvement in order to deliver high-quality services. In response to the last inspection, the CRC has made improvements, and has invested in resources and staff support to facilitate changes. The strong leadership of the organisation, collaborative working and open communication have supported the implementation of appropriate quality improvement plans.

While more staff feel under pressure, compared to last year, with what they describe as unmanageable workloads, inspectors found that the increased oversight and scrutiny of their work is proportionate and leading to improved quality, which is reflected in the improvement in the scores for case supervision. Although responsible officers undertake high levels of one-to-one contact with individuals, structured interventions are not delivered in line with sentence and risk management planning. The quality of work needs to be addressed to enable the CRC to deliver high-quality services.

The quality and strength of relationships within the partnership mean that the CRC is well respected by its partners and has a key influence in local partnership meetings. These relationships improve access to services through the integrated offender management (IOM) model and services available in community hubs. For example, the CRC has worked with the Police and Crime Commissioner (PCC) to implement the Heroin-Assisted Treatment initiative and the Divert programme, aimed at addressing local crime.

Community hubs allow responsible officers to be based in local communities where they are accessible to service users. A range of partners can be accessed at these hubs, including mental health practitioners, substance misuse staff and education, training and employment (ETE) providers. Peer mentors and volunteers are involved in delivering services on behalf of the CRC. They provide important support and assistance, and seemed highly motivated when interviewed by inspectors.

---

<sup>4</sup> HM Inspectorate of Probation’s standards can be found here:

<https://www.justiceinspectorates.gov.uk/hmiprobation/about-our-work/our-standards-and-ratings/>

<sup>5</sup> Each of the 10 standards is 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 to 30, which is banded to produce the overall rating, as follows: 0–5 = ‘Inadequate’; 6–15 = ‘Requires improvement’; 16–25 = ‘Good’; 26–30 = ‘Outstanding’.

Key strengths of the organisation are as follows:

- The CRC continues to have a clear vision and strategy, which is understood and supported by staff and local partners.
- The experienced and strong senior leadership team establishes effective working relationships with partners, supporting collaboration and influencing strategic decisions.
- Robust quality assurance measures are encouraging staff to improve the quality of work.
- Peer mentors and volunteers with lived experience are embedded in the organisation and are a good source of support for service users.
- Responsible officers are easily accessible in local community hubs, reducing potential obstacles to compliance and engagement.

The main areas for improvement are as follows:

- Learning from training on risk of harm since the last inspection has not been fully applied to all aspects of case management.
- The wide range of interventions and services available are not fully utilised.

---

## 2. Case supervision



We inspected 77 community sentence cases and 21 post-release supervision cases, interviewed 52 responsible officers and 15 service users, and examined the quality of assessment, planning, implementation and delivery, and reviewing. Each of these elements was inspected in respect of engaging the service user and addressing issues relevant to offending and desistance. In the 88 cases where there were factors related to harm, we also inspected work to keep other people safe. The quality of work undertaken in relation to each element of case supervision needs to be above a specific threshold for it to be rated as satisfactory.

Against all four areas of case supervision quality that we inspect – assessment, planning, implementation and delivery, and review – the CRC is rated as ‘Requires improvement’. Our rating for assessment has remained unchanged since the last inspection while all other ratings have increased from ‘Inadequate’ previously.

Responsible officers engage with service users to inform all aspects of case supervision. Meaningful contact at the beginning of an order or release from custody resulted in responsible officers gathering relevant and appropriate information to inform assessments and plans. However, service users were not consistently involved in reviewing their progress. If they were to do so, it would give them a better understanding of the things they are doing well and future actions they need to take.

Assessments and plans identified and focused on the relevant factors associated with offending and supporting desistance, and in most cases, this also applied to the review of changes in individual circumstances and risk of harm. However, responsible officers did not deliver sufficient interventions, even though a range of services were available. In most cases the one-to-one contact between responsible officers and service users did not relate to the agreed plan of work, lacked meaningful content and, as a result, failed to evidence progress made. In most cases, analysis of factors related to offending and desistance did not take place, which meant that the responsible officer did not fully understand the individual’s

triggers and motivations for offending, or the impact interventions could have on reducing the likelihood of reoffending.

Our assessment of the quality of risk of harm work has improved since the last inspection from 'Inadequate' to 'Requires improvement'. Compared with other CRCs inspected so far, Durham Tees Valley is slightly above the nationally aggregated scores for its risk of harm work. While the nature and level of harm are appropriately identified in most cases, not all relevant risks and potential victims are included. Plans to manage the known risks are not personalised to each individual and, having missed potential victims, some plans are not sufficient. Services and interventions are available locally to address and manage harm but, disappointingly, these are not used sufficiently.

It is encouraging that, since the last inspection, the CRC has developed better systems to share information with the police in both Durham and Cleveland, specifically in relation to domestic abuse. The agreement with Cleveland Police is relatively recent, so the benefit of this arrangement was not seen in the cases inspected.

Key strengths of case supervision are as follows:

- Responsible officers positively involve and engage with individuals under supervision, considering their views, diversity and personal circumstances.
- Offending-related factors and those likely to support desistance are identified and incorporated into plans.
- Plans to manage risk of harm make appropriate links to the work of other agencies and multi-agency working where relevant.
- Where other agencies are involved in managing risk, responsible officers communicate with them more often than we found at the last inspection, to inform reviews.

Areas of case supervision requiring improvement include:

- The quality of public protection work, while improving, is insufficient.
- Offending behaviour and risk of harm factors are not sufficiently analysed.
- Interventions are not appropriately delivered to address offending and risk of harm.

---

### 3. CRC-specific work

A blue folder icon with the letters 'CRC' in white text inside it.

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

---

#### Unpaid work

We inspected the management of 30 unpaid work requirements, looking at assessment and planning, safety, and implementation of the court order. We also observed one induction session and eight work parties to examine the extent to which unpaid work was delivered in a way that supports desistance.

The CRC has a good range of unpaid work projects available, having developed strong relationships with local authorities and partners. Purposeful work is sourced in the local community. While providing a punitive element to sentencing, the delivery of unpaid work in Durham Tees Valley also has a strong connection to rehabilitation.

Working in partnership with Three:13, the CRC provides individuals with a direct way of gaining nationally recognised qualifications, improving employability and accessing potential employers. Consequently, service users who have completed unpaid work have continued to volunteer and become involved in training as peer mentors.

In just over half the cases inspected, an appropriate assessment took place before individuals were allocated to a placement. While the CRC has a process for assessing and managing risk of harm, it was inconsistently applied in half the cases inspected. In two-thirds of cases the sentence was delivered properly. The CRC has projects available with rehabilitative opportunities, specifically ETE, which are well used. This was a particular strength of the unpaid work delivery model and led to a judgement of 'Good' for unpaid work.

Experienced staff appropriately allocate service users to unpaid work projects. However, documents used to record assessments, risk of harm factors and issues related to vulnerability and health and safety are not routinely completed. The inconsistent approach to record-keeping meant that inspectors did not see how unpaid work staff were making specific allocation decisions. Where necessary, individual placements were used, taking into account diversity, personal circumstances or vulnerability issues.

Risk of harm factors were not consistently assessed, considered and clearly communicated to supervisors. Limited record-keeping meant that not all risk management actions appear to have been considered.

Key strengths of unpaid work are:

- The range of projects available consider service users' diversity, personal circumstances and any vulnerability needs.
- Unpaid work is visible to local communities; the work undertaken is meaningful and purposeful.
- Arrangements for education, training and employment provide good opportunities to improve skills and employability.
- service users who complete unpaid work have the opportunity to volunteer or, where suitable, are offered peer mentor training, to support others.

Areas for improvement for unpaid work are:

- Record-keeping of assessments and allocation decisions are inconsistent and not clear.
- Arrangements for assessing and communicating risk of harm issues are not routinely applied.

## **Through the Gate**

We inspected the management of 20 cases where the CRC had delivered pre-release Through the Gate work, looking at resettlement planning, delivery of resettlement services and release coordination.

Over 90 per cent of cases met our standards for resettlement planning and the delivery of required services. The coordination of resettlement activity was effectively done in 89 per cent of cases. This led to the overall judgement of 'Outstanding' for Through the Gate provision.

The CRC has established good working relationships with prisons to support the effective delivery of Through the Gate services. A range of specialist agencies are

subcontracted to deliver Through the Gate. Each provider has a unique specialism, such as mentoring, family support or accommodation.

Relevant and appropriate training has been provided to Through the Gate staff. It was reassuring to find that risk of harm factors were sufficiently addressed in resettlement planning and activity. The morale among Through the Gate staff is very high; they are passionate about their roles. This extends to peer mentors and volunteers, up to half of whom have experienced going through the criminal justice system themselves. The value added by mentors and volunteers means that individuals are well supported before release into the community, upon release and beyond.

Key strengths of Through the Gate work are:

- Service users are meaningfully involved in resettlement planning, taking account of strengths and protective factors.
- Resettlement plans and activities appropriately consider risk of harm factors.
- The delivery of necessary activities prioritises those that are most critical, and takes account of diversity and personal circumstances.
- Peer mentors and volunteers add to the quality of Through the Gate services in Durham Tees Valley.

Areas for improvement for Through the Gate work are:

- Resettlement actions are not routinely followed up by responsible officers when service users are released.

## Recommendations

---

### **Achievement of recommendations from the previous inspection<sup>6</sup>**

In our previous inspection report, we made five recommendations to the CRC. During this inspection, we investigated the extent to which these recommendations had been achieved. We found that sufficient progress has been made on two recommendations and some progress on the remaining three.

#### **We recommended that Durham Tees Valley CRC:**

1. *Improve effective management oversight of practice.*

##### **The CRC has made some progress on this recommendation.**

All operational managers received training that covered management oversight, quality of entries and benchmarking of acceptable standards. Separately, the CRC created a set of operational management minimum standards (OMMS), setting out management responsibilities, together with 'operational minimum standards' for practitioners. Performance and compliance with the OMMS are monitored by deputy directors, who receive management information and conduct dip-sampling of middle managers' work to monitor the quality of their management oversight.

Line managers are required to monitor operational minimum standards when they supervise each staff member every month. The agendas for individual supervision and team meetings include a focus on risk of harm work and discussions on relevant cases. All OASys (offender assessment system) assessments and reviews completed by probation services officers (PSOs) are countersigned by managers, with relevant feedback to improve the quality of assessments. To support this extra work, the CRC has invested in two new managerial posts to provide additional capacity.

The CRC benefits from having a quality assurance (QA) team that assures cases using HMI Probation standards. The work of the QA team highlights positive work and areas for improvement. Its reviews are detailed and well received by responsible officers; however, middle managers are not consistently following up the actions set and ensuring that learning is applied across all cases. Management oversight needs to be more consistent in following up actions and applying learning across the organisation.

2. *Improve the quality of work to assess, plan for, manage and review work to protect potential and actual victims.*

##### **The CRC has made some progress on this recommendation.**

All frontline practitioners, including interventions staff, administration staff and managers, received training in managing risk following the first inspection. All OASys assessments completed by PSOs are countersigned by line managers, and those completed by probation officers (POs) are dip-sampled by the line manager and the QA team. The QA team conducts thematic inspections, such as

---

<sup>6</sup> HMI Probation. (2019). *An inspection of Durham Tees Valley Community Rehabilitation Company*: <https://www.justiceinspectorates.gov.uk/hmiprobation/wp-content/uploads/sites/5/2019/03/Durham-Tees-Valley-CRC-report.pdf>

on domestic abuse, and identifies themes for areas of improvement. It also holds quality events with PSOs and POs, who are required to attend a minimum of two per year, looking at specific cases to identify good practice. Through these events, the QA team encourages staff to consider what could have been done differently to improve the quality of work on the cases.

The PSO induction programme has been changed to focus more on risk management. PO risk 'champions' have been appointed as a source of day-to-day support for PSOs. The domain two ratings show that the CRC has made progress against this recommendation.

3. *Equip staff with the skills and knowledge to address domestic abuse work and deal with child safeguarding concerns.*

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

The training in managing risk focused on analysing information and checks with partner agencies, such as police domestic abuse units and children's social care services. Approximately 95 per cent of frontline practitioners have attended annual in-house safeguarding and domestic abuse training, which is supplemented by training at local authority/safeguarding boards. A women's throughcare team has been created, which provides specialist attention to the needs of women as victims of domestic abuse and to address child safeguarding concerns.

The QA team conducted a domestic abuse thematic event that was used to assess the effectiveness of the risk training that was delivered in January 2019 and to identify further areas of learning and development. The internal audit highlighted improvements in the quality of work relating to domestic abuse and safeguarding. The CRC invested sufficiently to access and deliver good-quality training and ensure QA arrangements followed up on the impact. Our case supervision scores show that some improvements are being made. The CRC acknowledges that the learning from the training and oversight requires ongoing implementation.

4. *Require staff to make use of all relevant information, including (when required) police domestic abuse call-out information, to inform their assessments.*

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

The CRC established arrangements for a case administrator to be based in the police domestic abuse team in Durham and has very recently agreed similar arrangements with Cleveland Police. Despite this, our case assessments did not provide evidence that checks had been carried out in all relevant cases.

