



Her Majesty's  
Inspectorate of  
Probation

An inspection of probation services in:  
**Humberside, Lincolnshire & North Yorkshire**  
Community Rehabilitation Company

HMI Probation, May 2020

## **Acknowledgements**

This inspection was led by HM Inspector Tony Kirk, 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**

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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.

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## Foreword

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We last inspected Humberside, Lincolnshire & North Yorkshire Community Rehabilitation Company (CRC) in October 2018. At that time, we rated the work of the CRC as 'Requires improvement'. It is disappointing that, despite leadership commitment to improve, the overall rating for the CRC has not changed. We were concerned to find that case supervision is inadequate due to the lack of focused work with service users to keep other people safe.

The CRC has a strong leadership team, and the introduction of its new operating model has created opportunities to work more personally with service users. However, the model has also resulted in staffing levels that are too low and this leads to high workloads for individual responsible officers, which frustrates managers and staff efforts to improve the quality of case management work. It was disappointing that only one in five responsible officers we interviewed felt that the service prioritised quality and sickness absence rates for both probation officers and probation service officers are worryingly high. Having said that, we were pleased to see that the range of services and interventions with service users on offer, and information and communications technology systems, have improved in line with our previous recommendations.

Some of the work to engage service users is good, as are aspects of the work to reduce reoffending. Much of this good work is delivered by staff who remain motivated to do the best they can for service users and to make their communities safer places to live in. Innovative practice, such as the successful Alcohol Abstinence Monitoring Requirement (AAMR) pilot, and well-established support for women service users are welcome examples of good practice. Case management work to keep others safe was not good enough, and improvements must be made to better identify, manage and review the risk of harm.

We found that unpaid work was personalised, started promptly, delivered safely and to a good standard. Much more opportunity should be given to service users to develop employment-related skills. Through the Gate work is exceptionally good and additional Ministry of Justice (MoJ) funding has enhanced support for those leaving custody. Resettlement planning and practical support, for example, focused well on meeting service users' needs. Resettlement activity was well coordinated, and the extra funding has been put to good use to provide additional services for service users before and after release.

The leadership of this CRC want to do the right thing but have been held back by resource constraints and significant staff churn over the past year. It must now ensure that their good intentions are translated into improved practice to keep others safe, and our new recommendations, if implemented, should help this CRC to do this.



**Justin Russell**  
Chief Inspector of Probation

## Ratings

Humberside, Lincolnshire & North Yorkshire  
Community Rehabilitation Company

Score **12/30**

**Overall rating**

**Requires improvement**



### 1. Organisational delivery

1.1 Leadership

Good



1.2 Staff

Requires improvement



1.3 Services

Good



1.4 Information and facilities

Good



### 2. Case supervision

2.1 Assessment

Inadequate



2.2 Planning

Inadequate



2.3 Implementation and delivery

Inadequate



2.4 Reviewing

Inadequate



### 3. CRC-specific work

Unpaid work

Good



Through the Gate

Outstanding



## Executive summary

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Overall, Humberside, Lincolnshire & North Yorkshire Community Rehabilitation Company (CRC) is rated as: **'Requires improvement'**. This rating has been determined by inspecting this provider in three areas of its work, referred to as 'domains'. We inspect against 10 'standards', shared between the domains. These standards are based on established models and frameworks, which are grounded in evidence, learning and experience. They are designed to drive improvements in the quality of work with people who have offended.<sup>1</sup> Published scoring rules generate the overall provider rating.<sup>2</sup> The findings and subsequent ratings in those three domains are described here.

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### 1. Organisational delivery



We have rated leadership, services and information and facilities as 'Good' and staffing as 'Requires improvement'. For the services and information and facilities standards, we found improvements which have led to a higher rating than we gave last year.

The CRC's vision and strategy prioritise the quality of service. Leaders and staff maintain a clear commitment to core probation values and to supporting service users to reduce reoffending. The key risks of insufficient staffing resource and the need to improve risk of harm work are well understood and acted upon, for example, through frequent recruitment campaigns and a clear focus on improving work to keep others safe. A new operating model, 'Enabling our Futures', has been introduced to improve the delivery of interventions and further enhance work to address diversity factors.

However, staffing levels are insufficient and workload levels are too high, preventing delivery of a high-quality service for all service users. The reduced number of senior case managers (probation officer, PO, grade equivalent) under the new operating model puts pressure on the CRC's ability to robustly manage risk of harm. There is an improved focus on the oversight of work since our last inspection, although we have not seen this realised in the cases we inspected. Case-focused supervision does not yet sufficiently enhance the quality of work. The CRC does not provide access to pre-qualifying training routes for case managers (probation services officer, PSO, equivalents) and should. Managers pay attention to staff engagement, and staff are motivated to do what they can for service users.

Analysis of service users' needs is well developed through use of the reoffending data tool, which captures the main characteristics of the 'average reoffender' to inform the targeting of services. The volume, range and quality of services provided have increased since our last inspection. However, delivery of interventions needs to improve, so that the services available are used to maximum effect. Relationships with key stakeholders are strong and the CRC is held in good regard by local strategic partners, including police and crime commissioners and community safety

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<sup>1</sup> HM Inspectorate of Probation's standards can be found here:

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

<sup>2</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'.

partnerships. There is still some way to go to establish more productive relationships with sentencers.

Policies and guidance are communicated well to staff, though some human resources policies have not been updated and harmonised across the CRC. Premises are generally good and support individualised service delivery. Services are made accessible to service users through adept use of community reporting hubs across the large geographical area served by the CRC. The CRC has improved its information and communications technology (ICT) systems since our last inspection, though new staff still face far too long a wait to receive ICT kit. There is a strong focus on learning from audit and inspection to improve the quality of service delivery. Leaders have put sustained effort into addressing the recommendations from our last inspection and this is to their credit.

Key strengths of the organisation are as follows:

- A values-driven leadership team with a vision focused on quality.
- Motivated staff who work hard for service users.
- Strong relationships with key strategic partners, including police and crime commissioners.
- Provision of accessible services through a network of local community-based reporting hubs.

The main areas for improvement are as follows:

- The vision and strategy to deliver a high-quality service need to be put into practice.
- The learning and development needs of staff are not well met.
- Available services are not used sufficiently to meet the identified needs and risks of service users.
- There is too long a delay in providing ICT equipment to new and returning staff.

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## 2. Case supervision



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We inspected 67 community sentence cases and 46 post-release supervision cases; interviewed 61 responsible officers and 18 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 93 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.

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The fact that fewer than 50 per cent of cases met all our requirements in terms of assessment, planning, and implementation and delivery led to our judgements of 'Inadequate' for those elements of case management work. The focus on keeping other people safe was lacking, particularly in the delivery of services to support the safety of others.

Identification of service users' strengths and protective factors was strong, and this was helped by co-production of the self-assessment 'enabling plan' with the

responsible officer. Identification of risk of harm to others and analysis of risks to actual and potential victims were inadequate. The views of most service users were considered in planning the work that would be carried out during their sentence. The lack of contingency planning to manage the risk of harm was a concern.

Service users received a good level of support, which helped them to complete their sentence, including through efforts to re-engage individuals following action taken to encourage them to comply with their sentence. Home visits to many more service users were needed to support the management of risk of harm. There was a high rate of completion of written reviews to support service users' desistance. Too few service users were involved in reviewing their risk of harm.

Key strengths of case supervision are as follows:

- Planning considered the service user's diversity and personal circumstances and how these may impact on engagement.
- Good efforts were made to enable service users to complete their sentence, including re-engaging with individuals when this was needed.
- A good completion rate for written reviews to record progress towards desistance.

Areas of case supervision requiring improvement include:

- Assessment did not adequately identify and analyse the risk of harm to others or analyse specific concerns and risks to actual and potential victims.
- Planning did not set out effective contingency arrangements for as many service users as necessary, to manage the identified risks to keeping other people safe.
- Home visits were not undertaken with enough service users where these were necessary to manage risk of harm.
- Seven out of ten service users were not sufficiently involved in reviewing their risk of harm.

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### 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 40 unpaid work requirements, looking at assessment and planning, safety, and implementation of the court order. We also observed three induction sessions and seven work parties to examine the extent to which unpaid work was delivered in a way that supports desistance.

Assessment and planning of unpaid work were personalised for most service users. Unpaid work was delivered safely in 75 per cent of the cases we inspected, and started promptly in 70 per cent. Unpaid work supervisors acted as good role models, although the opportunities for service users to develop employment-related skills were limited. We have given this CRC's unpaid work provision an overall 'Good' rating.

Key strengths of unpaid work are:

- Unpaid work supervisors demonstrate commitment to helping service users to turn their lives around.
- Service users are provided with clear information on the rules of unpaid work.
- Unpaid work is personalised and takes good account of service users' diversity and personal circumstances.
- Much unpaid work begins promptly and happens regularly.

Areas for improvement for unpaid work are:

- Not enough unpaid work offers service users the opportunity to develop employment-related skills.
- Not all unpaid work projects were experienced as useful and rewarding.

### **Through the Gate**

We inspected the management of 35 cases where the CRC had delivered pre-release Through the Gate work, looking at resettlement planning, delivery of resettlement services and release coordination. We also held meetings with: the senior manager in the CRC responsible for Through the Gate services; four governors with responsibility for resettlement from four prisons; middle managers responsible for Through the Gate services; and a group of CRC resettlement workers directly responsible for preparing resettlement plans.

We found that resettlement planning focused on offending-related factors in 94 per cent of the cases we inspected. There was effective coordination of resettlement activity in 91 per cent of cases, and we have, therefore, rated Through the Gate work as 'Outstanding' in this inspection. Through the Gate services have benefited from an increase in resources since the introduction of the enhanced specification. This has allowed for a larger staff group, who have more time to spend with individuals preparing for release.

Resettlement plans identified strengths, and diversity and personal circumstances for almost all service users. Resettlement activity took good account of factors related to risk of harm, and services to address personal and financial resettlement needs were outstanding. Services to support service users with complex needs were good, though less strong than other aspects of resettlement work.

Key strengths of Through the Gate work are:

- Almost all service users were meaningfully involved in planning their resettlement.
- Nearly all resettlement plans took enough account of service users' diversity and personal circumstances.
- Resettlement activity took good account of risk of harm factors.
- Service users' resettlement needs were well catered for, particularly in relation to personal and financial needs.

Areas of improvement for Through the Gate work are:

- Delivery of resettlement services to some service users with other complex needs.

## Recommendations

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### **Achievement of recommendations from the previous inspection<sup>3</sup>**

In our previous inspection report, we made six recommendations to the CRC. During this inspection, we reviewed the extent to which these recommendations have been achieved. We found that the CRC has made some progress on five recommendations and no progress on the remaining one.

#### **We recommended that the CRC:**

1. *Urgently address the disconnect between operational staff and the aspirations of senior leaders in order to achieve better staff engagement and improve morale.*

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

The CRC has held independently facilitated focus groups with staff and managers to improve its understanding of staff concerns. A 'Your Voice' staff engagement action plan was developed to address the staff engagement issues that had been identified from our previous inspection, along with the 'Your Voice' staff survey. There has also been improved communication between senior leaders and operational staff, for example, through regular chief executive officer (CEO) 'blogs' and visits to offices to conduct question and answer sessions. The level of staff engagement has increased, although morale remains mixed and varies by location.

2. *Improve the quality and impact of work to manage risk of harm to keep actual and potential victims safe.*

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

The CRC has improved the training offer for staff, with a focus on managing the risk of harm. Other measures taken include quality and performance oversight delivered by quality officers and interchange managers, including individual feedback to responsible officers, and enhanced management oversight (EMO) of medium risk of harm cases, including dip-sampling of practice by community directors. However, the steps taken have not had the desired impact. The proportion of cases where assessment was sufficient to keep others safe has deteriorated from 58 per cent in last year's inspection to 46 per cent this year. The proportion of cases where planning, implementation and reviewing to keep others safe was sufficient, and this is not significantly different from our previous inspection findings

3. *Resolve the ICT availability issues so that staff can perform their roles better.*

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

The CRC has contracted a new ICT hardware provider to reduce the time taken to issue new kit. Monthly contract meetings have also been instituted, with the software provider focused on reducing ICT disruption to frontline delivery. A new escalation process has been introduced, aimed at reducing outages. These changes have resulted in improved ICT connectivity, which has afforded staff

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<sup>3</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>

better access to information. There are still some delays in issuing ICT kit to new and returning staff.

4. *Make sure that planned interventions are delivered so that work to reduce reoffending and manage risk of harm to others is effective.*

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

The CRC has introduced new rehabilitation activity requirements (RARs) in response to needs analysis and staff's views regarding which interventions were needed. 'Enabling our Futures' (the new operating model) has been implemented, which has created a dedicated interventions team in response to staff feedback on how to improve delivery. There is also a willingness to run groups with small numbers to support delivery of the sentence, engagement and compliance. These measures have yet to have the desired impact. Our scores for effective delivery of services to reduce reoffending and to keep others safe are not greatly different from our previous inspection. More encouragingly, 71 per cent of responsible officers stated that they had access to an appropriate range of services to meet service users' needs and risk.

5. *Make sure that all operational staff receive regular and effective supervision that makes a difference to service delivery, in particular risk of harm work.*

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

Enhanced Management Oversight has been implemented to quality assure the management of service users presenting a medium risk of serious harm. This new process has improved visibility of quality issues from practitioners to the directors of the organisation. The interchange quality assessment model (IQAM) for middle managers (senior probation officer equivalents) includes observation of practice and one-to-one case audit discussion. Quality improvement plans are in place, with a focus on improving performance. Seventy-four per cent of responsible officers told us that supervision enhances the quality of their work with service users, which is an improvement on the previous inspection (67 per cent).

6. *Strengthen its relationship with sentencers so that information is exchanged more effectively.*

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

The CRC has helped to develop a joint National Probation Service (NPS)/CRC sentencer newsletter, which has been in place since autumn 2019. The CRC has vigorously pursued access to court user group meetings, and direct involvement in magistrates' training. Up-to-date rate card information is now provided to each of the three benches within the CRC area. These efforts have led to some increase in direct CRC access to sentencers and information is provided to sentencers, although it is still not used effectively.

**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.

**Humberside, Lincolnshire & North Yorkshire CRC should:**

1. ensure all cases are allocated to staff who are appropriately qualified and/or experienced to improve the management of risk of harm
2. make sure that staff receive effective case-focused supervision that enhances the quality of work with service users to manage risk of harm

**The following three recommendations are repeated from the previous inspection.**

3. make sure that interventions provided are delivered to meet the identified needs and risks of service users
4. improve the quality and impact of work to manage risk of harm to keep actual and potential victims safe
5. make sure that unpaid work offers opportunities to develop employment-related skills.

**Interserve should:**

6. provide staff with access to pre-qualifying training routes.

## Background

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### Humberside, Lincolnshire & North Yorkshire CRC

Humberside, Lincolnshire & North Yorkshire (HLNY) CRC is an amalgamation of three former probation trusts. Its boundary aligns with the police force areas for Humberside, Lincolnshire and North Yorkshire. Recorded crime levels vary, with Humberside at 110.1 per 1,000 of the population, Lincolnshire at 78.5 and North Yorkshire at 57.5, compared with an average for England and Wales of 84.6.<sup>4</sup> Humberside has seen a 16 per cent increase in the number of 'violence against the person' offences, which is above the national increase of 12 per cent. Lincolnshire has seen a 74 per cent and North Yorkshire a 26 per cent increase in 'violence against the person' offences.

The CRC serves both urban and rural communities, with a total population of 2.5 million people.<sup>5</sup> Ethnicity is 85.8 per cent white British in Yorkshire and the Humber, and 93 per cent white British in Lincolnshire. The next largest ethnic groups are 4.3 per cent Asian British/Pakistani in Yorkshire and the Humber, and 4 per cent white other in Lincolnshire, which includes a significant Eastern European population. The unemployment rate in 2019 was 4.5 per cent in both Yorkshire and the Humber and Lincolnshire, and this was above the 4 per cent unemployment rate in England. There are pockets of substantial poverty and affluence, with unemployment being noticeably higher than the national average in Kingston upon Hull.<sup>6</sup>

The CRC is committed to working in strategic partnership with the NPS, as indicated by a joint 'Statement of Intent', and is working closely with the NPS to plan for the unified probation service. The CRC engages well with local strategic partners and is represented on local forums, including the Yorkshire and Humber Regional Reducing Reoffending Board, local criminal justice boards, safeguarding and domestic homicide boards and at multi-agency risk assessment conferences (MARACs).

HLNY CRC provides integrated Through the Gate services to five prisons: Her Majesty's Prisons (HMPs) Hull, Humber, Askham Grange (for women), North Sea Camp and Lincoln. Enhanced Through the Gate services were implemented in April 2019, supported by a contractual change and additional funding from the Ministry of Justice (MoJ).

Staff sickness rates are very high for probation officers (an average of 24 annual working days lost through sickness) and for probation services officers (21 days sickness). Staff attrition for probation officers is high (32 per cent leaving in the 12 months before the inspection announcement) and is relatively stable for probation services officers (8 per cent in the same period).<sup>7</sup> The pressures to manage within a reducing budget has led to a 13 per cent reduction in the number of probation officers employed.

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<sup>4</sup> Office for National Statistics. (2019). *Crime in England and Wales: Police Force Area data tables, total recorded crime (excluding fraud), Year ending September 2019*.

<sup>5</sup> Office for National Statistics. (2019). Figures derived from *United Kingdom Population Estimate, mid-year estimate 2018*.

<sup>6</sup> Office for National Statistics. (2019). *Local labour market, England and Wales, July 2018 – June 2019*.

<sup>7</sup> Data provided by the CRC.

At the time of this inspection, the CRC employed 213 full-time-equivalent (FTE) staff, with 149 deployed to frontline work, including integrated Through the Gate and unpaid work. Senior case managers (probation officer grade) and case managers (probation services officer grade) are supported by 21 interchange managers (senior probation officer grade).<sup>8</sup> Some senior leaders hold responsibilities across both West Yorkshire and HLNy CRC and work together as a joint CRC leadership team.