Before managers allocate cases, they review them and set actions, such as the need to gather information from the police and children's social care services to inform the assessment. However, these actions are not being followed up to verify that they have been completed. There is more evidence of such checks taking place when the case is reviewed at a later date. The improvement we saw in the quality of case reviews shows the impact of increased scrutiny.

5. *Ensure that staff are allocated work for which they have the necessary skills and experience.*

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

Case allocation is now undertaken by middle managers, who have an understanding of their team profile and workload. In the absence of team managers, allocation is undertaken by a 'buddy' manager who has sufficient

knowledge of the team. This means cases are allocated appropriately from the start.

### **New recommendations**

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

#### **Durham Tees Valley CRC should:**

1. ensure recommendations and actions from audits and internal quality assurance procedures are sufficiently acted upon, monitored and followed up by local managers and responsible officers
2. enable staff to develop appropriate levels of skills and knowledge to sufficiently analyse offending behaviour and risk of harm
3. improve the quality of work to assess, plan for, manage and review work to protect potential and actual victim

**This recommendation has been repeated from the previous inspection.**

4. ensure that necessary interventions are being delivered, and assess and analyse their impact on addressing offending behaviour, risk of harm and supporting desistance
5. strengthen information-sharing agreements with all partners, local agencies and providers of interventions, to inform assessments, plans and reviews undertaken by responsible officers
6. fully assess the risk of harm and the impact considered when allocating individuals to unpaid work placements, and ensure that necessary actions are clearly recorded and communicated to those supervising individuals.

## Background

---

### Durham Tees Valley CRC

Durham and Tees Valley CRC provides probation services in the Durham and Teesside area. Durham County Council has been a unitary authority since 2009, having the powers of a non-metropolitan county and district council combined. The Tees Valley area comprises the five local authority areas of Darlington, Hartlepool, Middlesbrough, Redcar and Cleveland, and Stockton-on-Tees. The areas covered by Durham Tees Valley CRC are served by Durham Constabulary and Cleveland Police.

The population of Durham Tees Valley in mid-2018 was estimated at 1.2 million, with Durham itself accounting for just under half of the total.<sup>7</sup> Police recorded crime rates (excluding fraud) for Durham and Cleveland are high compared with the rest of England and Wales. Violence against the person is also higher: in Durham 39.2 crimes per thousand population and in Cleveland 40.6 crimes per thousand, compared with 28.7 crimes per thousand on average for England and Wales.<sup>8</sup>

The CRC is a key partner of the Local Criminal Justice Partnership for Cleveland and Durham, which brings together agencies with responsibility for delivering criminal justice services across the areas. The CRC is represented at the following:

- local safeguarding children boards
- community safety partnerships
- Multi Agency Public Protection Arrangements (MAPPA)
- adult safeguarding boards
- youth offending boards.

The partnership approach has contributed to close working relationships with the local Police and Crime Commissioner's teams leading to the development of initiatives, such as the delivery of: a one-to-one domestic abuse programme; a restorative justice programme; a whole-system approach to women; the Divert scheme in Cleveland;<sup>9</sup> and the Heroin-Assisted Treatment scheme.

The total spend for the CRC in the previous financial year (2018-19), was £10.9 million, with a projected budget for the current financial year (2019-20) of £12.2 million, a significant proportion of which are staff costs. The CRC has 186.9 full-time-equivalent staff, with 117.3 responsible for frontline service delivery. In June 2019, the total caseload under supervision was 3,753, an increase from 3,729 in June 2018.<sup>10</sup> Successful completion rates for unpaid work (94 per cent) and post-release licence supervision (74 per cent) were above the national target figures.

---

<sup>7</sup> Office for National Statistics. (2019). *United Kingdom population mid-year estimate*, mid 2018.

<sup>8</sup> Home Office. (2019). *Crime Rates in England and Wales: Police recorded crime*. June 2019.

<sup>9</sup> Cleveland Divert offers an alternative way to engage with first-time and low-level offenders, instead of sending them to court and prosecuting them. Further information can be found on: <https://www.cleveland.pcc.police.uk/Information/Divert-Custody-Diversion-Scheme.aspx>

<sup>10</sup> Ministry of Justice. (2019). *Offender management caseload statistics as at 30 June 2019*; Ministry of Justice. (2018). *Offender management caseload statistics as at 30 June 2018*.

The positive completion rate for community sentences and suspended sentence orders (73 per cent) was slightly below the national target of 75 per cent.<sup>11</sup> Reoffending rates for the caseload (53.4 per cent) are higher than the national average.<sup>12</sup>

Caseloads for probation officers are 37 cases on average, while probation services officers hold an average of 50 cases. The average caseload numbers have increased slightly since the previous inspection.<sup>13</sup>

Durham Tees Valley CRC operates as a subsidiary of ARCC (Achieving Real Change in Communities), a not-for-profit consortium comprising nine partners from different sectors. These include local authorities, charities, other philanthropic bodies and social enterprise organisations providing wrap-around services. ARCC was set up specifically to bid for the CRC contract and is the only staff mutual proposition (from the former probation trust) that was successful in securing a contract. ARCC has no other business interests.

For more information about the organisational structure of this CRC, please see Annexe 3 of this report.

---

<sup>11</sup> Figure supplied by CRC.

<sup>12</sup> Ministry of Justice. (2019). *Proven reoffending, Payment by results, July to September 2017 cohort*.

<sup>13</sup> Figure supplied by CRC.

## Contextual facts

<b>1,867</b>	The number of individuals supervised on community sentences by the Durham Tees Valley CRC <sup>14</sup>
<b>922</b>	The number of individuals supervised post-release by the CRC <sup>14</sup>
<b>2,402</b>	The number of individuals beginning community sentences in the 12 months before this inspection <sup>15</sup>
<b>584</b>	The number of individuals beginning post-release supervision in the 12 months before this inspection <sup>15</sup>
<b>53.4%</b>	The proportion of service users with a proven reoffence <sup>16</sup>
<b>44.7%</b>	The proportion of CRC service users (England and Wales) with a proven reoffence <sup>16</sup>
<b>£10.9m</b>	Total spend in the previous financial year, 2018-19 <sup>15</sup>
<b>£12.2m</b>	Total projected spend in the current financial year, 2019-20 <sup>15</sup>

## Performance against targets

<b>73%</b>	The proportion of individuals recorded as having successfully completed their community orders or suspended sentence orders for Durham Tees Valley CRC. The performance figure for all England and Wales was 76%, against a target of 75% <sup>17</sup>
<b>74%</b>	The proportion of positive compliance outcomes with licences and, where applicable, post-sentence supervision periods for Durham Tees Valley CRC. The performance figure for all England and Wales was 66%, against a target of 65% <sup>18</sup>
<b>94%</b>	The proportion of positive completions of unpaid work requirements for Durham Tees Valley CRC. The performance figure for all England and Wales was 92%, against a target of 90% <sup>19</sup>

<sup>14</sup> Ministry of Justice. (2019). *Offender management caseload statistics as at 30 June 2019*.

<sup>15</sup> Figure supplied by CRC.

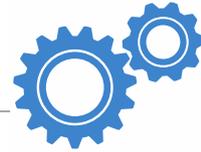
<sup>16</sup> Ministry of Justice. (2019). *Proven reoffending, Payment by results, July to September 2017 cohort*.

<sup>17</sup> Ministry of Justice. (2019). *CRC Service Level 8, Community performance quarterly statistics, January 2018 – March 2019, Q4*.

<sup>18</sup> Ministry of Justice. (2019). *CRC Assurance Metric J, Community performance quarterly statistics, January 2018 – March 2019, Q4*.

<sup>19</sup> Ministry of Justice. (2019). *CRC Service Level 10, Community performance quarterly statistics, January 2018 – March 2019, Q4*.

# 1. Organisational delivery



Durham Tees Valley CRC has maintained strong leadership across the organisation, and strengthened its vision and strategy. Its desistance-based model places individuals at its heart and makes services available in local communities. Its commitment to drive improvement, specifically in relation to risk of harm, domestic abuse and safeguarding, is reflected in the improvement in our case supervision ratings. The CRC's partnership-led ownership has allowed effective service arrangements to be established in local community hubs. The CRC is a valued member of a range of partnership boards and is recognised for the contributions it makes locally.

The staff turnover rate has increased over the last year and the CRC has a number of probation officer vacancies. Overall, workloads are balanced, and resources are moved around to address local challenges. The CRC has invested significantly in training for all staff, focusing on risk of serious harm, domestic abuse and safeguarding. While staff satisfaction has reduced since the last inspection, most of the workforce welcome the opportunities they have been given to learn and develop. The use of volunteers and peer mentors is valued and impressive.

The CRC has access to a range of information and data to develop necessary services and interventions. The CRC has developed effective local relationships, which have led to innovative targeted interventions being created and implemented. There are impressive education, training and employment (ETE) opportunities in unpaid work for service users with identified needs. Services, interventions and support for prisoners pre- and post-release are comprehensive and well used by both the CRC and the National Probation Service (NPS). The range of services is good, but although some responsible officers are accessing or referring to these services, they are not consistently recording the work and its impact.

Information and communications technology (ICT) arrangements support flexible working, allowing responsible officers to plan and schedule effectively. Arrangements for learning from inspection, audits and reviews of serious further offences (SFOs) are in place. The quality assurance (QA) team is now fully functional, having been set up in 2018, and implements a clear strategy to drive improvements in quality across the organisation. The analysis and oversight from the QA team have led to senior leaders being very clear about the strengths and areas for improvement for the CRC. A commitment, motivation and willingness to continue to improve were seen throughout the CRC.

## Strengths:

- Senior leaders are committed to making improvements and invest CRC resources to support this.
- The CRC is integrated into local communities and easily accessible for individuals, removing potential barriers to engagement and compliance.
- Strong partnership relationships are established; the CRC is valued by local partners and influences local strategic developments.
- Training and development opportunities have been strengthened, promoting a continuous learning culture.

- Frontline staff value quality assurance approaches and opportunities for reflective feedback on the quality of work.
- The involvement of peer mentors and volunteers, some with lived experience of the criminal justice system, is impressive.
- A wide variety of internal and external services and interventions are available to address offending behaviour, support desistance and keep people safe.
- Unpaid work and Through the Gate services offer sound rehabilitative opportunities.

#### Areas for improvement:

- The range of services available are not delivered to all who could benefit.
- The impact of services or interventions, when delivered, is not assessed and analysed in service users' case records.
- Although management oversight has improved, managers do not consistently follow up actions to ensure they are completed.
- Continued focus is required on developing the quality of work in relation to domestic abuse, safeguarding and risk of harm.

	Previous inspection	Current inspection
<b>1.1. Leadership</b>		
The leadership of the organisation supports and promotes the delivery of a high-quality, personalised and responsive service for all service users.	Outstanding	Outstanding

#### Key data

	Previous inspection	Current inspection
Proportion of staff interviewed who agreed that the organisation prioritised quality <sup>20</sup>	88%	73%

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

<sup>20</sup> HMI Probation inspection data.

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

The CRC has a clear vision and strategy, which was created in cooperation with staff at all levels. Its approach is informed by academic research into desistance and evidence-based practice in reducing reoffending. Staff believe that the CRC prioritises quality, and all appear focused on 'doing the right thing'. During the interviews with responsible officers, 73 per cent agreed that the CRC prioritised quality. One responsible officer told an inspector:

*"The CRC definitely prioritises quality. We were surprised by the last inspection results, but I think we took our eyes off the ball after TR [Transforming Rehabilitation], thinking that all the high-risk cases have gone to the NPS so we don't have risky cases anymore. We have had a lot of training, particularly on risk. We discuss cases with our manager, consider defensible decisions that have been made and highlight areas that I could have developed. The quality team inspect cases and I get feedback with actions, which is good".*

Senior leaders have established positive relationships with stakeholders and partners with whom they have actively shared the vision and strategy. The Chief Executive Officer and senior leadership team use a variety of mechanisms to communicate with staff. These include breakfast talks, staff events, emails and the intranet. The leadership team receives and welcomes feedback from staff, partners and service users, and uses this to support developments in service delivery and improving the experience of individual service users.

The CRC sits alongside other partners on the decision-making ARCC board; the chair of the ARCC board also chairs the CRC's operational board. CRC managers make decisions about service delivery and the resources needed to meet local demand. Senior leaders regularly review the impact of strategy on delivery and continuously review the strategy to deliver high-quality services.

The leadership team monitors the effectiveness of relationships with partners, those in the supply chain and other key stakeholders. As a result, a range of partners are available in local community hubs to support the delivery of the vision and strategy. The CRC has influenced the partnership agenda locally, which can be seen in the integrated offender management (IOM) arrangements and in the CRC arranging for case administrators to be based in police domestic abuse teams.

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

The CRC has a good understanding of both operational and business risks. It has effective contingency and business continuity arrangements. In the event of major incidents, the NPS has agreed to provide support and office space if required. The CRC has set out the exit liabilities from the current contract, and how it will continue delivering business as usual during the forthcoming transitional phase. Senior leaders operate a consistent approach to managing change and has in place an operational change policy. This defines how the CRC manages and disseminates external and internal instructions that deliver operational business change.

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

Meaningful contact and the responsibilities of responsible officers are clearly set out in the CRC's operational minimum standards. The standards are kept under review and compliance is monitored by line managers, the QA team and senior leaders. The standards promote face-to-face contact, most of which takes place in community

hubs that are local to service users. Home visits are encouraged and routinely take place. Appropriate consideration is given to diversity factors within the operating model, based on data extracted from nDelius (the NPS case management system).

The CRC partners with a range of other providers, and this has enabled it to tailor specific services. Community mental health practitioners attend some of the community hubs. There are women-only services, and flexible arrangements for the delivery of unpaid work. The initial roll-out of the operational minimum standards involved contributions from practitioners, and this has helped them understand their roles and supports them in what they are doing. Practitioners do not always feel able to deliver to the local standards, however, due to their workloads. Inspectors took a different view; responsible officers do not sufficiently access the resources available to address offending behaviour and risk of harm; full application of the operating model will allow better use of their time.

The CRC has continued to review the facilities and services it provides through community hubs, which has led to some hubs closing and focusing resources where attendance is the highest. Sufficient analysis has taken place to ensure that individuals affected by these hub closures can still easily access alternative premises or can make use of the CRC transport pick-up service. The CRC is present at and engaged with local partners, safeguarding boards, the NPS, youth offending services and local criminal justice boards, where it promotes the model and local plans to strengthen relationships. CRC staff delivering IOM are co-located with the police across the area, providing multi-agency approaches to working with some of the more complex individuals.

	Previous inspection	Current inspection
<b>1.2. Staff</b>		
Staff within the organisation are empowered to deliver a high-quality, personalised and responsive service for all service users.	Good	Good

Key staffing data <sup>21</sup>	Previous year	Current year
Total staff headcount (full-time equivalent, FTE)	178.91	186.94
Total number of probation officers or equivalent (FTE)	33.16	30.68
Total number of probation services officer or equivalent (FTE)	83.74	82.65
Vacancy rate (total number of unfilled posts as a percentage of total staff headcount)	5.03%	7.3%

<sup>21</sup> All data supplied by CRC.

Vacancy rate of probation officer or equivalent grade only (total number of unfilled posts as a percentage of total number of required PO posts)	5.68%	19%
Sickness absence rate (all staff)	16	18
	days per year	days per year
Staff attrition (percentage of all staff leaving in 12-month period)	6.15%	14.44%

<b>Caseload data</b>	<b>Previous year</b>	<b>Current year</b>
<b>Average caseload probation officer (FTE)<sup>22</sup></b>	33	37
Average caseload probation services officer (FTE) <sup>22</sup>	45	50
Percentage of probation officer grade or equivalent with caseload greater than local workload management tool target (FTE) <sup>22</sup>	42%	53%
Percentage of probation services officer grade or equivalent with caseload greater than local workload management tool target (FTE) <sup>22</sup>	20%	32%
Proportion of probation officers (or equivalent) in this CRC describing caseload as unmanageable <sup>23</sup>	14%	69%
Proportion of probation services officer (or equivalent) in this CRC describing caseload as unmanageable <sup>23</sup>	18%	37%

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.

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

<sup>22</sup> Data supplied by the CRC.

<sup>23</sup> HMI Probation inspection data.

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

The CRC staff attrition rate had doubled to 14.44 per cent compared with a year previously, with a sharp increase in the PO vacancy rate.<sup>24</sup> The announcement of the probation reform programme has presented some challenges in relation to workforce planning, which has led to some vacancies. Recently, practitioner vacancies have been filled by using agency staff, which led to the offer of some permanent contracts to address caseload numbers. Positively, management capacity has been increased to account for changes in the operational management minimum standards.

The average caseload on the workload measurement tool at the time of the inspection was between 31 and 40 for POs and 41 and 58 for PSOs. Some individual POs are over the 100 per cent workload capacity measure. Of the responsible officers interviewed, 57 per cent reported manageable workloads, compared with 83 per cent in the last inspection and 41 per cent across all CRCs inspected in 2018-20.

Contact with service users is undertaken in community hubs, where it is not always known how many are due to attend. This can impact on the planned work of the responsible officer. The uncertainty of expected attendance levels, and an increase in training and QA events for staff to attend, contribute towards workloads feeling less manageable.

Middle managers have had their minimum standards reviewed, and structured supervision arrangements have been put in place for managing practitioners. Managers are required to be visible in community hubs, undertake monthly supervision, countersign every OASys assessment and review completed by PSOs, and manage team performance. Some managers felt workloads were high; they want to achieve high-quality outcomes but are often hindered from leading their teams because they become too involved in the day-to-day activities. Senior managers are working with middle managers to monitor the effective use of their time and resources. Despite this, managers understand the current priority for quality improvement and are committed to achieving this objective.

Administrative staff have a consistent flow of work requests to which they respond. Each request has a ticket number, which means work is allocated and completed fairly and there is no cherry-picking of simpler tasks. Administrators work collaboratively, supporting each other, and have been trained in all aspects of administrative tasks.

Workloads are monitored and steps are taken to move resources or allocate work to others, although this can sometimes be delayed. A quicker response would allow greater efficiency.

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

The CRC has a majority of female employees, accounting for 71 per cent of the workforce. In senior management roles, by comparison, the ratio of male to female employees is balanced. As at 31 December 2018, there were 14 employees who disclosed a disability as defined by the Equality Act 2010, accounting for 7 per cent of the workforce. At the same date, of those employees who had declared their ethnicity, 6 individuals or 3 per cent were from a black, Asian or minority ethnic (BAME) background; the majority of employees declared their nationality as white British.

---

<sup>24</sup> Data supplied by the CRC.

The CRC recognises the difference between the profile of the workforce and that of service users and has an equality action plan, which includes references to the recommendations of the 2017 Lammy Review into the treatment of, and outcomes for, black, Asian and minority ethnic individuals in the criminal justice system<sup>25</sup> and a focus on its recruitment strategy.

Following the last inspection, the CRC reviewed its training, learning and development approach. Training focusing specifically on risk of harm was delivered to all staff in response to the HMI Probation recommendations. Of the responsible officers interviewed, 92 per cent felt suitably skilled and qualified to manage the cases they were allocated, and 78 per cent were allocated the right cases for which they have the appropriate training to manage.

While managers are now responsible for case allocation, it is a concern that 22 per cent of responsible officers interviewed felt they do not have the necessary skills for the cases they are responsible for. Inspectors found that new quality assurance measures, renewed management responsibilities and case discussion opportunities had led to an improvement in the quality of case supervision. However, having moved from a rating of 'Inadequate' in most areas to 'Requires improvement', the CRC still has further work to do to embed learning into practice.

The operational minimum standards set out clear roles and responsibilities for practitioners and managers. Administration staff clearly understand how work is allocated, and their roles and responsibilities. Mentors and volunteers have a clear understanding of their role, and they know how valued they are and their contributions to providing high-quality service delivery.

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

Line managers are required to undertake monthly formal supervision with responsible officers. Eighty per cent of responsible officers reported receiving regular supervision that enhanced or allowed them to sustain high-quality work with service users. Of those interviewed, 63 per cent had received 7 or more one-to-one supervision sessions over the last 12-month period.

The quality assurance team also undertakes high-quality case reviews and provides responsible officers and managers with detailed feedback, including positive factors and areas for improvement. In spite of this, in the cases inspected, 64 per cent had management oversight that we considered ineffective, in some cases resulting in actions to manage risk of harm not completed. While we found other written evidence of effective line management from staff supervision records and further oversight from managers through the case allocation process, managers are not consistently ensuring that actions are followed up.

The staff induction programme has been reviewed since the last inspection. Newly recruited staff, including managers, practitioners and administrators, receive enhanced input on their responsibilities towards safeguarding, domestic abuse and managing risk. A new PSO induction and development programme can also be accessed by existing PSOs and POs for refresher purposes.

Appraisal processes are in place and managers review performance formally on an annual basis. Development needs are collated from appraisals. These inform the CRC's training and development plan to ensure it targets areas for improvement, invests in the right training, and can differentiate between the needs of individuals

---

<sup>25</sup> Lammy, D. (2017). *The Lammy Review: An Independent Review into the Treatment of, and Outcomes for, Black, Asian and Minority Ethnic individuals in the Criminal Justice System*. London: HMSO.

and wider training needed for all. The CRC is developing managers appropriately; for example, some have completed the Chartered Management Institute (CMI) leadership programme. Additional training has been provided to support managers to identify and manage performance on both an individual and team level.

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

The CRC has a comprehensive plan that identifies and analyses the training needs of staff. There are effective monitoring systems to identify non-attendance and take appropriate action. The QA team and the training team work together effectively to consider and deliver suitable training. Of the responsible officers we interviewed, 92 per cent reported good access to training. Experienced practitioners are embedded into the training team to deliver to frontline staff. Staff are encouraged and supported to apply for the Professional Qualification in Probation (PQiP), which is administered by the NPS but with places for CRC staff funded by the CRC. Similarly, CRC staff can access the CMI management training qualifications at levels 3 and 5, and have access to a range of in-service training sessions and workshops, including specialist training, such as trauma-informed practice events.

The CRC has introduced 'risk champion' roles for POs to support PSOs in making effective decisions and taking appropriate actions to manage risk of harm. The CRC recognises the importance of having relevant training and development opportunities. It has invested heavily in developing staff knowledge and experience in the assessment and management of risk of harm.

In 2019, the CRC was rated as one of *The Sunday Times* Best Not-For-Profit Organisations to Work For. It also received a special award for its approach to learning and development. It has continued with the Investors in People (IiP) assessment and has been awarded a Gold rating, which is an improvement from Silver the year before.

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

The CRC staff believe in the values of the CRC and want to 'do the right thing'. Since the last inspection, a considerable amount of work has taken place to equip staff with the right training and knowledge, manage performance gaps and restructure management responsibilities.

Senior leaders make themselves available to staff, who report that they are accessible and visible. Staff reward and recognition for exceptional work has not been as visible, with limited examples of it through the staff reward and recognition platform.

The quality of community hubs varies, and the availability of appropriate space is a problem in a few locations. Of responsible officers interviewed, 68 per cent felt the CRC gave appropriate attention to staff safety and 52 per cent to staff wellbeing. The CRC has closed a number of hubs and has a strategy to use locations where a better range of facilities is available. There are sufficient arrangements for responsible officers to use district offices for service users deemed unsuitable to be seen in a hub environment.

GPS navigation safety devices are provided to unpaid work supervisors, staff working in community hubs and those conducting home visits. These devices work well. The CRC has a reasonable adjustment policy for workers with disabilities or health conditions, and 94 per cent of responsible officers interviewed who required adjustments have received what was needed to support them in their role. All staff

are provided with the same opportunities for staff supervision, training and development, talent progression routes and succession planning.

	Previous inspection	Current inspection
<b>1.3. Services</b>		
A comprehensive range of high-quality services is in place, supporting a tailored and responsive service for all service users.	Good	Good

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?**

Characteristics of inspected domain two cases <sup>26</sup>	All CRCs in year one	This CRC in current inspection
Proportion of caseload who are female	17%	19%
Proportion of inspected cases who are black or minority ethnic	14%	4%
Proportion of inspected cases with a disability	49%	50%
Proportion of inspected cases where inspectors identified substance misuse problems	72%	83%
Proportion of inspected cases where inspectors identified domestic abuse issues	41%	33%
Proportion of inspected cases where inspectors identified child safeguarding issues	32%	38%

The CRC undertakes a needs analysis that breaks down the factors related to offending and desistance. The data is separated into different categories and ranked to identify the most common areas. There were many gaps in recording personal

<sup>26</sup> Data supplied by the CRC.

circumstances on nDelius and this may impact on the quality of the analysis. From the analysis it does have, the CRC has developed services to address the needs of specific population cohorts, such as women and the 18–24-year-old group. Further analysis has taken place to explore areas linked to risk of harm, specifically domestic abuse, mental health, and those with drug or alcohol dependencies; housing has also been identified as a priority area of need.

The CRC accesses information to enable analysis of diversity and disproportionality. This information has provided the CRC with data to understand the service user profile in specific categories and has, for example, enabled the development of services for female service users. The analysis takes into account the pattern of offence types, and a report from Crest Advisory (a crime and justice consultancy), which has provided the CRC with information about local patterns of sentencing and how they differ between the courts in the area.

The rate of recorded crime is higher in both Durham and Cleveland than the national average. Durham has the highest level of violent and public order offences nationally, and the proportion of short custodial sentences for these offences is slightly higher than the national average. The CRC has used the services from its joint owners to ensure the right services are available. Some community hubs benefit from the presence of community psychiatric nurses, substance misuse staff and housing providers. The CRC is working with the police to establish innovative services, such as the Heroin-Assisted Treatment programme and the Divert scheme.