In October 2019, the total caseload under supervision was 5,634, having reduced marginally from 5,643 in October 2018. The average caseload was 43 for a senior case manager and 58 for a case manager at the time of this inspection.<sup>8</sup>

### **Purple Futures**

Purple Futures owns five CRCs: Cheshire & Greater Manchester; Hampshire & Isle of Wight; Humberside, Lincolnshire & North Yorkshire; Merseyside; and West Yorkshire. The five CRCs work collaboratively with one another, sharing learning and resources wherever practicable. One CEO has overall responsibility for the five CRCs, and is supported locally in each CRC by a director of operations.

Purple Futures is a consortium led by Interserve. It comprises: Interserve Justice (a subdivision of Interserve, a global support service and construction company); 3SC (a company managing public service contracts on behalf of third-sector organisations); P3 (People Potential Possibilities, a charity and social enterprise organisation); and Shelter (a charity focusing on homelessness and accommodation issues).

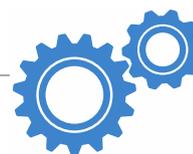
The CRC's organisational priorities reflect the enduring requirements of probation services. They include reducing reoffending and managing the risk of harm that offenders pose to others. The CRC takes a 'strengths-based' approach to its work. This means it focuses on the positives in individuals' lives, to encourage them to desist from offending.

For more information about this CRC, including details of its operating model and organisational structure, please see Annexe 3 of this report.

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<sup>8</sup> Data provided by the CRC.

## Contextual facts



2,436	The number of individuals supervised on community sentences by HLNy CRC <sup>9</sup>
1,245	The number of individuals supervised post-release by HLNy CRC <sup>9</sup>
698	The number of individuals supervised pre-release by HLNy CRC <sup>9</sup>
3,805	The number of individuals commencing community sentences in the 12 months before this inspection for HLNy CRC <sup>9</sup>
1,732	The number of individuals commencing post-release supervision in the 12 months before this inspection for HLNy CRC <sup>9</sup>
46.9%	The proportion of HLNy CRC service users with a proven reoffence <sup>10</sup>
41.3%	The proportion of CRC service users (England and Wales) with a proven reoffence <sup>10</sup>
£13.011m	Annual income, forecast 2019 Annual expenditure £15.9m: Operating loss £-2.89m
£13.942m	Annual income, actual 2018 Annual expenditure £15.898 million. Operating loss £-1.956m <sup>9</sup>

### Performance against targets

69%	The proportion of individuals recorded as having successfully completed their community orders or suspended sentence orders for HLNy CRC. The performance figure for all England and Wales was 77%, against a target of 75% <sup>11</sup>
57%	The proportion of positive compliance outcomes with licences and, where applicable, post-sentence supervision periods for HLNy CRC. The performance figure for all England and Wales was 65%, against a target of 65% <sup>12</sup>
87%	The proportion of positive completions of unpaid work requirements for HLNy CRC. The performance figure for all England and Wales was 92%, against a target of 90% <sup>13</sup>

<sup>9</sup> Data supplied by CRC.

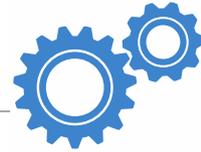
<sup>10</sup> Ministry of Justice. (2019). *Proven reoffending, Payment by results, January to March 2018 cohort*.

<sup>11</sup> Ministry of Justice. (2019). *CRC Service Level 8, Community performance quarterly statistics, July 2018 to September 2019, Q2*.

<sup>12</sup> Ministry of Justice. (2019). *CRC Assurance Metric J, Community performance quarterly statistics July 2018 to September 2019, Q2*.

<sup>13</sup> Ministry of Justice. (2019). *CRC Service Level 10, Community performance quarterly statistics, July 2018 to September 2019, Q2*.

# 1. Organisational delivery



Humberside, Lincolnshire & North Yorkshire (HLNY) CRC has a clear vision and strategy for delivering a quality service for service users. The CRC has detailed risk registers in place, which are overseen by senior leaders. Risks are understood and appropriate controls have been put in place to mitigate against risks to service delivery. The operating model encourages personalised approaches with service users and takes account of diversity factors, for example, through specialist provision for female service users.

Unfortunately, the operating model means that staffing and workload levels do not sufficiently support the delivery of a high-quality service for all service users. Too many cases are allocated to staff who are insufficiently qualified and/or experienced. Not all staff receive effective case-focused supervision. The CRC does not meet the learning needs of all staff, and there are no opportunities for case managers (probation services officers) to train to become probation officers. Our inspectors found that staff are motivated to deliver a quality service.

The analysis of the profile of service users is sufficiently comprehensive and up to date. The CRC provides the volume, range and quality of services to meet the needs of service users. Relationships with providers and other agencies are well-established. Policies are communicated well to staff and premises are accessible to staff and service users. ICT systems support remote working, and action to improve ICT has been taken in response to our previous inspection.

## Strengths:

- The leadership team has a strong focus on delivering a quality service.
- The interchange model is evidence-based, prioritising desistance and reducing reoffending.
- The reoffending data tool is used effectively to analyse reoffending and target services.
- There are effective relationships with other agencies to support desistance.
- Premises are sufficiently accessible to service users, including through the provision of community reporting hubs.
- Learning, including our 2019 inspection findings, is used to drive improvement.

## Areas for improvement:

- Practitioner workloads are too high.
- Four out of ten staff told us that they are allocated cases for which they do not have the appropriate training and experience.
- The induction programme for new staff is not fully effective.
- Staff sickness absence is at worryingly high levels
- Staff do not have access to pre-qualifying training routes.
- There is limited access to promotion opportunities.

	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.	Good	Good

### Key data

	Previous inspection	Current inspection
Proportion of staff interviewed who agreed that the organisation prioritised quality <sup>14</sup>	32%	20%

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

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

The vision and strategy prioritise delivery of a quality service; however, four out of five responsible officers interviewed did not feel that their service prioritised quality. Senior leaders responded proactively to the deficiencies identified in the last inspection report, and show drive, determination and a commitment to put things right. There is a strong value base to the strategy. Some aspects of practice have improved, for example, Through the Gate services which have received additional MoJ funding, while core casework has deteriorated.

Staff engagement with delivering the strategy is limited by excessive workloads and high levels of staff sickness. Most stakeholders see the CRC as a key influencer in relation to reducing reoffending. Despite being seen as a small financial contributor to the partnership, the CRC 'punch above their weight'. There is a planned approach to engaging with key stakeholders, for example, through active representation on local reducing reoffending boards. However, there is further work to do to engage sentencers. Police and crime commissioners describe the CRC as having a firm footprint within local community safety partnerships, and partners understand the CRC's vision and are engaged in delivery.

Senior leaders are visible, and this is appreciated by staff. Regular forums provide opportunities to engage with the leadership team, for example, through 'Your Voice', the Interserve staff survey, which all CRC staff are encouraged to engage with. The publication of the last HM Inspectorate of Probation report coincided with the 2018 'Your Voice' results and there were some commonalities. In response, the CRC undertook focus groups with staff to discuss the range of issues articulated within the

<sup>14</sup> HMI Probation inspection data.

HM Inspectorate of Probation and 'Your Voice' findings. A 'Your Voice' action plan was then developed, which identified actions to address these issues.

Service users are listened to through the service user council and some of their suggestions have been implemented. Examples include the introduction of 'anonymous signing' in at reception, asking about protected characteristics on induction, and posters in reception to explain the *Transforming Rehabilitation* changes to probation services.

Governance arrangements are layered effectively, although, despite the best efforts of the senior management team, the strategy has not fully translated into practice. As one manager told us: "*If it were down to effort, we'd be glitter*". Some middle managers said to us that they live with a series of action plans that they do not lose sight of. Managers cascade key messages to teams at team meetings.

Progress is closely monitored and reviewed, and there is a strong emphasis on engaging staff in delivering the strategy. The reoffending data tool is put to good use to analyse service users' characteristics in relation to reoffending and to review the effectiveness of services, for example, to identify the priority needs of women service users. The rate of reoffending has reduced from the 2011 baseline of 50.84 per cent to 46.9 per cent for the January to March 2018 cohort, though this remains one of the higher reoffending rates nationally. The average number of reoffences committed by reoffenders has increased from 4.64 to 5.45, which the CRC puts down to the changing profile of service users, with prolific offenders representing a greater proportion of the cohort.

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

Senior leaders are aware of key risks and have mitigations in place, for example, to address staff shortages, which in the opinion of inspectors has moved from a risk to a very live issue. The risk register is up to date and regularly reviewed. The quality of practice to manage risk of harm is appropriately categorised as a significant risk to service delivery. Several mitigations to improve practice have been put in place, including enhanced management oversight (EMO), quality assurance, and learning and development, though these measures have yet to have an impact.

Three recruitment campaigns were run in 2019 to address the considerable number of vacancies. It was found that the case manager job description was not fit for purpose and this has been rewritten to make it more relevant. Other appropriate mitigations included drafting in agency support and redirecting staff to offices with the most vacancies, for example, Hull (which had 50 per cent case manager vacancies in the summer months).

Business continuity plans are in place and are available on the HLNy CRC intranet, 'Wisdom'. The business and projects manager has responsibility for maintaining and reviewing business continuity plans, which are reviewed annually by the senior management team, with input from middle managers. Interchange managers are supported by interchange support officers (ISOs) to ensure business continuity. There are challenges to finalising business continuity arrangements as not all offices are owned by the CRC. For example, some buildings are shared with the NPS and in York the multi-occupancy building is shared with the local authority.

A business continuity plan was activated in response to a boiler failure in the Harrogate office, and worked well to minimise disruption to the service, despite the office closure for a few weeks. Continuity of contact with service users was maintained through a combination of home visits, meeting service users on partnership premises, and telephone contact.

There is a consistent approach to managing change through the Interserve Change Control Board. Implementation of the new 'Enabling our Futures'<sup>15</sup> operating model was problematic in some areas, and would have resulted in too few practitioners in rural offices to have sub-divided them into specialist teams. The leadership team responded well to this and adapted the roll-out by not implementing the model in rural Lincolnshire, reversing the roll-out after 12 weeks in North Yorkshire, and opting for a phased implementation in Humberside.

The introduction of the new model, together with resourcing pressures, disrupted continuity of responsible officer for service users. There has not been a formal impact assessment of the new operating model. An equalities impact analysis was completed by the central Interserve practice team before the new model was implemented. The model was then considered locally within the equality and diversity strategic group regarding the likely operational impact on service users.

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

The operating model is strengths-based and designed to enable meaningful contact with service users. However, in the cases we inspected, there was enough contact to reduce reoffending and to manage the risk of harm in only 40 per cent and 48 per cent of cases respectively. Full implementation of the model has been hampered by staff shortages.

The introduction of the integrated Through the Gate model has led to increased face-to-face contact with service users and better integration of CRC resettlement staff and prison offender managers. There is joint development of service user resettlement plans, including, for example, through the HMP Lincoln 'departure lounge' and preparation for release course. Discharge boards have similarly helped those most at risk, as well as a resettlement programme and high intensity workers maintaining contact with service users following their release from custody. Joint resettlement plans are also delivered in HMP North Sea Camp with a multi-agency team working to a shared release plan.

The operating model is designed to assess individual needs through the co-production of the enabling plan, which is designed to take account of service user's strengths, goals and aspirations. The model focuses on meeting diverse needs, for example, through the dedicated women's teams. Equality and diversity impact assessments have been carried out to support the implementation of 'sobriety tags'<sup>16</sup> with black, Asian and minority ethnic service users and with women. Equalities impact analysis were also completed in respect of new rehabilitation activity requirement (RAR) interventions.

Staff understand the operating model, although delivery of it is not consistent due to workload pressures. There was ample communication from senior leaders to support the introduction of the new operating model, 'Enabling our Futures'. The rationale for the introduction of the model is less clear to staff. Some supply chain providers told us that communication over the last 12 months has improved. Staff's understanding has started to improve regarding service user referral criteria for interventions.

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<sup>15</sup> See explanation of 'Enabling our Futures' operating model in Annexe 3.

<sup>16</sup> The Alcohol Abstinence Monitoring Requirement (AAMR) pilot involves service users wearing electronic 'sobriety tags', which monitor alcohol consumption. Courts can impose an AAMR as part of a community or suspended sentence order. HLNY was one of the pilot areas for using this innovative approach to tackling alcohol-related crime.

Some aspects of the operating model have been implemented to good effect; for example, the CRC has introduced enabling plans that promote service user involvement. Other key aspects of the model, such as the introduction of specialist teams — for example, to deliver interventions or to work with women service users — have not been implemented across the CRC for sound operational reasons, including ensuring that there is a sufficient number of staff in each local team. The impact of introducing a new operating model was well understood, and its implementation was appropriately tailored to suit the differing landscape in each local delivery unit.

	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.	Requires improvement	Requires improvement

Key staffing data <sup>17</sup>	Previous year	Current year
Total staff headcount (FTE)	Not available	213
Total number of POs or equivalent (FTE)	28.6	24.9
Total number of PSOs or equivalent (FTE)	69.8	77.7
Vacancy rate (total number of unfilled posts as a percentage of total staff headcount)	Not available	2%
Vacancy rate of PO or equivalent grade only (total number of unfilled posts as a percentage of total number of required PO posts)	0%	6.5%
Staff attrition (percentage of all staff leaving in 12-month period)	Not available	10%

<sup>17</sup> All data supplied as evidence in advance by the CRC in response to request for staffing data

<b>Caseload data</b>	<b>Previous year</b>	<b>Current year</b>
Average caseload PO (FTE) <sup>18</sup>	44	43
Average caseload PSO (FTE) <sup>18</sup>	<b>41</b>	<b>58</b>
Proportion of POs (or equivalent) in this CRC describing caseload as unmanageable <sup>19</sup>	69%	69%
Proportion of PSOs (or equivalent) in this CRC describing caseload as unmanageable <sup>19</sup>	63%	53%

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:

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

Staffing levels are insufficient. The period from which our case sample was drawn in the summer of 2019 was particularly problematic, with 25 per cent vacancies in case manager roles at the start of 2019. As a result of various recruitment campaigns, some of these vacancies were filled by the time the inspection sample was drawn, albeit these were new staff who were gradually building up caseloads, and a substantial number of vacancies remained. Even at full complement, the staffing profile is lean and does not provide any contingency for absences such as sickness or maternity leave. As a result, individual caseloads are too high.

There is limited capacity to respond to caseload demands due to financial constraints. Staffing levels are reviewed regularly, with staff deployed to try and meet local demand. During the summer of 2019, there was a real issue around high caseloads, particularly, but not exclusively, in Hull. Some responsible officers told us they felt that the focus during this time was on meeting targets and that quality inevitably dropped.

Sixty-six per cent of responsible officers are accountable for over 50 cases each, and only 43 per cent of those interviewed think their workload is manageable. While this is an improvement on both last year's inspection findings (35 per cent) and the year one aggregate for all CRCs (41 per cent), it is still too few in our view. Thirty-six per cent of PO-grade staff and 48 per cent of PSO staff have workloads that are greater than the local workload management tool target. Staff sickness levels are particularly high for POs.

Interchange managers (Senior Probation Officer, SPO, equivalent) are overstretched, with large spans of control. The introduction of an interchange support officer for each local delivery unit has helped to a limited extent, but this has not sufficiently alleviated pressures on middle managers. This impacts negatively on the time available for case-focused supervision. The lack of senior case manager capacity to

<sup>18</sup> Data supplied by the CRC.

<sup>19</sup> HMI Probation inspection data.

fully implement the potential 'added value' of their role (support to PSOs, mentoring etc.) has not provided the workload relief to interchange managers originally envisaged.

Local administrative tasks and processes are not consistent across the CRC. Where they are aligned from one office to another, greater flexibility for cover can be achieved. The administrative staff headcount is 28 FTE, with 24 in post and 4 FTE vacancies, which is a 9 per cent vacancy rate. Telephony problems with the Purple Futures professional services centre in Liverpool have made it difficult for service users on unpaid work to get through to report problems with attendance or other queries. This has led to extra pressure on local administrative staff. An alternative means for service users on unpaid work to contact their responsible officer directly has just been introduced.

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

The CRC has made significant efforts since the last inspection to upskill the workforce. However, we have not seen the knowledge imparted via training embedded in the practice we have inspected. Most staff have attended face-to-face training in managing domestic abuse risk of harm, and child safeguarding. Workload pressures appear to have prevented them from putting their knowledge and skills into practice.

The workforce does not adequately reflect the diversity of the local service user population. Initiatives to recruit from the local black and minority ethnic population, for example, by placing job advertisements in Polish in the local media, have not yet met with success. Seventy-three per cent of staff are female, compared with 17 per cent of service users; 2 per cent of staff are from the black and minority ethnic community, compared with 10 per cent of service users; and 9 per cent of staff have a declared disability, compared with 27 per cent of service users who are regarded as having a disability.

Fifty-nine per cent of responsible officers interviewed considered that they had been allocated cases for which they had the appropriate training and experience. This does not compare well with both last year's inspection findings (75 per cent) and with the year one aggregate findings for all CRCs (74 per cent). Cases are allocated through the 'banding and allocation tool' (BAT), which is operated by those working in the professional services centre. This process is flawed, in our view, particularly as it lacks oversight by local interchange managers. The BAT process results in most cases being allocated to the more prevalent staff group (case managers) and relies on the case manager knowing when and how to request reallocation to a senior case manager, if the initial allocation is inappropriate.

Volunteers and mentors are in place, and there are employment opportunities for both current and former service users (for example, with the Together Women Project, Offploy and at the Malton reporting centre). The unpaid work service in Lincoln has a mentor to assist with induction, and in Hull a former unpaid work mentor is now employed by the CRC. This was good to see.

Within the newly embedded 'Enabling our Futures' model, staff no longer work across generic case management and interventions roles. Roles are clearly defined into specialist ones (including women's, interventions, engagement and resettlement) and generic case management teams. Case coordinator roles are clear within offices but are not consistent across the CRC, and staff reported experiencing some difficulty with this. For example, in one location, appointment letters are sent by case coordinators; in another, they are sent by responsible officers.

Opportunities for staff progression are limited, due to the lean organisation structure. There are no black and minority ethnic staff and only 1 per cent of staff with a declared disability at SPO grade or above. There are limited routes for progression for administrative staff. We found that there was some tension between placement coordinators and unpaid work supervisors in one local delivery unit, in relation to understanding each other's roles and how they should best work in tandem.