**Does the CRC provide the volume, range and quality of services to meet the needs of the service users?<sup>27</sup>**

	Previous inspection	Current inspection
Average waiting time for Building Better Relationships (BBR)	16.7 weeks	18 weeks
Average waiting time for Thinking Skills Programme (TSP)	14.8 weeks	16 weeks
Average waiting time for rehabilitation activity requirement (RAR)	0 weeks	0 weeks
Successful completion BBR	91.9%	93%
Successful completion TSP	78%	75%
Successful completion of RAR	93.1%	94.5%

A range of accredited programmes are delivered by the CRC, including Building Better Relationships (BBR), the Thinking Skills Programme (TSP), Drink Impaired Drivers and Resolve (aimed at violent offenders). Accredited programmes are mainly delivered in the two district offices; if individuals have access problems because of their rural location, programme support staff utilise the CRC transport service to collect them to attend the groups. The programmes team also delivers a one-to-one domestic abuse programme on behalf of the Police and Crime Commissioner, which is available to the NPS through the rate card.

<sup>27</sup> Data supplied by the CRC.

The core rehabilitation activity requirement (RAR) services are based on the concept of 'citizenship'. There is a modular programme designed and academically reviewed to achieve a reduction in reoffending through tailoring personalised plans for service users, and using a desistance-based theoretical approach. The citizenship workbook is designed to enable service users to explore current thoughts, feelings and behaviours, and replace these with new tools and strategies. The waiting time for the RAR programmes is zero, as these are individually delivered programmes activated through relevant contact with the responsible officer and services are available to access immediately.

The CRC is also working with Intervention Consultancy Ltd, which uses a new type of intervention 'computerised cognitive behavioural therapy' (CCBT), combining cognitive behavioural therapy (CBT) and online learning. A number of online programmes have been developed, known as 'the intervention hubs'. These focus on addressing offending behaviour, covering a range of offending pathways. They are being piloted by the CRC and will be evaluated in January 2020. The programmes available include: thinking skills, victim awareness, domestic abuse, cannabis awareness, emotional wellbeing, anger management, alcohol awareness, women's programme, youth programme, education, and employment.

The CRC has established specific arrangements for female service users. These include female-only reporting times in community hubs and the Aspire programme, a solution-focused, trauma-informed therapy model designed to target problematic behaviours by replacing them with 'personal solution' behaviours.

The average waiting times for the BBR programme of – 16.7 weeks, and for TSP – 14.8 weeks, have increased since our last inspection. Lengthy waiting times can impact on individual motivation levels and willingness to engage, particularly if meaningful work is not delivered, as we found in our case supervision assessments.

Responsible officers deliver a significant amount of one-to-one work, but we did not see consistent evidence of structured interventions delivered in these sessions. This contact generally takes place in the community hubs, where there is mostly, but not always, access to private space. Despite the range of services in place, the delivery of interventions was not carried out sufficiently, as shown in the case supervision scores. In some cases, although services were accessed, impact and progress were not evident in assessments and reviews.

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

The CRC is owned by a partnership of organisations, who provide access to a range of services to work with service users. Their supply chain partners and other partners receive regular support from the CRC senior leaders. There is a clear line of accountability, regular reviews of relationships and action taken to strengthen these ties. There are good working links with the NPS, police and safeguarding boards. The CRC has worked hard to establish better information-sharing mechanisms and, despite some difficult challenges with Cleveland Police, the CRC has now agreed arrangements to improve access to domestic abuse call-out information across the area.

Senior leaders have been working with substance misuse services to improve the quality of information sharing. This is less problematic where alcohol treatment or drug rehabilitation requirements are in place, but gaps continue where the responsible officer has made a referral for other order types. This means that, at times, the assessment and reviews do not contain information from substance misuse services and do not analyse the impact of that work on service users.

A CRC member of staff is located in the Teesside Magistrates' Court to work with NPS staff to prepare information for sentencers on CRC cases. Since this arrangement began, there has been a significant reduction in the number of reports and requests returned by the NPS for correction or clarification.

The CRC also works closely with the NPS to establish its needs, and maintains an up-to-date rate card. The rate card is shared with sentencers; however, in one area sentencers felt they were not routinely updated.

### **Innovative services**

Senior leaders have commissioned and supported a number of innovation projects, such as the Heroin-Assisted Treatment programme (the only one available in England and Wales), the Divert initiative and restorative justice schemes.

#### **Effective practice example**

Middlesbrough has the highest rate of adult reoffending, opiate use and drug-related deaths in the country. Entrenched heroin use continues to be a key driver of theft in the Cleveland police force area. This 'revolving door' of drug use and crime means offenders place increased demands on the police, prisons and probation services.

Long-term users are also putting significant pressure on health and social care services, due to their poor health and risk of overdose. Research<sup>28</sup> found that the detected offending of 20 individuals who met the proposed criteria for the Heroin-Assisted Treatment scheme over a 24-month period cost society £784,890 – the equivalent to £5.58 per head of population in Middlesbrough.

The Heroin-Assisted Treatment scheme is a medical treatment for people with a long-term dependency on heroin who have failed to respond to any other drug treatment. Individuals attend a specialist clinic twice a day and are assessed by a medical professional to determine the dose of diamorphine they will be prescribed. Once their drug use is under control, they spend time with specialists from other agencies to help them rebuild their lives and reintegrate into society. In the treatment room, individuals will self-administer the diamorphine under the supervision of medically trained staff to ensure there is no adverse reaction. The aim of the scheme is not only to help turn the lives of individuals around, but to reduce the cost and strain on public services through reduced crime and repeat offending, fewer short-term prison sentences, reduced antisocial behaviour and drug litter, reduced admissions to A&E, and better treatment outcomes for hard-to-treat users.

Cleveland Divert started operating in January 2019. Funded by Cleveland PCC, it offers an alternative way of engaging with first-time and low-level offenders instead of sending them to court and prosecuting them. In the long term, this should enable those who remain within the criminal justice system to receive a better quality of service from the limited resources available. The project is overseen by a probation operations manager (senior probation officer-equivalent). Day-to-day supervision is provided by the lead support officer, who is a qualified PO. The lead support officer is also responsible for assessing each case and meeting the police officer twice weekly

---

<sup>28</sup> Information taken from: <https://www.cleveland.pcc.police.uk/News-and-Events/Heroin-Assisted-Treatment.aspx>

to agree new cases to come on to the project following referrals from Cleveland Police. Specialist staff work with women and 18–24-year olds.

A deferred approach to prosecution can rehabilitate suspected offenders and reduce reoffending by requiring service users to participate in interventions as a condition of the deferral. The interventions can address some of the causes of offending (such as drugs, alcohol or mental health issues) and help individuals build on positive factors to move away from offending behaviour.

### Service user involvement

The CRC engages and involves individuals in reviewing the organisation’s service delivery. Service user forums are in place, where meaningful and relevant issues are identified and shared with the CRC senior leaders through formal meeting records.

Peer mentors and volunteers work with individuals, supporting them to undertake day-to-day tasks and liaise with responsible officers. A number of peer mentors and volunteers have previous offending backgrounds. Support is also offered after release from custody and in the community. The CRC seeks feedback from mentors and volunteers on ways to improve working practices and respond to requests they have.

### Unpaid work

The CRC engages with local authority partners, PCCs, reducing reoffending groups, community safety partnerships, local criminal justice partnerships and the public through its website to identify suitable projects for the delivery of unpaid work.

The CRC has entered into an ETE partnership with Three:13, which is accredited to provide nationally recognised qualifications. In addition to a range of ETE pathways, female-only unpaid work projects also include access to ETE opportunities. A number of service users have completed unpaid work requirements and continued to volunteer or train as peer mentors to work with future service users.

### Through the Gate

The services available to service users in custody and post-release are specifically tailored to individual needs, and designed to enhance or develop strengths and protective factors. Through the Gate services are enhanced by the contributions of volunteers and peer mentors. Mentors are allocated to service users pre- and post-release; upon release, service users are accompanied to appointments and supported to get things done.

	Previous inspection	Current inspection
<b>1.4. Information and facilities</b>		
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.	Good	Outstanding

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?**

Appropriate policies and guidance documents are available to CRC staff and there is a clear process for review. The CRC uses a variety of methods, including the intranet, management supervision and group events, to communicate these to staff. The operational minimum standards set out guidance on case recording decisions and for defensible decision-making, and 84 per cent of responsible officers said there was a clear recording policy in place. The quality of recording is inconsistent across the CRC, and in many cases does not outline the specific interventions or structured work being delivered. The QA team generally identifies gaps in appropriate recording during its review of cases, and through this process responsible officers are receiving feedback and actions to improve the quality of recording.

The main in-house services are accredited programmes, the citizenship programme and the interventions hub. In addition, responsible officers can access services from partners, the supply chain and the local community. The CRC maintains a good relationship with the NPS, which leads to appropriate services being made available and taken up through the rate card.

There are appropriate policies to ensure staff in all roles understand their responsibilities. These include delivery models for IOM and Divert. Policies and guidance are reviewed when necessary, and updated to take account of feedback, audits or obstacles that arise. Due to its relatively small size, the CRC is a nimble organisation, with simple processes and the ability to mobilise improvements promptly.

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

Local community hubs, such as churches and community centres, offer accessible locations and promote face-to-face contact. The environment in these hubs is positive, and their relaxed atmosphere supports a personalised approach. There is access to alternative office locations for sensitive contact or meetings. The CRC has recognised that the hubs can require heavy investment from those in the frontline to make them effective. In response, it has reduced the number of hubs from 35 to 19 and is focusing on locations that can offer a range of additional facilities. The hubs operate with a number of CRC staff present, in addition to other agencies. Each of the hubs has been risk-assessed, and appropriate control measures are in place.

Staff undertaking home visits and unpaid work supervisors are provided with GPS navigation safety devices that are reliable and regularly tested. Potential unpaid work sites are subject to a robust health and safety assessment before the project is agreed, and this is followed up by the supervisor, who will check the site each time before beginning any work.

**Do the information and communications technology (ICT) systems enable staff to deliver a quality service, meeting the needs of all service users?**

CRC staff have access to laptops and mobile telephones for remote access, which supports agile working arrangements. Access to OASys and nDelius is reliable overall. Information is exchanged with some partners and key stakeholders; however, there are continued difficulties with substance misuse services in some cases. Senior leaders are liaising with relevant providers to address this obstacle and agree information-sharing protocols.

While responsible officers have the ability to work flexibly, there are some constraints with printing and the use of CRC-supplied mobile phones to send emails. Currently,

responsible officers cannot operate these functions and rely on having to send requests to the administrators, which can cause some delay, albeit with minimal impact.

Managers have access to performance and quality information to monitor the performance of their teams. The CRC uses two ICT systems, one for corporate use and another for operational activity, which means some staff have to use two laptops. This system is currently being reviewed. Although potentially problematic, no one complained about this arrangement.

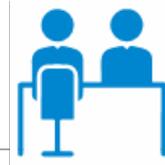
### **Is analysis, evidence and learning used effectively to drive improvement?**

The CRC has a good understanding of its performance against service level measures. It has fully implemented the QA team, which was still in development during the previous inspection. The quality of work is judged against the HMI Probation published standards. Members of the QA team have a good understanding of what good looks like, which is evidenced in the feedback to responsible officers. Their case reviews identify the strengths and the areas for improvement. The learning identified by the QA team is slowly being embedded across the organisation, although senior leaders understand the need for greater consistency in this process. Middle managers receive the outcomes of quality audits, although the follow-up work is not always clearly recorded in case records. We did, however, see quality assurance discussions noted in other paperwork, such as supervision notes.

Senior leaders conduct their own dip-sampling of cases and have already recognised areas for further improvement. The CRC has improvement plans, which are reviewed and monitored for progress. There is sufficient evidence of the CRC driving improvements, such as accessing appropriate external training, developing the QA team to conduct audits, and monitor and evaluate the effectiveness.

There is a flow of feedback to senior leaders from engagement in regional sentencers' meetings, the NPS, service user forums and other boards that the CRC uses to review its work and monitor effectiveness. The CRC has implemented a number of steps to learn from audits, SFOs, inspection and performance monitoring. The case supervision data and Through the Gate work shows that improvements are being made. The implementation of the QA team has provided middle managers with dedicated support to concentrate on quality and improvements. The learning from these processes and activities is understood by senior leaders. Senior leaders recognise ongoing improvements that the CRC needs to focus on, and have continued to communicate to the staff effectively to improve the quality of work in the organisation.

## 2. Case supervision



We inspected 77 community sentence cases and 21 post-release supervision cases, interviewed 52 responsible officers and 15 service users, and examined the quality of assessment, planning, implementation and delivery, and reviewing. Each of these elements was inspected in respect of engaging the service user and addressing issues relevant to offending and desistance. In the 88 cases where there were factors related to harm, we also inspected work to keep other people safe. The quality of work undertaken in relation to each element of case supervision needs to be above a specific threshold for it to be rated as satisfactory.

The CRC has made improvements to the quality of case supervision since the last inspection. Individuals are routinely engaged; responsible officers consider protective factors well and build on the service user's strengths. There are good assessments and plans to address offending and support desistance. The CRC has a range of services and interventions, although responsible officers do not access all of these to undertake the planned work. While we saw improvements in the quality of work to keep people safe, more work is required to achieve sufficient quality.