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

Staff do not always receive case-focused supervision. We found management oversight to be effective in only 27 per cent of cases where it was needed. Enhanced management oversight has improved the line of sight from community directors and interchange managers to frontline practice, but it has not had the desired impact on improving the quality of work.

The induction programme is not effective for all new staff and its success is partly dependent on whether staff join the organisation as a group or individually. Staff induction lacks structure and is not always sequenced appropriately, assuming prior knowledge in some cases. There is less support for those who join individually. Induction does not work well for individually recruited staff because they must identify opportunities to shadow busy colleagues, pending be able to join an induction group.

Staff see appraisals as process-focused and perfunctory, and not specifically targeted on their development or on improving quality. Some responsible officers told us that appraisal consisted of general goals and objectives and that they *"did not get anything out of it"*.

Performance targets are monitored through the interchange assurance model (OPeN). There has been an active decision not to take formal action in relation to staff who have missed targets during the recent period of significant resourcing problems, in acknowledgement of already high workloads. Supportive measures and informal plans were put in place to assist staff where necessary. A CRC-wide quality manager and an HLNy quality officer (PO grade) are in place to help address performance issues.

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

Staff learning needs are identified centrally and plans to meet these needs, including through face-to-face training and e-learning, will be captured on a centralised system, 'I Learn', which will give reports of completion rates. There is a CRC-wide training plan and register, and a justice curriculum is in place for individual roles. ISOs keep a local register of completed training. Middle managers and staff told us that there are gaps in training in professional curiosity, motivational interviewing and basic ICT use.

The CRC does not currently provide access to pre-qualifying training (Level 3 Vocational Qualification in Probation Practice and the Professional Qualification in Probation, PQiP). We were concerned to find that recruitment adverts state that an essential requirement of those applying for case manager jobs is a willingness to undertake this training, which is misleading given the lack of access to this training, and might lead to unqualified staff being in place for the long term.

Most staff have accessed in-service training, although this has not translated into better service delivery. The quality of the training provided is a concern. The CRC lacks a discrete training team to deliver training sessions, which results in interchange managers needing to fill this gap by delivering centrally prescribed training packages. Although well attended, this training has not met the learning

needs of staff. Only 42 per cent of staff thought they had enough access to training to support the delivery of a quality service. This does not compare well with both last year's inspection findings (51 per cent) and the aggregate for all CRCs from our first year of inspections against the new standards (63 per cent).

Over half of the responsible officers interviewed did not think that the organisation promoted and valued a culture of learning and continuous improvement. The formation of a strong learning culture is hampered by high workloads. Some of the mandatory training is not seen as useful, for example, Interserve-specific manual handling training. Interchange managers run professional development events, which are well received by staff.

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

Despite workload pressures, staff across all grades and specialisms impressed us as being motivated to do their best for service users, and this appeared to be due to self-motivation and a strong sense of vocation. Sickness absence rates are high for senior case managers (24 days lost per year) and case managers (21 days). There has been some staff turnover in parts of the CRC, but the case manager (PSO-equivalent grade) workforce is relatively stable at 10 per cent attrition. The senior case manager (PO-equivalent grade) staff attrition rate is much higher, with 32 per cent leaving within the previous 12 months and not being replaced due to the reduced requirement for qualified staff under the new operating model.

Senior leaders have worked hard to improve staff engagement through a variety of communication channels, including the chief executive officer's blog, regular Q&A sessions, and 'Your Voice' focus groups, which have explored the disconnect between staff and senior leaders identified during last year's inspection. The 'Your Voice' staff engagement action plan is routinely monitored and acted upon, via the senior leadership team.

The 2019 'Your Voice' staff survey indicated that staff felt that their manager cared about them, and felt comfortable speaking up about health and safety issues. The average score given by staff was more than three out of five. Sixty-nine per cent said they had the tools to do the job and felt that their health and safety was taken seriously. Less positively, the average score given was less than three out of five for, staff felt like they knew what was going on in the wider business, felt listened to, felt able to do their job in the best way possible, and believed that leadership *"makes changes for the right reasons"*.

Many more staff this year told us that managers recognise exceptional work (51 per cent), compared with last year's low base (33 per cent). 'Anytime awards' provide a good mechanism for manager and peer recognition, and staff also value the direct feedback from visible leaders who regularly visit their office bases. Community directors were regarded by staff as approachable and supportive.

Appropriate controls are put in place to promote staff safety, although a culture of wellbeing is less well established. Personal alarms are issued, but are generally not well used, except by unpaid work supervisors. Staff are less positive about management attention to their wellbeing, which indicates concerns about the stress caused by high workloads.

Where reasonable adjustments are required, these are made in 83 per cent of cases. This compares favourably with both last year's inspection findings (50 per cent) and the aggregate figure for all CRCs (73 per cent). Adapted technology and adapted equipment can be accessed through HR, and we were told that there has been a recent improvement in response times to supply these.

Most vacancies are available to all grades, enabling potential progression from probation services officer to interchange manager, although this did not appear to be widely known. Interserve-wide vacancies are circulated, although there are very limited opportunities to progress. The number of Interserve secondment opportunities is now dwindling.

	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.	Requires improvement	Good

In making a judgement about services, we take into account the answers to 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>20</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%	0%
Proportion of inspected cases with a disability	49%	51%
Proportion of inspected cases where inspectors identified substance misuse problems	72%	84%
Proportion of inspected cases where inspectors identified domestic abuse issues	41%	47%
Proportion of inspected cases where inspectors identified child safeguarding issues	32%	38%

The reoffending data tool (RDT) provides a comprehensive analysis of those presenting the highest risk of reoffending. The data is segmented to helpfully provide a picture of offending-related need, risk of harm and diversity factors. A comprehensive needs analysis is in place, undertaken in spring 2018 and supplemented by local analysis in spring 2019. This informs partnership work in a

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

variety of forums. Staff's views on local service users' needs supplement the wealth of information produced via the RDT. The CRC uses data from the RDT to good effect, for example to help define the integrated offender management (IOM) cohort in parts of the CRC.

Data from the RDT can be segmented by protected characteristics; this has informed the commissioning of services for women. The CRC is aware that there is some incomplete recording on the national case management system (nDelius) but has plans to rectify this. 3SC<sup>21</sup> manages supply chain contracts to support service delivery and collects data on race and gender, although there are no specific services for black and minority ethnic service users. Women's provision has been reviewed and the reasons for the low take-up of services in some locations are being explored.

The CRC has a good understanding of offending patterns and services are appropriately targeted. Local patterns of offending are well understood, and interventions are targeted to meet specific needs, for example, addressing acquisitive crime and low-level violence in the female offender cohort. Needs analysis also informs the provision of pathways interventions in HMPs Hull, Humber, Lincoln, Askham Grange and North Sea Camp.

Analysis is used effectively to target services. The RDT looks at the reasons for offending and identifies interventions required to address it. For example, it identified that there was a lack of offence-focused interventions specific to women. The 'Better Solutions', 'Managing my Emotions' and 'Star' RARs have been adapted for women and are now being delivered by Humankind and the Together Women project. Lincolnshire Action Trust planned to commence delivery of these in February 2020. The RDT also identified the need for continued mentoring via Empower/ONGO, particularly in the Scunthorpe area.

**Does the CRC provide the volume, range and quality of services to meet the needs of the service users?<sup>22</sup>**

The CRC delivers accredited programmes, including Building Better Relationships (BBR) and the Thinking Skills Programme (TSP). It also provides structured interventions delivered as part of RARs.

	<b>Previous inspection</b>	<b>Current inspection</b>
Average waiting time for BBR	Not available	28 weeks
Average waiting time for TSP	Not available	24 weeks
Average waiting time for RAR	Not available	4–8 weeks for most service users
Successful completion BBR	80%	92%
Successful completion TSP	59%	50%

<sup>21</sup> 3SC is a partner in Purple Futures with responsibility for managing the supply chains of delivery organisations that provide rehabilitative and probation services across the five Purple Futures CRCs.

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

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Successful completion of RAR

66%

61%

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A good range of services are theoretically available to meet offending-related needs – though actual delivery is variable. Four accredited programmes are available, together with a range of RARs. These are not extensively used, however. This is due primarily to vacancy rates within the interventions team and workload pressures, leading to low referral rates.

Brief interventions are not delivered as originally planned under the new model. Services to reduce reoffending were delivered in less than half of inspected cases (47 per cent), although the provision for women was better (55 per cent). Services designed to promote employability are strong, but those for accommodation are less so. Drug and alcohol treatment services are hindered by a lack of consistent and effective information exchange.

#### Good practice example

The Alcohol Abstinence Monitoring Requirement (AAMR) pilot was delivered over a two-year period, allowing courts to impose a requirement of alcohol abstinence for 120 days. The assessment process was completed at pre-sentence stage, using the alcohol audit tool and professional judgement from NPS court staff.

- Very few service users refused to engage with the requirement.
- The service user's alcohol use was monitored by a 'sobriety tag' that detected alcohol use through sweat. The device could also detect environmental factors, for example, a service user being in a public house and not necessarily directly consuming alcohol.
- CRC staff (case managers and senior case managers) were trained to fit the tags and monitor compliance via a dashboard system. Alerts included alcohol consumption, environment and tampering. Responsible officers also found this process helpful for monitoring other risks.
- Communication between CRC and NPS staff was supported by regular steering groups.
- 94 per cent of service users successfully completed the requirement, and the government has announced that the pilot will now be rolled out nationally.

Services for women have been reviewed, which has led to an improved service offer. Streamlining of assessment between the CRC and providers of women's services has led to a more efficient approach and better trauma-informed practice. The 'Managing my Emotions' rehabilitation activity requirement has been adapted for women, and unpaid work instructions have been translated into other languages or are communicated via pictures.

#### Good practice example

Hull Together Women is a women's centre in the city centre, with two case managers and one senior case manager based at the project. A variety of services are delivered on site, including drug and alcohol services, independent domestic violence advice, counselling,

mentoring training and housing. Facilities include shower amenities, a clothing bank, confidential interviewing rooms and enough work space and IT equipment for all staff.

Programmes delivered include:

- freedom programme (to learn about domestic abuse)
- anger management
- parenting (nurturing families) – includes parents who are not living with their children
- adverse childhood recovery – to support women to recover from traumatic childhood experiences
- RARs, which are delivered by the providers following training by the CRC facilitators.

Ongoing support is offered to women service users via the volunteer mentor scheme.

Services are made accessible to service users through an extensive network of community hubs, which span the large geographical area covered by the CRC to help with the challenges of rural locations. Services to women service users are made accessible through a mixed portfolio of arrangements, including: a dedicated centre in Hull; outreach into East Riding through hubs/room hire; co-location with Women's Aid in Grimsby; a dedicated female-only day a week in Scunthorpe; one day a week co-location in the Lincolnshire Action Trust (LAT) offices in Lincoln; women-only room hire in Boston; and outreach in Skegness. Service users are offered transport or one-to-one working as appropriate to their needs.

Evaluation of interventions is sparse, although we found that amenities for women are closely monitored and plans are put in place to improve delivery where necessary. There is an action plan to increase referrals to the women's services provided by Humankind in North Yorkshire. The plan includes actions agreed for the CRC and the provider.

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

The CRC enjoys excellent relationships with partner agencies, including police and crime commissioners. These well-established relationships foster a well-informed and multi-agency approach to identifying and addressing offending-related needs. Sound, well-established relationships with partners and those in the supply chain support desistance. These relationships have led to innovations such as: the piloting of sobriety tags; a police-led initiative 'Assisting Rehabilitation through Collaboration', which targets repeat offenders in Lincolnshire; and the Together Women project.

Relationships with the police and children's social care services have recently improved to better facilitate information exchange to manage the risk of domestic abuse and promote child safeguarding. CRC staff are engaged in a pilot with the NPS with two staff running group work interventions to support service users to change in each local approved premises in Hull and Lincoln. Formal risk escalation is sometimes missing, with CRC staff seemingly lacking the professional confidence to challenge risk assessment decisions made by their NPS counterparts.

Courts are provided with rate card information to support their decision-making, although feedback from the judiciary indicates that despite the best efforts of the CRC, sentencers appear poorly informed about the range of available services. The CRC has worked hard to establish a consistent presence across courts in the area.

Liaison in North Yorkshire is good, but Humberside and Lincolnshire have only recently included the CRC in sentencer forums.

### **Service user involvement**

The CRC works in partnership with User Voice, a national charity to support offenders as they progress through the criminal justice system. User Voice is led and delivered by service users and operates through service user councils, which are structured meetings where service users and HLNy staff meet to discuss how to improve services. The councils meet regularly in each local delivery area. The CEO attends council meetings.

Some service user suggestions have been acted upon. The group members that we met told us that most items discussed at the service user council were what they considered to be basic requests. These included consistencies of responsible officer, planned appointments, resources, recognition, integrated work with other agencies, home visits, and a simplified explanation of the sentence and requirements.

Service users also told us that they do not fully understand the purpose of their sentence plans or how these are reviewed. They find that information is quite often too overwhelming at the start of the sentence, and they often do not understand the terminology used by staff. They would also appreciate a better exit plan, with more support. In their experience, the majority of first appointments are very brief and they leave with little knowledge of what is going to happen during their sentence. Some service users also reported that some people do not know the difference between the CRC and the NPS.

Outcomes from council meetings included an action to display posters informing service users about future organisational changes. As a result, posters have been placed throughout the Hull building informing service users of the upcoming changes. Some service users were aware that responsible officers have high workloads, and felt some staff were not experienced. They also found it a struggle to build relationships with responsible officers because of the limited appointments (monthly).

We asked the service users who we met to pick something they would change, and they told us:

| *“Responsible officers should keep appointments and stick to what they promise”.*

| *“Recognition [for our achievements] doesn’t happen”.*

| *“A lack of communication”.*

| *“More resources and work with other agencies”.*

A recruitment and selection process operates to appoint current and ex-service user volunteers and mentors. This activity is underpinned by role descriptions and supervision/support, in addition to a package of training and development.

Peer mentoring works well in Lincoln, although the numbers recruited in Hull, York and Grimsby have fallen recently. Peer mentoring can offer a route into paid employment, and service users have taken up such opportunities with Offploy in Hull, the Together Women project in Hull and in the Malton reporting centre.

We spoke to 18 individuals whose cases we inspected. Most said that their responsible officer asked about things relevant to their offending, and that their views were considered when planning what would be done during their order or licence. All

said that they had received the help they needed to keep out of trouble. One service user told us: *“Everyone there is great, spot on”*. And another: *“I can’t big them up enough”*.

We also met with four service users in the Selby office. The views reported to us were largely positive. One said that she felt able to be honest with her responsible officer about how she was feeling but that there was no support for dealing with mental health issues. Another described the service he had received as *“brilliant”*, though he felt that support from probation would not be forthcoming. Another described his case manager as:

*“Respectful, willing to be flexible [appointments arranged around his work commitments], understanding, sympathetic, a good listener, motivating and interested in my life not just me as a criminal”*.

### **Unpaid work**

The delivery of unpaid work is good, although the unpaid work operating model does not fully support effective service delivery for all service users. Some projects provide meaningful work, such as horticultural projects in Lincolnshire. There are pockets of good practice to enable service users to develop employment-related skills, such as Academy 3:13 in York. However, many service users do not have enough access to opportunities to develop such skills.

The professional services centre, the central Purple Futures call centre in Liverpool which deals with calls from service users, does not provide continuity of contact for them and is not sufficiently sensitive to individual needs and risks. Unpaid work staff expressed their frustration with the level of administrative errors, timeliness of letters and allocation to incorrect areas by the centre. There are also difficulties with the professional services centre referring service users to the right local support services, due to the remote nature of this process.

The unpaid work operating model takes sufficient account of diversity factors, for example: by putting Eastern European service users into suitable individual placements in Lincoln; using language flashcards; and supervisor access to a professional translation and interpreting service. A female peer mentor is present at the unpaid work induction in North Lincolnshire, which is good practice.

Staffing levels do not sufficiently support the delivery of a high-quality service to all unpaid work service users. Unpaid work staff told us that insufficient staffing levels are leading to a higher number of stand-downs in some parts of the CRC, and an inability to offer extra days or intensive working for unemployed service users as required. Middle managers’ workloads are too high, which is detrimental to staff engagement.

The unpaid work induction observed by inspectors did not make the opportunity to learn employment-related skills sufficiently clear to participants. Induction staff were pro-social and welcoming to service users. We observed an induction delivered by three male members of staff to one female service user, which was of concern. Health and safety and rules were clearly explained through a standard video and then recapped for understanding during the one-to-one interview. The unpaid work presentation was displayed with West Yorkshire CRC logos rather than HLNY. Some aspects of the visual presentation, for example, the sharing of work boots, no longer applied, as practice guidance had changed. This needs to be updated.

## Through the Gate

The delivery of Through the Gate services is outstanding. The integrated Through the Gate vision and strategy support effective delivery of a high-quality service to service users. There are good relationships between prison resettlement governors and CRC resettlement workers. The additional resource provided by the new operating model has created greater capacity to dedicate time to ensuring individuals access services; for example, GP appointments are made for the day after release.

Intensive support is provided to prisoners with the most complex needs through high intensity Through the Gate officers. The delivery of services to female service users is well integrated at HMP Askham Grange. The 'Reality of Release' programme in HMP Humber is delivered to all service users, either in a group or one to one. Service users' attendance at discharge boards provides an opportunity to discuss release plans and transitional appointments in the community.

There is an appropriate focus on addressing the diversity needs of 18–25-year-olds in HMPs Hull and Humber. These service users are typically subject to a high number of adjudications and Assessment, Care in Custody and Teamwork self-harm management reviews, shorter sentences, and frequent churn. An OASys assessment system maturity tool is being piloted with service users with the most complex needs, to work closely with them, their key workers, and prison offender managers to track what interventions need to take place. CRC support is provided in the 12 weeks before release and this is well coordinated.

Implementation of learning and development for resettlement staff has been slow and has varied according to prison establishment. Fragmented recruitment into this role has meant that a coherent training approach has not been delivered. Evaluation of interventions is hampered by the lack of resourcing allocated to this task (with one person to cover all five Interserve CRCs).