### Strengths:

- Service users are meaningfully involved and engaged in assessments, planning, implementation and delivery of the sentence.
- Responsible officers conduct good assessments of service users' strengths and protective factors.
- Planning reflects a good understanding of service users' strengths, protective factors and how to utilise sources of support.
- Responsible officers routinely conduct home visits to assess and consider issues with service users' home circumstances.

### Areas for improvement:

- Analyse the impact of personal circumstances and diversity needs on service users' ability to comply and engage with the sentence.
- Analyse thoroughly service users' offending-related factors.
- Set out risk management contingency arrangements in plans individualised to each case.
- Deliver structured services and interventions that are targeted at addressing offending needs and supporting desistance.
- Focus service delivery on keeping others safe.
- Involve service users and key people in the review of work to keep others safe.

	Previous inspection	Current inspection
<b>2.1. Assessment</b>		
Assessment is well informed, analytical and personalised, actively involving the service user.	Requires improvement	Requires improvement

**Our rating<sup>29</sup> for assessment is based on three key questions:**

Comparison with Durham Tees Valley in previous inspection and all CRCs	Previous inspection	Current inspection	All CRCs <sup>30</sup>
Does assessment focus sufficiently on engaging the service user? <sup>31</sup>	63%	69%	68%
Does assessment focus sufficiently on the factors linked to offending and desistance? <sup>31</sup>	57%	75%	63%
Does assessment focus sufficiently on keeping other people safe? <sup>31</sup>	47%	<b>53%</b>	55%

Assessments took into account factors such as the service user's level of motivation, readiness to comply and views. Strengths and protective factors were identified and assessments drew on available information when considering offending behaviour. Assessments of risk of harm were not completed sufficiently, and did not consistently identify all potential victims and use all available information.

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

Responsible officers use one-to-one sessions appropriately to engage with service users to inform assessments. In two-thirds of cases inspected, assessments included an analysis of the service user's motivation and readiness to comply with the sentence. In these cases, responsible officers considered information from pre-sentence reports and previous probation records, as well as interviewing the service users to consider any potential barriers to engaging and complying with the sentence.

The CRC has standardised paperwork to complete for each service user when they attend induction sessions after sentencing. The forms are designed so that necessary information about personal circumstances and diversity needs are recorded. Relevant information was recorded in the majority of cases we inspected, but the impact of relevant factors on the service user's ability to comply and engage was not routinely assessed. In these cases, it was unclear whether additional support

<sup>29</sup> 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 Annexe 2 for a more detailed explanation.

<sup>30</sup> HMI Probation inspection data, from inspections conducted June 2018 – June 2019.

<sup>31</sup> The answers to these key questions are underpinned by more detailed 'prompts'. The table in Annexe 4 illustrates the percentage of the case sample with a satisfactory 'yes' response to each prompt.

or alternative arrangements were required to offer more opportunities for the service users to comply and engage.

In most cases, there was clear evidence that service users' views were considered at the assessment stage. Responsible officers kept records of discussions with service users, and self-assessment questionnaires highlighted views and potential areas that needed to be addressed during the sentence.

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

Offending-related factors were identified in 91 per cent of cases inspected and recorded in OASys. Having appropriately identified relevant factors, the responsible officer analysed the offending-related factors in just over half of the cases.

Assessments of offending behaviour are descriptive, and while there is good use of other sources of information, such as pre-sentence reports and Crown Prosecution Service documents, responsible officers transfer the information from these sources into CRC records and undertake very little additional analysis.

The absence of sufficient analysis meant offending-related factors were not explored fully to consider the severity of different factors, their impact, and what action was necessary to address them. While plans to address offending-related factors included the right areas, the delivery of services and interventions were not individually tailored. A thorough analysis of the offending-related factors can lead to services and interventions being targeted to meet service users' needs and achieve appropriate outcomes.

The CRC's service delivery model is based on the principles of desistance. Responsible officers consistently identified strengths and protective factors that service users could build on during the sentence. Factors such as employment, family relationships and motivation to change were identified, and in most cases the interventions delivered built on these strengths and protective factors.

### **Does assessment focus sufficiently on keeping other people safe?**

Since the last inspection, the CRC has reviewed its risk of harm training and provided updated training events for all existing and new staff. Despite this, the quality of risk of harm assessments still did not reach the appropriate standard. The assessment of risk of harm requires responsible officers to identify the nature of harm and who is at risk, and to analyse the risks posed. To complete a detailed assessment, responsible officers may need to contact other agencies, such as children's services, police domestic violence units and other local partners or providers.

In the cases inspected, the risk of harm was identified in just over half the cases. While assessments recorded who was at risk, and the nature and level of risk posed, there was a lack of detailed analysis of these areas to fully understand the triggers and likelihood of harm occurring.

Assessments took into account previous convictions and past behaviours, using information easily available to responsible officers, though they did not consistently include information from other agencies. Information sharing and checks with police domestic violence units and children's services did not happen routinely. The absence of information led to gaps in assessments of risk of harm and appropriate risk management.

	Previous inspection	Current inspection
<b>2.2. Planning</b>		
Planning is well informed, holistic and personalised, actively involving the service user.	Inadequate	Requires improvement

**Our rating<sup>32</sup> for planning is based on three key questions:**

Comparison with Durham Tees Valley in previous inspection and all CRCs	Previous inspection	Current inspection	All CRCs <sup>33</sup>
Does planning focus sufficiently on engaging the service user? <sup>34</sup>	61%	68%	63%
Does planning focus sufficiently on reducing reoffending and supporting the service user's desistance? <sup>34</sup>	60%	78%	64%
Does planning focus sufficiently on keeping other people safe? <sup>34</sup>	36%	<b>55%</b>	46%

The CRC has made some improvements, specifically in relation to how planning focuses sufficiently on keeping people safe. The CRC's planning has improved from 'Inadequate' at the last inspection to 'Requires improvement', reflecting progress in the right direction. However, further work is necessary to improve the quality of planning.

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

The views of service users were not routinely captured within sentence plans. Although some service users had identified areas they wanted to address, such as suitability of accommodation or to improve employability, sentence planning objectives did not reflect this. Plans did consider diversity and personal circumstances, and where necessary, adjustments were made to the objectives to address specific needs. In most cases, responsible officers understood service users' readiness and motivation to change, highlighting factors that could be an obstacle to compliance and engagement. This had improved since the last inspection.

Plans set out how requirements would be delivered, including levels of contact and frequency of reporting. Responsible officers understood the range of services available to address offending and support desistance, but delivery of the necessary services did not consistently take place.

<sup>32</sup> 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 Annexe 2 for a more detailed explanation.

<sup>33</sup> HMI Probation inspection data, from inspections conducted June 2018 – June 2019.

<sup>34</sup> The answers to these key questions are underpinned by more detailed 'prompts'. The table in Annexe 4 illustrates the percentage of the case sample with a satisfactory 'yes' response to each prompt.

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

Having identified offending-related factors at the assessment stage, responsible officers included relevant areas in planning and in most cases prioritised the critical areas.

In most cases planning builds on service users' strengths and protective factors, including the use of potential sources of support. Responsible officers are undertaking home visits, engaging with family members, and using the assessment stage to understand individual strengths and protective factors that are then linked to the plan of work.

Responsible officers are familiar with the interventions available locally and structure service users plans appropriately to focus on services that are likely to reduce reoffending and support desistance.

The CRC allocates specific responsibility for the management of female service users to certain responsible officers. Overall, the quality of planning in these cases reflected increased focus on the relevant areas linked to offending and supporting desistance. Sentence planning included services for females that target specific areas of support, use trauma-based approaches and provide sensitive working environments.

### **Does planning focus sufficiently on keeping other people safe?**

The attention to keeping people safe within the planning stages was inconsistent. Some plans demonstrated good overall risk management, but others used generic plans that were not specific to individual service users' risks and lacked multi-agency working, as in the following example:

*“Positively, risk management planning outlined the current services involved and indicated the constructive interventions to be undertaken. However, there was no consideration to the work of police in providing information, and contingency planning referred to enforcement and risk escalation only. Consequently, planning did not focus sufficiently on keeping others safe”.*

The CRC has developed good working relationships with Durham Constabulary, including an effective arrangement to share information relating to domestic abuse call-outs. With Cleveland Police, similar arrangements have only recently been agreed and are not yet implemented.

In the cases inspected, less than half had appropriate planning in place to address domestic abuse issues. In just over half the cases, there was adequate planning to address child safeguarding issues.

Analysis of risk of harm and the potential impact of this on establishing appropriate risk management plans was not consistently in place in the cases inspected. In some cases, planning focused on current offences and did not sufficiently address previous behaviours requiring ongoing risk management. An example of this is illustrated in the following case:

*“There is a lack of sufficient planning related to safeguarding, both in terms of vulnerable adults (including new partner) and harassment, but also in respect of the child and contact. There is no reference to monitoring the new relationships/use of disclosure/information sharing to and from the police (i.e. call-outs). The risk management plan contains a fair amount of information; however, this is general and not personalised to this case and the current circumstances, i.e. contingency*

*refers to removal of child by children’s services, which is a huge leap given the child’s case is not even currently open. Risk management planning is not relevant to current circumstances”.*

	Previous inspection	Current inspection
<b>2.3. Implementation and delivery</b>		
High-quality, well-focused, personalised and coordinated services are delivered, engaging the service user.	Inadequate	Requires improvement

**Our rating<sup>35</sup> for implementation and delivery is based on three key questions:**

Comparison with Durham Tees Valley in previous inspection and all CRCs	Previous inspection	Current inspection	All CRCs <sup>36</sup>
Is the sentence/post-custody period implemented effectively, with a focus on engaging the service user? <sup>37</sup>	73%	80%	70%
Does the implementation and delivery of services effectively support the service user’s desistance? <sup>37</sup>	52%	<b>48%</b> <sup>38</sup>	52%
Does the implementation and delivery of services effectively support the safety of other people? <sup>37</sup>	42%	53%	41%

Sentences were implemented appropriately, which included engaging service users, with good efforts to consider protective factors and maintain effective working relationships. While a range of interventions and specialist partner agency support are available to the CRC, these were not used routinely to support desistance or the safety of others. The CRC has made some improvements in the delivery of services that support the safety of other people, which is driving the rating for this into ‘Requires improvement’.

<sup>35</sup> 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 by bold in the table. See Annexe 2 for a more detailed explanation.

<sup>36</sup> HMI Probation inspection data, from inspections conducted June 2018 – June 2019.

<sup>37</sup> The answers to these key questions are underpinned by more detailed ‘prompts’. The table in Annexe 4 illustrates the percentage of the case sample with a satisfactory ‘yes’ response to each prompt.

<sup>38</sup> Although the lowest score on this standard was below the 50 per cent boundary for ‘Requires improvement’, it was within 5 percentage points of this. In view of other key question scores and evidence from interviews of more effective practice, professional discretion was used to raise this rating to ‘Requires improvement’.

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

Overall, responsible officers engage service users well throughout most of the sentence. The directions provided in the minimum operating standards set out clear expectations for implementing sentences. Timely contact with service users at the start of the sentence meant requirements in most cases began at the appropriate time.

Service users retained the same responsible officer in most cases inspected. The relationships formed and engagement levels were productive, and often resulted in appropriate flexibility offered when necessary to support compliance and engagement, including understanding obstacles and risks of non-compliance in advance.

Responsible officers provided flexible reporting arrangements and alternative appointments where necessary, and attended local community hubs that were easy for service users to access. These alternatives meant formal enforcement was not generally necessary. Where enforcement action was necessary, re-engagement with service users was effective. This was illustrated in the following case inspection example:

*“There are considerable efforts made by the responsible officer to engage the service user, including appointment reminders, announced and unannounced home visits, and liaison with other professionals, in order to check why she has failed to attend, changing appointments to link in with other professionals, minimising the number of appointments she has in a week, and liaising with family in order to explore ways to remove barriers to compliance. This is all in addition to the fact that the responsible officer demonstrated in interview that the style of engagement was also important, reinforcing the importance of motivational goal-setting. When all other options had been exhausted, breach action was taken”.*

### **Does the implementation and delivery of services effectively support the service user’s desistance?**

During the assessment process, the most important factors identified that were linked to offending were thinking and behaviour deficits, and substance misuse. Sufficient services were delivered in less than half of the relevant cases. The CRC uses its own ‘citizenship programme’ and is piloting an online interventions hub. Both have a range of modules to work through that are designed to address different drivers of offending behaviour. Overall, the structured delivery of both programmes remains inconsistent, with little evidence that the impact of any work delivered is assessed or measured.

In addition, a range of services are available from local substance misuse providers, mental health advisers and other local partners. The coordination of the delivery of services is insufficient and leads to work potentially carried out in isolation from others working with the same individual. Despite plans setting out appropriate actions, services to access and levels of contact, they were not executed.