Integrated Through the Gate relationships with providers and agencies are well established and used effectively to deliver high-quality services to service users. Integrated Through the Gate is represented on the Hull and East Riding Community Safety Partnership Boards. Key partners include the Fire and Rescue Service, which shares information and provides support to reduce the risk of arson offences. Monthly Skype calls are held with resettlement managers, which supports service integration between custody and the community.

	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.	Requires improvement	Good

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?**

Policies are well communicated to staff through a variety of channels, including practice briefings. There is a need for more proactive review of existing policies. We found legacy Probation Trust policies still in place in relation to some HR issues, such as disciplinary procedures, which as a result still vary across the CRC. Policies and guidance are stored centrally and are accessible via the local intranet, Wisdom. Some staff reported that they struggle with a less-than-intuitive search function. National and CRC-wide policies are converted into easy-to-read practice briefs to aid busy frontline staff; staff appreciate these.

Service users are kept informed about major changes in policy, for example, the introduction of ‘Enabling our Futures’. Similarly, external partners, such as police and crime commissioners and community safety partnerships, are kept well informed of such changes. They were, for example, fully briefed on the outcomes from last year’s inspection and the resultant action plan. This transparency is welcome. Over three-quarters of responsible officers interviewed confirmed that there is a clear policy about case recording, and recent practice development events on the quality of RARs included a focus on case recording.

The rate card brochure has been routinely updated over the past 12 months and reflects the available services in line with NPS commissioning intentions. Some sentencers have not seen the rate card, and staff have been waiting too long for a service directory, although they do have ready access to an interventions schedule.

The interface policy between the CRC and NPS dates to the onset of *Transforming Rehabilitation* in 2015 and has not been updated since. Regular interface meetings are in place, although the rate of commissioning by NPS remains low, and formal risk escalation processes are underused. The introduction of the court application team, which has exclusive responsibility for making formal requests to courts, has improved processes and the quality of breach procedures and other enforcement. The proportion of breach reports rejected by the NPS is reported to have reduced from 50 per cent to 20 per cent.

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

There is good access to offices for both staff and service users due to the decision to operate from community hubs throughout the CRC area. Accommodation in the main offices is bright and contemporary. There is a broad range of community hubs, which

improves accessibility to services. Transport is provided on a one-to-one basis for those service users living more remotely.

There is enough access to confidential interviewing space for personalised work with service users. Some service users prefer to be seen in open-plan areas, and their request is accommodated when appropriate. The hubs are more accessible and less stigmatising for service users, but offer less opportunity for confidential interviewing space, with activities sometimes clashing with other community events.

Premises and offices generally appear safe, although responsibility for health and safety at the community hubs has been devolved to busy interchange managers. Health and safety monitoring arrangements are therefore less robust than in the main offices.

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

Practitioners are provided with laptops and mobile telephones, which support timely access to information and enable remote working when required. ICT systems have improved since our last inspection due to a structured approach to working with the software provider, Sopra Steria, to resolve difficulties. Some outages do still occur. New staff wait too long to receive ICT hardware, and this impedes service delivery.

Information exchange protocols are in place and monitored by dedicated staff. The police generally share domestic abuse call-out information, and there is good practice regarding safeguarding enquiries in Hull, where a dedicated probation practitioner attends a local authority office to access information directly. Safeguarding information is readily shared in Yorkshire, aided by co-location in local authority buildings.

There has been continuous improvement in arrangements for information-sharing across the CRC. Some external partners have direct access to nDelius, but not all. Where access is not in place, there are arrangements for transferring information via secure email. These arrangements are not well used by agencies that provide services to those on drug rehabilitation and alcohol treatment requirements, which leads to omissions and delays in exchanging information. A wealth of management information is available and put to good use, such as being presented to partners to inform decisions on commissioning.

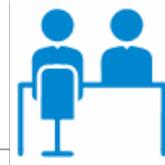
### **Is analysis, evidence and learning used effectively to drive improvement?**

Senior leaders demonstrate a nuanced understanding of performance, although their claim to be focused on quality was less visible to hard-pressed staff. Staff consider that management information systems focus more on achieving performance targets than quality. Our case inspection findings support this view. Only one-fifth of responsible officers interviewed thought their service prioritised quality.

Potentially good management oversight systems are in place, including enhanced management oversight and the interchange quality assurance model, although these have not yet led to tangible improvements in our inspection ratings for the quality of case supervision. Performance information is readily available to staff through OPeN, which enables them to track actions required. Some use of this is made to offer support to colleagues if required.

Links are in place with leading criminal justice academics to support the development and evaluation of interventions. Service user councils are in place across the CRC. Key stakeholders have limited influence over service delivery, due to the centralised nature of the Interserve model.

There is a systematic, but not fully embedded, approach to learning from serious further offences, domestic homicide reviews, serious case reviews, safeguarding adults reviews and a recently published modern-day slavery review. While the focus on learning is commendable, the ambition to improve the quality of work has yet to be fully reflected in improved practice. In some circumstances, risk escalation forms are not routinely completed if, following a verbal discussion, the NPS declines to accept the escalation of risk. The CRC has told us that it is putting plans in place to address this.



## 2. Case supervision

We inspected 67 community sentence cases and 46 post-release supervision cases; interviewed 61 responsible officers and 18 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 93 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.

We found that, while assessment focused sufficiently on engaging the service user and on the factors linked to offending and desistance, the degree to which assessment focused on keeping other people safe was 'Inadequate'. This represented a deterioration since our 2018 inspection, when we rated assessment as 'Requires improvement'. We found a mixed picture in relation to planning, which focused well on engaging the service user, although planning concentrated on reducing reoffending and supporting desistance for too few service users. Planning to keep others safe was inadequate.

There was good implementation of the sentence/post-custody period, with a focus on engaging the service user. Services to support desistance were delivered to too few service users, and services to support the safety of other people were delivered to even fewer. This was not significantly different to our 2018 findings. Reviewing of cases focused on supporting the compliance and engagement of a reasonable majority of service users, although reviewing did not support desistance for enough of them. Reviewing of work needed to keep others safe was inadequate.

### Strengths:

- Good efforts were made to enable the service user to complete the sentence, and to re-engage the service user after enforcement actions or recall.
- Planning took good account of the service user's diversity and personal circumstances.
- Written reviews were completed as appropriate as a formal record of the progress towards desistance.
- There was good assessment of the service user's diversity and personal circumstances.

### Areas for improvement:

- Only a small number of home visits to service users were undertaken where these were necessary.
- Not enough plans set out necessary contingency arrangements to manage the risks that had been identified.
- Only a minority of service users were meaningfully involved in reviewing their risk of harm.
- Enough attention was given to protecting actual and potential victims in less than half of service users' cases.

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

**Our rating<sup>23</sup> for assessment is based on the percentage of cases we inspected being judged satisfactory against three key questions:**

Comparison with Humberside, Lincolnshire & North Yorkshire in previous inspection and all CRCs	Previous inspection	Current inspection	All CRCs <sup>24</sup>
Does assessment focus sufficiently on engaging the service user? <sup>25</sup>	78%	68%	68%
Does assessment focus sufficiently on the factors linked to offending and desistance? <sup>25</sup>	72%	65%	63%
Does assessment focus sufficiently on keeping other people safe? <sup>25</sup>	58%	<b>46%</b>	55%

The CRC was rated 'Inadequate' for assessment, as the lowest score for the key questions was only 46 per cent of cases that we inspected being satisfactory for assessment to keep other people safe. Although assessment practice to engage the service user and focus on the factors linked to offending was good, the focus on keeping other people safe fell short of the 'Requires improvement' threshold.

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

There was good analysis of the service user's motivation and readiness to engage and comply with the sentence. Responsible officers engaged service users with the assessment process, including through the self-assessment and induction forms completed by service users. Assessment records detailed the service users' level of motivation and capacity to address their offending behaviour.

A reasonable majority of assessments analysed the service user's diversity and personal circumstances, although too few assessments considered the impact these have on their ability to comply and engage with service delivery. Assessments engaged service users and took account of work patterns and child contact arrangements.

<sup>23</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>24</sup> HMI Probation inspection data, from inspections conducted between June 2018 and June 2019.

<sup>25</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.

More than two-thirds of service users were meaningfully involved in their assessment and their views considered. Enabling plans are completed by service users, which supports them to identify what they need to do to address their offending behaviour. Service users complete the plans at the beginning of the court order, which encourages them to identify their aspirations and strengths.

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

A reasonable majority of assessments identified offending-related factors, although too few assessments were thought through. The most important factors linked to offending were: thinking and behaviour; lifestyle, including friends and associates; attitudes to offending; family and relationships; and alcohol misuse. We found evidence of key factors being prioritised, for example, the need to address substance misuse before looking for employment.

A good number of assessments identified the service user's strengths and protective factors; the most important of these were family and relationships, motivation to change and employment. Other areas identified as protective factors included motivation to gain employment, a positive work ethos and the individual's employment history.

Just over half of assessments drew sufficiently on available sources of information, although there were some gaps in information relating to historical offending, for which there was information in previous OASys assessments. Some assessments drew sufficiently on information from agency contacts and service users' family members.