Service users are seen by responsible officers in local community hubs, where the majority of the face-to-face contact takes place. Partners and other agencies also attend the community hubs for sessions with service users. The quality of, and process for, information sharing when others are working with the same individual do not support meaningful case management. There were difficulties getting information from substance misuse services, which led to gaps in reviews of progress or made further work necessary to address offending and support desistance. Where services

had an impact, this was primarily around the service user's strengths and helping them build on protective factors.

### Does the implementation and delivery of services effectively support the safety of other people?

The delivery of services focusing on managing and minimising risk of harm was sufficient in only half the cases inspected. In most cases, services focused on supporting desistance but were not sufficiently coordinated with other interventions linked to risk of harm. Despite sentence plans and risk management plans detailing relevant actions to manage risk of harm, these were not consistently carried out. Appropriate actions, including routine contact with police domestic violence units and/or children's services, were not taking place in enough cases.

Although service users were seen by responsible officers, contact did not focus on the key risk of harm issues. Updates were based on self-reports from service users, which responsible officers relied on by without being verified.

Home visits were conducted regularly, providing contact and access to family members. Responsible officers used home visits to conduct unannounced checks and, where necessary, to obtain information to contribute to reviews with children's services.

	Previous inspection	Current inspection
<b>2.4. Reviewing</b>		
Reviewing of progress is well informed, analytical and personalised, actively involving the service user.	Inadequate	Requires improvement

Our rating<sup>39</sup> for reviewing is based on three key questions:

Comparison with Durham Tees Valley in previous inspection and all CRCs	Previous inspection	Current inspection	All CRCs <sup>40</sup>
Does reviewing focus sufficiently on supporting the service user's compliance and engagement? <sup>41</sup>	65%	70%	65%
Does reviewing focus sufficiently on supporting the service user's desistance? <sup>41</sup>	46%	67%	60%
Does reviewing focus sufficiently on keeping other people safe? <sup>41</sup>	33%	<b>54%</b>	44%

<sup>39</sup> 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 Annexe 2 for a more detailed explanation.

<sup>40</sup> HMI Probation inspection data, from inspections conducted June 2018 – June 2019.

<sup>41</sup> The answers to these key questions are underpinned by more detailed 'prompts'. The table in Annexe 4 illustrates the percentage of the case sample with a satisfactory 'yes' response to each prompt.

Formal reviews of cases were completed by the CRC, which took into account levels of compliance and engagement. The reviews considered barriers to compliance and engagement, and in some cases appropriate adjustments were made to the planned work. Surprisingly, despite showing good levels of engagement with service users in the assessment, planning and implementation of the sentence, there was considerably less involvement with them during the reviews.

### **Does reviewing focus sufficiently on supporting the service user's compliance and engagement?**

Reviews were completed in cases following significant changes or were carried out periodically in line with the CRC's minimum operating standards. The review template is designed to include information about compliance and levels of engagement, which was done sufficiently by the CRC. Records outlined known and potential barriers, and necessary steps to reduce non-compliance. In almost two-thirds of cases inspected, adjustments were made as a result of compliance and engagement issues. These included updating reporting arrangements and risk management plans, and reviewing sentence plan objectives. In some cases, appropriate changes and updates were not made, but were required.

It was disappointing that responsible officers did not routinely involve service users in the review of their assessments and plans. In over half of cases, the reviews were completed without meaningful contributions from service users, though there were some good examples of service users being engaged. In one such case, the responsible officer referred to the review as a 'recommitment plan', following a period of non-compliance.

### **Does reviewing focus sufficiently on supporting the service user's desistance?**

While changes were made to assessments and planning in the light of issues related to compliance and engagement at the review stage, these were not consistently applied. In 71 per cent of cases inspected, responsible officers identified changes in factors linked to offending; however, relevant changes were made to ongoing plans of work in only 40 per cent of cases.

The CRC has made good improvements in reviewing service users' strengths and protective factors since the last inspection. Having identified these factors clearly at the assessment stage, responsible officers remained alert to them and continued to consider relevant factors. Reviews contained more input from others working with the individuals compared with the last inspection, which evidences some good examples of information-gathering to inform the review process.

### **Does reviewing focus sufficiently on keeping other people safe?**

The review of work to keep other people safe has improved since the first inspection, albeit with a need for ongoing improvement. While reviews identified changes in risk of harm in just over half the cases inspected, relevant adjustments were made in only 37 per cent of relevant cases. Often, risk management plans remained unchanged; for example, responsible officers did not adjust them when certain actions were no longer required.

We were pleased to see the progress made in improving information-gathering from others in managing risk, including improved liaison with police domestic violence units and increased actions requested following quality assurance reviews of case assessments.

There was a lack of involvement of other key people involved in the lives of service users. While home visits in some cases provided evidence of engagement with family members, their views were not routinely seen in the formal review records.

	Previous inspection	Current inspection
<b>4.1. Unpaid work</b>		
Unpaid work is delivered safely and effectively, engaging the service user in line with the expectations of the court.	Good	Good

*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 30 unpaid work requirements, looking at assessment and planning, safety, and implementation of the court order. We also observed one induction session and eight work parties to examine the extent to which unpaid work was delivered in a way that supported desistance.

The CRC has developed and procured projects that provide good education, training and employment (ETE) opportunities, and projects that cater for diverse needs and personal circumstances. The rating for unpaid work has been driven by these opportunities that inspectors visited and observed. The CRC has developed effective relationships and partnerships with employment and education providers and with local councils to access good-quality work.

There were inconsistencies in the quality of assessments and analysis of risk of harm, health and safety, and vulnerability issues. Some responsible officers implement the unpaid work service delivery guide, while others do not. This meant that, in just over half the cases inspected, responsible officers had not sufficiently analysed relevant factors associated with identifying suitable work placements. Inspectors did find examples of relevant factors being considered and having an impact on appropriate allocation decisions; however, much of this was done informally, with no written assessment available.

<sup>42</sup> CRC aspects of domain three work are listed in *HMI Probation's Standards* as 4.1 and 4.2.

### Strengths:

- The variety of projects sourced by the CRC meets a range of diverse and personal circumstances.
- Access to ETE opportunities through unpaid work leads to professional qualifications and training opportunities, with potential employment outcomes.
- The CRC supports service users to continue to volunteer at projects once they have completed their hours.
- Suitable service users receive peer mentor training on completing unpaid work so that they can support others.
- Supervisors consistently apply the principles of pro-social modelling and professional engagement with service users.
- Responsible officers receive clear and timely information from unpaid work staff about attendance and any issues relating to behaviour.

### Areas for improvement:

- Personalise assessments to take into account health and safety and vulnerability issues.
- Complete a thorough analysis of risk of harm factors, outlining any necessary management arrangements.
- Communicate clearly the actions supervisors need to carry out to manage health and safety, vulnerability and risk of harm factors, where identified.
- Provide regular reporting instructions, particularly following a period of non-compliance or non-attendance.

### Unpaid work key data<sup>43</sup>

	12 months previously	To date of current inspection
Percentage of successful completions of unpaid work requirements in previous 12 months	91.9%	92.4%
Percentage of unpaid work hours completed as ETE activity in previous 12 months	4.7%	5.2%

### Our rating<sup>44</sup> for unpaid work is based on four key questions:

<sup>43</sup> Data supplied by CRC.

<sup>44</sup> The provisional 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.

## Current inspection

Is the assessment and planning of unpaid work personalised? <sup>45</sup>	57%
Is unpaid work delivered safely? <sup>45</sup>	<b>50%</b>
Do arrangements for unpaid work maximise rehabilitative elements and support desistance?	Evidence gathered during observations of 8 unpaid work sessions by inspectors highlighted the real benefits that individuals could gain from opportunities to improve their employability and access educational opportunities while undertaking unpaid work. This evidence led to professional discretion being used to increase the overall rating for the unpaid work standard to 'Good'. <sup>46</sup>
Is the sentence of the court implemented appropriately? <sup>45</sup>	67%

A personalised approach to assessment and planning of unpaid work had taken place in just over half of the cases inspected. The completion of assessment forms was inconsistent, which led to risk of harm and service user's health and vulnerability assessments not being recorded clearly in just under half the cases, despite the CRC having a clear process in place. The rehabilitative opportunities for individuals provide good access to a range of ETE routes, tailored to meet individual needs and the type of unpaid work delivered.

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

To make an accurate assessment of service users, a written assessment should be completed and made available to staff involved in delivering the unpaid work. In 70 per cent of cases inspected, diversity and personal factors were considered in the assessment, though the impact of these factors on the individual's ability to complete unpaid work was only considered in 60 per cent of relevant cases.

The CRC used one set of paperwork to record information about diversity and personal circumstances and another to record the assessment for unpaid work. The two assessments were not combined sufficiently to analyse the service user's diversity and personal circumstances, and their strengths and protective factors. Staff responsible for conducting the unpaid work induction sessions recorded specific factors by ticking the relevant boxes; however, this did not impact sufficiently on the placement allocation or necessary actions required by the supervisors.

Because assessment forms were not completed fully, the CRC did not capture and record the ETE needs of service users in 75 per cent of the cases inspected. However, inspectors did find good examples of service users being identified and

<sup>45</sup> The answers to these key questions are underpinned by more detailed 'prompts'. The table in Annexe 4 illustrates the percentage of the case sample with a satisfactory 'yes' response to each prompt.

<sup>46</sup> The ratings panel considers the range of qualitative evidence and decided to increase the provisional rating by one band to take account of other factors to the provisional rating. See Annexe 2 for a more detailed explanation.

allocated to an ETE-specific unpaid work project, having expressed a motivation to gain skills and deemed suitable by the CRC. This process often took place without any formal recording of suitability assessments, and was conducted by a community payback manager specifically trained to assess service users for the project. While the CRC is identifying individuals with an ETE need, a recorded assessment and analysis would strengthen the allocation process and potential outcomes that can be achieved.

The CRC allocated individuals to one of three placement types: individual placements, group placements and placements at the Oakwood ETE project.<sup>47</sup> The allocation was suitable in two-thirds of cases. In one-third of cases, there was no analysis of the relevant circumstances and personal factors, which meant it was not always clear how diversity and personal circumstances were considered when allocating to a placement type.

### **Is unpaid work delivered safely?**

The CRC has a process to provide guidance to staff about assessing and managing risk of harm issues for service users attending unpaid work. However, the process was applied inconsistently. The paperwork used by responsible officers at the point of induction was not fully completed to include analysis of risk of harm and issues relating to health and safety and vulnerability. In half the cases, the risk of harm classification was ticked, along with any health and safety or vulnerability issues; however, there was a lack of analysis and directions for supervisors about any actions necessary to manage the issues raised by these classifications.

The process was applied better when individuals were being considered for individual placements or the Oakwood ETE project, where the service users might be supervised by beneficiaries or staff not directly employed by the CRC. Project beneficiaries outline any exclusions for allocating people to their projects, and the CRC is responsible for ensuring the correct suitability assessments are undertaken. The CRC has specific managers to make these assessments.

In the majority of cases inspected, there was clear communication between unpaid work staff and the responsible officer. The CRC records attendance and failure to attend in a timely manner, which allows responsible officers to take action when necessary.

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

A total of 9 unpaid work site visits and inductions were conducted, which involved 36 service users and 10 supervisors. Most of the service users were aware of how the work benefited the local community. Supervisors informed individuals at the start of the working day about the work required and how the community benefited from it, providing understanding and a sense of achievement on the work completed.

Service users allocated to projects where there was no direct ETE-related outcome, understood how they could transfer the skills they had developed. They were aware of the ETE allowance towards unpaid work hours, and some service users described courses that had been completed for this purpose.

The CRC works in partnership with the organisation Three:13 to support service users to access training and employment opportunities and gain recognised qualifications while completing their unpaid work requirement. Three:13 helps people

---

<sup>47</sup> The Oakwood ETE project is the community centre used by the DTV CRC unpaid work team in conjunction with Three:13 for the delivery of unpaid work and ETE activities.

back into work by increasing their confidence through work experience opportunities and supporting them through accredited BTEC, National Open College Network (NOCN) or national vocational qualification (NVQ) courses. With a NOCN Level 1 Award in Vocational Studies, service users choose a pathway to suit their aspirations, including catering, customer service, childcare, horticulture or painting and decorating, all delivered onsite. Through the partnership with Three:13, from October 2019 to January 2020, 42 service users gained a NOCN level 1 award; four service users secured employment while on, or within three months of having completed, the unpaid work requirement at the Oakwood centre. Three individuals who completed unpaid work have continued to attend Oakwood as volunteers, and one is undertaking peer mentor training.<sup>48</sup> Inspectors met one female who completed her unpaid work at Oakwood, who said:

*“Since the age of 13 I have needed help with my emotions, which led to me getting into trouble. My probation officer has really cared for me. I left school young and she asked me what I wanted to do whilst on probation. I told her to help me get an education. She talked to me about unpaid work and suggested working in the kitchens at Oakwood. It wasn’t my calling, I didn’t want to work in the kitchens, but I gave it a try. I could see that by being there I was helping other staff and I was learning new skills. Being here gets the best out of me. I have got my family back and they can see the real me is back. I am used to people walking all over me but here there are so many nice people. I am now training to be a peer mentor. Thanks to this place I am at my best. I would never have figured out my emotions. It was my PO who helped me. She and this place have saved my life”.*

The Oakwood project caters for a range of personal circumstances. Service users can report there directly, use a collection point to get a lift to the project and attend flexible hours. There is a female-only provision. The partnership with Three:13 provides access to employers and classroom space (as shown below), and ICT to undertake job searches and complete applications.



<sup>48</sup> Data supplied by the CRC.

Unpaid work supervisors spend a significant amount of time with service users compared with other CRC professionals. We found all supervisors engaging professionally and using pro-social attitudes and behaviours. Supervisors were equipped with project risk assessments, and provided work instructions in accordance with the health and safety directions.

### Is the sentence of the court implemented appropriately?

Some service users experienced gaps in the frequency of the unpaid work appointments offered. While the initial appointments were offered promptly, if there were subsequent failures to attend after this appointment, follow-up arrangements were inconsistent, with an absence of regular weekly appointments offered.

The CRC procures projects that provide variety in the unpaid work carried out. They are accessible to individuals with personal circumstances that mean they require flexible arrangements or allocation of light duties. Inspectors heard from service users that, overall, they enjoy the work they are asked to complete.

Responsible officers recorded decisions based on their professional judgement in most cases. In some cases, this led to adjustments being made following compliance reviews and discussions of obstacles to attendance, leading to improved future compliance. Prompt enforcement action was taken in just under two-thirds of relevant cases. In the remaining cases, enforcement action was delayed without good reason.

	Previous inspection	Current inspection
<b>4.2. Through the Gate</b>		
Through the Gate services are personalised and coordinated, addressing the service user's resettlement needs.	Requires improvement	Outstanding

We inspected the management of 20 cases where the CRC had delivered pre-release Through the Gate resettlement work. We looked at resettlement planning, delivery of resettlement services and coordination of release. We held meetings with the CRC lead staff member for Through the Gate services, CRC middle managers and a range of managers and frontline staff, including peer mentors and volunteers.

The CRC has used the additional funding, provided to all CRCs from the government, to implement the enhanced Through the Gate specification, and has achieved effective outcomes. In the last inspection, the CRC was rated 'Requires improvement' for Through the Gate services. This time we found it to be 'Outstanding'. Overall, there were relevant and appropriate resettlement plans in place. Relevant factors were identified, and services were either provided or referrals made to set up support in time for release from custody. The level of support provided post-release is impressive, ensuring individuals attend relevant appointments and undertake actions as necessary to support their resettlement into the community.

The CRC is the lead host provider for four resettlement prisons: HMP Durham (remand/reception and distribution), HMP Holme House (long sentence prisoners

arriving from HMP Durham), HMPYOI Low Newton (females and young people estate) and HMPYOI Kirklevington Grange (open adult/young people estate). Although HMPYOI Deerbolt is not classified as a resettlement prison by HMPPS, it has been included in the enhanced specification and it receives the full enhanced Through the Gate services. HMP Frankland is also not a resettlement prison, although the CRC delivers all aspects of the enhanced specification if requested by the prison via the rate card.

The delivery of Through the Gate services and post-release services are contracted to the CRC's supply chain and partners. These include The Wise Group, 13 Group, The North East Prisons Aftercare Society (NEPACS), Changing Lives, A Way Out and Trans Aware.

#### Strengths:

- The mentor and volunteer provision provides effective support and guidance to service users.
- The delivery of Through the Gate services by supply chain partners brings expertise and specialist knowledge to resettlement activity.
- Resettlement planning sufficiently considers risk of harm factors and management arrangements.
- Through the Gate staff have access to nDelius and OASys, which enables them to gather and share information effectively.
- The CRC and its supply chain have developed effective relationships with local prisons, resulting in appropriate services being delivered to meet local demand and need.

#### Areas for improvement:

- Out-of-area contact with responsible officers for individuals in HMP Durham is inconsistent.
- The level and range of services and activities in HMP Durham are not as wide as in other local prisons.

**Our rating<sup>49</sup> for Through the Gate is based on three key questions:**

Comparison with previous inspection and all CRCs	Previous inspection	Current inspection	All CRCs <sup>50</sup>
Does resettlement planning focus sufficiently on the service user's resettlement needs and on factors linked to offending and desistance? <sup>51</sup>	50%	95%	69%
Does resettlement activity focus sufficiently on supporting the service user's resettlement? <sup>51</sup>	50%	94%	62%
Is there effective coordination of resettlement activity? <sup>51</sup>	50%	<b>89%</b>	59%

Delivery of Through the Gate services has improved considerably compared with the findings for the CRC at the last inspection and against the aggregate data from all CRC inspections. The increased investment provided by the Ministry of Justice has allowed the CRC to increase staffing and sufficiently implement the enhanced Through the Gate model. Resettlement planning is personalised to take into account the service user's needs. This approach led to appropriate services being delivered and activity taking place to address the relevant resettlement needs. Mentors and volunteers develop positive working relationships with service users. They understand barriers and put in place support to help service users on release and to resettle in the community.

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

The CRC has a thorough service delivery guide for Through the Gate services, which is being implemented effectively by the staff and supply chain partners. In all cases inspected, resettlement plans set out how individual needs will be addressed, using available information and identifying strengths and protective factors. The CRC has subcontracted delivery of Through the Gate, which means that specialist support is available to address the needs of service users in custody. Staff make timely contact with individuals to understand their needs, taking into account diversity and personal circumstances and known risk of harm factors.

Through the Gate staff assess the level of provision required for each individual need from level one to level three. This determines potential resources and complexity. In the majority of cases inspected, the level of provision was assessed accurately. The three areas individuals required most support with while in custody were: finance, debts and benefits; personal relationships and community; and accommodation.

The CRC recognises that individuals assessed with level three needs may benefit from additional support through its mentoring offer. Mentors are allocated following an assessment of suitability and safety planning. Once allocated, they work with

<sup>49</sup> 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 Annexe 2 for a more detailed explanation.

<sup>50</sup> HMI Probation inspection data, from inspections conducted between June 2018 – June 2019.

<sup>51</sup> The answers to these key questions are underpinned by more detailed 'prompts'. The table in Annexe 4 illustrates the percentage of the case sample with a satisfactory 'yes' response to each prompt.

service users to design bespoke plans and actions to prepare for release from custody and beyond.

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

In each of the prisons where Through the Gate services are delivered by the CRC, a team leader and operational manager work with the prison's head of reducing reoffending and head of the offender management unit to develop a range of services and activities that meet local demand and needs.

The activities and resettlement services are provided by the CRC's supply chain and partners, alongside CRC staff. The Middlesbrough-based Thirteen Housing Group brings expertise in housing and accommodation. As a housing provider, Thirteen Group has a supply of its own accommodation, and works with other landlords and housing providers to increase the housing options available to service users being released from custody. It has piloted new programmes for service users with a housing need. On successful completion of the programme, the individual is provided with supported accommodation and ongoing support to work towards independent living.

The Wise Group social enterprise has experience of delivering employability and criminal justice programmes for over 30 years and providing mentoring services. Service users are referred for a mentoring assessment before release. The Wise Group allocates a suitable mentor, who works with the service users pre- and post-release for up to 12 months. The mentors liaise with enhanced Through the Gate officers in the prison and the responsible officer in the community to understand the necessary actions for each case, and to work with service users to support them to attend appointments and complete required activities. Through the rate card, mentoring services are purchased by the NPS for MAPPA and other complex cases to provide additional support, assisting individuals with day-to-day needs.

The Changing Lives national charity provides support for women in Low Newton prison, and has worked with the Wise Group offering mentoring support. It also provides specialist support for sex workers, those at risk of sexual exploitation and those with complex needs.

NEPAC provides family support, addressing service users' needs or facilitating special visits. In the final weeks before release, NEPAC delivers a Heading Home programme, consisting of four sessions based on restorative justice principles and completed with a family session, giving family members the opportunity to express issues or concerns about release.

Trans Aware provides support for transgender service users in all the local prisons. Practical support and advice are provided in changing names, sourcing clothing and talking to family members.

A Way Out is an outreach and prevention charity that aims to engage, empower and equip vulnerable and excluded women, families and young people to live lives free from harm, abuse and exploitation. Specialist sex worker mentors work with individuals to develop intensive safety plans for release and provide ongoing support for up to nine months post-release. A key part of their work to support sex workers includes helping them stay safe from clients and pimps, addressing the potential risk of violence and harm they present. The key workers use a trauma-informed approach and a therapeutic environment. The impact of this work has been disrupted in some cases when service users were moved to other prisons and key workers were not informed, resulting in the safety planning not being followed through.

The decision to subcontract the delivery of Through the Gate services was driven by the CRC's intention to involve specialists in its model. In the cases inspected, we found that this specialist knowledge and experience of the subcontractors led to appropriate services delivered and referrals made, taking account of service users' strengths and protective factors. Team leaders have arrangements for risk of harm reviews and meetings to take place routinely. This is in addition to the risk reviews conducted when allocating mentors and volunteers.

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

The communication of resettlement activity has improved vastly since the previous inspection. The CRC developed and provided its supply chain staff with the same training received by new responsible officers. Through the Gate staff have access to relevant ICT, allowing them to gather and share information effectively. Being part of the prison internal meetings has helped the Through the Gate teams to develop effective links with different prison departments. In some of the cases, inspectors found good examples of liaison with mental health and substance misuse services in custody, which supported the individual's resettlement planning.

Mentors and volunteers provide a vital link and source of support for service users being released. Many start work with service users before they are released. Not only do they talk to service users about their needs, they are also able to access relevant information about the resettlement plans and any risk management arrangements. The mentors and volunteers routinely contact and update responsible officers, maintaining the link between the individual and responsible officer. On release, service users are inducted in departure lounges or visitors' centres immediately outside the prison gates, which reduces the anxieties of getting to the first appointment. For those service users allocated a mentor or volunteer, they are met at the point of release and supported to do other important actions, such as attend accommodation interviews and substance misuse service appointments.

Inspectors found many examples of good practice in the delivery of Through the Gate service, such as in this case:

*“Mary is serving a 16-week custodial sentence for shop theft. She has a long-standing heroin and crack cocaine/benzo addiction. She was homeless prior to custody, having fled an abusive relationship. She suffers anxiety and depression and had children removed from her care. The enhanced Through the Gate responsible officer made arrangements for temporary accommodation, an appointment for benefits and to attend the substance misuse services. On release, Mary had accommodation in place. She received an advance benefits payment and collected her methadone script. For the first time, Mary had not used on day of release, and was happy and stable”.*

## Annexe 1: Background to probation services

---

Around 255,000 adults are supervised by probation services annually.<sup>52</sup> 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.<sup>53</sup>

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 the middle of 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 (MAPPA). CRCs supervise most other offenders who present a low or medium risk of harm.

---

<sup>52</sup> Ministry of Justice. (2019). *Offender management caseload statistics* as at 30 September 2019, (based on the average number of total offenders supervised in the previous four quarters to the end of September 2019).

<sup>53</sup> 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.

## Annexe 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 52 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 38 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.<sup>54</sup>

### **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 99 cases from across all local delivery units. 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.

In some areas of this report, data may have been split into smaller sub-samples – for example, male/female cases, probation officer/probation services officer cases.

---

<sup>54</sup> HMI Probation domain one ratings characteristics can be found here: <https://www.justiceinspectorates.gov.uk/hmiprobation/wp-content/uploads/sites/5/2018/05/Probation-Domain-One-rating-characteristics-March-18-final.pdf>

Where this is the case, the margin of error for the sub-sample findings may be higher than 5.

### **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 30 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 one unpaid work induction session 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 20 custodial cases in which the individual had been released on licence or post-sentence supervision from the CRC's resettlement prisons over a 4-week period, shortly before the 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
- prison staff responsible for reducing reoffending and/or resettlement work
- the middle manager 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.

Lowest banding (key question level)	Rating (standard)
Minority: <50%	Inadequate
Too few: 50-64%	Requires improvement
Reasonable majority: 65-79%	Good
Large majority: 80%+	Outstanding ☆

We use case subsamples 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 subsamples 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 10 standards will be scored on a 0-3 scale as listed in the following table.

Score	Rating (standard)
0	Inadequate
1	Requires improvement
2	Good
3	Outstanding ☆

Adding the scores for each standard together produces the overall rating on a 0-30 scale as listed in the following table.

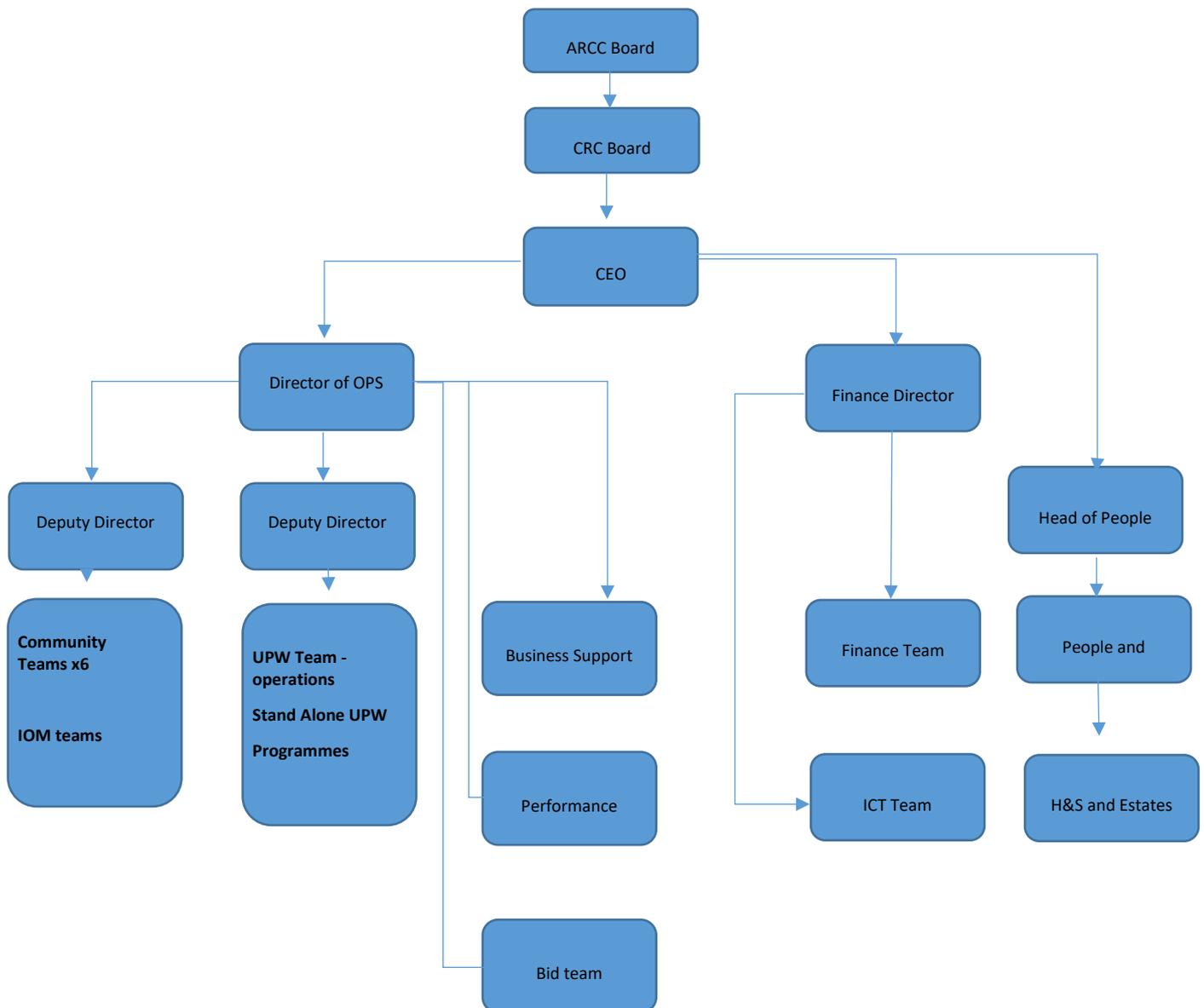
Score	Rating (overall)
0-5	Inadequate
6-15	Requires improvement
16-25	Good
26-30	Outstanding ☆

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 that do not meet the significance test.

## Annexe 3: Organisational design and map



The ARCC Board is the corporate parent where strategic discussions and decisions are made. Along with all of the partners within ARCC, the CRC is a member of this Board. Within this structure, there is also an audit and a remuneration committee which meet to consider factors impacting the whole Group. Additionally the CRC also has an Operational Management Board made up of members from the CRC Executive Team and ARCC. This Board is tasked with the operational performance, risk management and wider management overview of Durham Tees Valley CRC. The day to day operations and management of the CRC is discharged to the Chief Executive and the senior leadership team.



The Durham Tees Valley CRC area encompasses around 4000 square kilometres, ranging from remote rural areas of the North Pennines, to the more urbanised environments of Middlesbrough and Darlington.



## Annexe 4: Inspection data<sup>55</sup>

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.

2.1. Assessment		
Does assessment focus sufficiently on engaging the service user?	Previous inspection	Current inspection
Does assessment analyse the service user’s motivation and readiness to engage and comply with the sentence?	66%	66%
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?	No comparable data available	52%
Is the service user meaningfully involved in their assessment, and are their views taken into account?	57%	79%
Does assessment focus sufficiently on the factors linked to offending and desistance?		
Does assessment identify and analyse offending-related factors?	52%	59%
Does assessment identify the service user’s strengths and protective factors?	65%	90%
Does assessment draw sufficiently on available sources of information?	53%	70%

<sup>55</sup> HMI Probation inspection data.

<b>Does assessment focus sufficiently on keeping other people safe?</b>		
Does assessment clearly identify and analyse any risk of harm to others, including identifying who is at risk and the nature of that risk?	29%	39%
Does assessment analyse any specific concerns and risks related to actual and potential victims?	No comparable data available	48%
Does assessment draw sufficiently on available sources of information, including past behaviour and convictions, and involve other agencies where appropriate?	No comparable data available	39%
Were domestic abuse checks undertaken? <sup>56</sup>	No comparable data available	39%
Did child safeguarding information sharing take place in cases where required? <sup>57</sup>	No comparable data available	59%

## 2.2. Planning

<b>Does planning focus sufficiently on engaging the service user?</b>	<b>Previous inspection</b>	<b>Current inspection</b>
Is the service user meaningfully involved in planning, and are their views taken into account?	46%	54%
Does planning take sufficient account of the service user's diversity and personal circumstances, which may affect engagement and compliance?	60%	73%
Does planning take sufficient account of the service user's readiness and motivation to change, which may affect engagement and compliance?	64%	85%
Does planning set out how all the requirements of the sentence or licence/post-sentence supervision will be delivered within the available timescales?	75%	71%
Does planning set a level, pattern and type of contact sufficient to engage the service user and to support the effectiveness of specific interventions?	71%	71%

<sup>56</sup> Expected in all cases.

<sup>57</sup> Expected in all cases where the service user has children, is in contact with children or presents a potential risk of harm to children.

<b>Does planning focus sufficiently on reducing reoffending and supporting the service user's desistance?</b>		
Does planning sufficiently reflect offending-related factors and prioritise those which are most critical?	68%	75%
Does planning build on the service user's strengths and protective factors, utilising potential sources of support?	No comparable data available	79%
Does planning set out the services most likely to reduce reoffending and support desistance?	61%	75%
<b>Does planning focus sufficiently on keeping other people safe?</b>		
Does planning sufficiently address risk of harm factors and prioritise those which are most critical?	43%	56%
Does planning set out the necessary constructive and/or restrictive interventions to manage the risk of harm?	41%	62%
Does planning make appropriate links to the work of other agencies involved with the service user and any multi-agency plans?	41%	60%
Does planning set out necessary and effective contingency arrangements to manage those risks that have been identified?	26%	45%

### 2.3. Implementation and delivery

<b>Is the sentence/post-custody period implemented effectively, with a focus on engaging the service user?</b>	<b>Previous inspection</b>	<b>Current inspection</b>
Do the requirements of the sentence start promptly, or at an appropriate time?	72%	70%
Is sufficient focus given to maintaining an effective working relationship with the service user?	83%	83%
Are sufficient efforts made to enable the service user to complete the sentence, including flexibility to take appropriate account of their personal circumstances?	90%	92%
Post-custody cases only: Was there a proportionate level of contact with the prisoner before release?	25%	48%

Are risks of non-compliance identified and addressed in a timely fashion to reduce the need for enforcement actions?	74%	79%
Are enforcement actions taken when appropriate?	68%	72%
Are sufficient efforts made to re-engage the service user after enforcement actions or recall?	88%	90%
<b>Does the implementation and delivery of services effectively support the service user's desistance?</b>		
Are the delivered services those most likely to reduce reoffending and support desistance, with sufficient attention given to sequencing and the available timescales?	45%	50%
Wherever possible, does the delivery of services build upon the service user's strengths and enhance protective factors?	54%	74%
Is the involvement of other organisations in the delivery of services sufficiently well coordinated?	52%	59%
Are key individuals in the service user's life engaged, where appropriate, to support their desistance?	51%	56%
Is the level and nature of contact sufficient to reduce reoffending and support desistance?	50%	53%
Are local services engaged to support and sustain desistance during the sentence and beyond?	No comparable data available	49%
<b>Does the implementation and delivery of services effectively support the safety of other people?</b>		
Is the level and nature of contact offered sufficient to manage and minimise the risk of harm?	65%	69%
Is sufficient attention given to protecting actual and potential victims?	38%	38%
Is the involvement of other agencies in managing and minimising the risk of harm sufficiently well coordinated?	43%	45%
Are key individuals in the service user's life engaged, where appropriate, to support the effective management of risk of harm?	51%	54%

Are home visits undertaken, where necessary, to support the effective management of risk of harm?	67%	70%
---	-----	-----

#### 2.4. Reviewing

<b>Does reviewing focus sufficiently on supporting the service user's compliance and engagement?</b>	<b>Previous inspection</b>	<b>Current inspection</b>
In cases where it is needed, does reviewing consider compliance and engagement levels and any relevant barriers?	67%	74%
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?	65%	61%
Is the service user meaningfully involved in reviewing their progress and engagement?	45%	47%
Are written reviews completed as appropriate as a formal record of actions to implement the sentence?	63%	84%
<b>Does reviewing focus sufficiently on supporting the services user's desistance?</b>		
Does reviewing identify and address changes in factors linked to offending behaviour, with the necessary adjustments being made to the ongoing plan of work?	36%	40%
Does reviewing focus sufficiently on building upon the service user's strengths and enhancing protective factors?	55%	75%
Is reviewing informed by the necessary input from other agencies working with the service user?	42%	67%
Are written reviews completed as appropriate as a formal record of the progress towards desistance?	64%	82%
<b>Does reviewing focus sufficiently on keeping other people safe?</b>		
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?	24%	37%
Is reviewing informed by the necessary input from other agencies involved in managing the service user's risk of harm?	35%	65%

Is the service user (and, where appropriate, key individuals in the service user's life) meaningfully involved in reviewing their risk of harm?	26%	39%
Are written reviews completed as appropriate as a formal record of the management of the service user's risk of harm?	46%	82%

#### 4.1 Unpaid work

<b>Is the assessment and planning of unpaid work personalised?</b>	<b>Previous inspection</b>	<b>Current inspection</b>
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?	No comparable data available	60%
Does unpaid work build upon a service user's strengths and enhance their protective factors?	No comparable data available	50%
Is the allocated work suitable, taking account of the service user's diversity and personal circumstances?	No comparable data available	67%
<b>Is unpaid work delivered safely?</b>		
Does the delivery of unpaid work take account of risk of harm to other service users, staff or the public?	No comparable data available	53%
Does unpaid work consider issues relating to the health and safety or potential vulnerability of the service user?	No comparable data available	57%
Where the responsible officer is engaged in other activity/work with the service user, does regular communication take place?	No comparable data available	90%
<b>Is the sentence of the court implemented appropriately?</b>		
Does unpaid work commence promptly and happen regularly?	No comparable data available	60%

Do arrangements for unpaid work encourage the service user's engagement and compliance with the order?	No comparable data available	69%
Are professional judgements made in relation to decisions about missed appointments?	No comparable data available	70%
Are enforcement actions taken when appropriate?	No comparable data available	63%

#### 4.2 Through the Gate

<b>Does resettlement planning focus sufficiently on the service user's resettlement needs and on factors linked to offending and desistance?</b>	<b>Previous inspection</b>	<b>Current inspection</b>
Is there a clear and timely plan for how the service user's resettlement needs will be addressed?	83%	100%
Does the plan sufficiently draw on available sources of information?	50%	100%
Is the service user meaningfully involved in planning their resettlement and are their views considered?	75%	95%
Does the resettlement plan identify the service user's strengths and protective factors and consider ways to build upon these?	54%	100%
Does the plan take sufficient account of the service user's diversity and personal circumstances?	67%	80%
Does the resettlement plan take account of factors related to risk of harm?	No comparable data available	89%
<b>Does resettlement activity focus sufficiently on supporting the service user's resettlement?</b>		
Are resettlement services delivered in line with the service user's resettlement needs, prioritising those which are most critical?	No comparable data available	No comparable data available
Wherever possible, do resettlement services build upon the service user's strengths and enhance their protective factors?	No comparable	87%

	data available	
Does resettlement activity take sufficient account of the service user's diversity and personal circumstances?	No comparable data available	84%
Does resettlement activity take sufficient account of any factors related to risk of harm?	No comparable data available	82%
<b>Is there effective coordination of resettlement activity?</b>		
Is there effective coordination of resettlement activity with other services being delivered in the prison?	No comparable data available	94%
Is there effective communication with the responsible officer in the community, prior to and at the point of release?	54%	89%
Do resettlement services support effective handover to local services in the community?	No comparable data available	83%



Her Majesty's  
Inspectorate of  
Probation

HM Inspectorate of Probation  
1 Bridge Street West  
Civil Justice Centre  
Manchester  
M3 3FX

ISBN: 978-1-84099-923-5