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

A minority of assessments clearly identified and analysed any risk of harm to others. More effort was needed to obtain details where service users were in contact with children, to inform the assessment of risk of serious harm. Too few assessments identified who was at risk and the nature and level of the risk. Some assessments appeared to be 'light touch' and could have explored the nature and likelihood of risk of harm in much greater detail.

An inadequate number of assessments analysed specific concerns and risks related to actual and potential victims. We found concerning gaps in information relating to the risk of serious harm. This means it cannot be evidenced that all assessments focused sufficiently on keeping others safe. Some Spousal Assault Risk Assessments (SARAs) were insufficient, giving very little narrative in terms of the assessment and patterns of domestic abuse behaviours.

#### **Poor practice example**

Although checks were made with children's services in the early stages of Dean's court order, and it appeared that there was current involvement with children's services, there is a lack of information as to the nature of children's services' involvement. Clarification of this was not sought by the responsible officer. The responsible officer needed to inform children's services of the index offence and the fact that the service user was known to be having contact with several of his partner's children. However, this was not carried out, because the responsible officer assumed that children's services were already aware of it.

Less than half of assessments drew sufficiently on available sources of information and involved other agencies where this was appropriate. We came across examples

where police domestic abuse and safeguarding checks had not been undertaken in a timely way as required. Too few assessments of risk of harm took account of past behaviour and convictions. On some occasions, child safeguarding information contained within assessments was inaccurate; it had been taken from past records rather than current information. Although police checks were frequently initiated, they were not always followed up when no response was received.

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

**Our rating<sup>26</sup> for planning is based on the percentage of cases we inspected being judged satisfactory against three key questions:**

Comparison with Humberside, Lincolnshire & North Yorkshire in previous inspection and all CRCs	Previous inspection	Current inspection	All CRCs <sup>27</sup>
Does planning focus sufficiently on engaging the service user? <sup>28</sup>	74%	72%	63%
Does planning focus sufficiently on reducing reoffending and supporting the service user's desistance? <sup>28</sup>	63%	54%	64%
Does planning focus sufficiently on keeping other people safe? <sup>28</sup>	54%	<b>42%</b>	46%

A reasonable majority of plans focused sufficiently on engaging the service user. This is significantly better than the average for all CRCs in our previous round of inspections. Too few plans focused sufficiently on reducing reoffending and supporting the service user's desistance, and this is significantly less than the CRC average. A minority of plans focused sufficiently on keeping other people safe.

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

A reasonable majority of plans involved the service user sufficiently, and a large majority took service users' views into account. Enabling plans were completed by service users, with responsible officers' input. This was a good way of involving service users in planning. Service users also completed induction paperwork at initial meetings, including a 'Where am I now?' self-assessment and equality information.

<sup>26</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>27</sup> HMI Probation inspection data, from inspections conducted between June 2018 and June 2019.

<sup>28</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.

We found evidence in enabling plans that the service user's viewpoint was reflected within the objectives set.

Too few plans took account of service users' diversity and personal circumstances that may have affected engagement and compliance. Plans recognised potential barriers to engagement, including literacy needs. In one such case, the plan set out the consequent need to clearly explain restrictive conditions, such as restraining orders, and the need for compliance with any child safeguarding stipulations.

Almost three-quarters of plans took account of the service user's readiness and motivation to change that may have affected engagement and compliance. Plans took good account of service users' aspirations, for example, to gain employment, address their drug or alcohol misuse, or access support for mental health difficulties.

#### Good practice example

The plan for Emily worked on helping her to resettle into her community as a new parent. Emily had felt that it was important to stay away from previous associates who had led her to offend, and wanted to be a positive role model as a new mum. Planning with Emily focused on the things that were important to her, including getting help to find work and making new friendships to reduce the risk of reoffending.

A reasonable majority of plans set out how all the sentence or licence/post-sentence supervision would be delivered within the available timescales. Inspectors saw plans that were personalised and took account of the service user's circumstances and aspirations. Interventions were planned with consideration for the service user's assessed level of motivation to change.

Just over half of plans set a level, pattern and type of contact that was enough to engage service users and to support the effectiveness of specific interventions. We found evidence of responsible officers writing to service users in custody to introduce themselves, and outline the requirements of both licence supervision and post-sentence supervision.

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

Too few plans sufficiently reflected offending-related factors or prioritised those that were most critical. Some responsible officers identified the main desistance areas in their OASys assessment and in case management records to be addressed during the sentence. These included alcohol misuse, accommodation, lifestyle, and associates and relationships.

A reasonable majority of plans built on the service user's strengths and protective factors, to encourage use of potential sources of support. Protective factors included identifying access to veterans' support projects linked to service users' time in the armed forces. Family support, employment and motivation to desist from further offending were also identified as strengths.

More than half of plans set out the services most likely to reduce reoffending and support desistance. Responsible officers discussed supportive services, including the 'Changing Lives' drug treatment service, and how interventions could assist service users to reduce reoffending. Plans were not always clear, for example in relation to the role of integrated offender management in coordinating services.

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

Only a minority of plans sufficiently addressed risk of harm factors and prioritised those that were most critical. Plans focused primarily on desistance, although some did identify support, for example through the APM ‘enabling better lives’ organisation, which provides a range of services, including employment support services, mental health input and constructive interventions to address harm. Liaison with the police domestic abuse unit and children’s safeguarding were appropriately identified, and home visits were recognised as a risk management strategy for only a small number of service users.

An inadequate number of plans set out the necessary constructive and/or restrictive interventions to manage the risk of harm. Inspectors saw plans where there were no specific approaches to monitor service users’ compliance with restraining orders. We also saw plans where information from local authorities about statutory arrangements to protect children was missing.

Too few plans made appropriate links to the work of other agencies involved with the service user and any multi-agency plans. This was a significantly more negative picture than in our last inspection. Planning arrangements could have been enhanced with more detailed risk management plans, including arrangements to gather information from the police, and victim safety arrangements

Less than one-third of plans set out necessary and effective contingency arrangements to manage the risks that had been identified. This represented a significant decline on our previous findings. Planning to address domestic abuse issues was adequate in only a minority of cases, and there was planning to address child safeguarding or child protection issues in too few cases. Contingency planning was poor and, in some cases, lacked the contact details of those required to carry out actions.

	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	Inadequate

**Our rating<sup>29</sup> for implementation and delivery is based on the percentage of cases we inspected being judged satisfactory against three key questions:**

Comparison with Humberside, Lincolnshire & North Yorkshire in previous inspection and all CRCs	Previous inspection	Current inspection	All CRCs <sup>30</sup>
Is the sentence/post-custody period implemented effectively, with a focus on engaging the service user? <sup>31</sup>	73%	71%	70%
Does the implementation and delivery of services effectively support the service user's desistance? <sup>31</sup>	48%	47%	52%
Does the implementation and delivery of services effectively support the safety of other people? <sup>31</sup>	40%	<b>38%</b>	41%

A reasonable majority of sentence/post-custody periods were implemented effectively with a focus on engaging the service user. Delivery of services to support the service user's desistance effectively was inadequate. And in only just over one-third of cases did implementation and delivery of services effectively support the safety of other people.

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

A reasonable majority of sentence requirements started promptly, or at an appropriate time. We found that unpaid work was suitably prioritised. In some cases, there was appropriate sequencing of other interventions, such as RARs, because responsible officers were attentive to the personal circumstances of service users, including taking account of employment and child care commitments.

There was a good focus on maintaining an effective working relationship with service users. We found evidence within case records and from speaking to responsible officers of a strong focus on building an effective working relationship with service users. There was an emphasis on building trust with service users through ensuring sensitivity and support to help engage them to make positive changes.

Outstanding efforts were made to enable service users to complete their sentence, including flexibility to take appropriate account of their personal circumstances. Some service users initially presented as not wanting to engage or address certain aspects of offending behaviour. Inspectors found good examples of responsible officers persevering with building relationship with service users. Work commitments were considered in terms of service delivery, and some responsible officers regularly texted service users to remind them of appointments.

Contact with prisoners before release was sufficient in too few cases. While some case records provided information on engagement with service users before release,

<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 by bold in the table. See Annexe 2 for a more detailed explanation.

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

there were too many cases where the responsible officer had no direct contact with them. Some responsible officers told us that time constraints had a negative impact on their capacity to undertake prison visits, despite the implementation of enhanced Through the Gate.

We found good identification of risks of non-compliance and actions to address these promptly to reduce the need for enforcement action. Responsible officers encouraged engagement, and responded appropriately to non-compliance with warnings and engagement work. Service users' goals were used to encourage compliance; for example, commitment to find employment was discussed with service users to increase their motivation to make positive changes.

Appropriate enforcement actions were taken in less than two-thirds of the cases that inspectors assessed. We found some examples where service users missed multiple appointments due to employment commitments, and the absences were accepted without verification by the employer. Enforcement action should have been taken as soon as a pattern of non-compliance began to emerge in these cases.

Outstanding efforts were made to re-engage service users after enforcement actions or recall. Responsible officers maintained engagement with service users, including setting clear boundaries around expectations and consequences, which supports compliance. We also came across examples of home visits to seek to re-establish contact with service users who had ceased engaging with the CRC.

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

Services likely to reduce reoffending and support desistance, with enough attention given to sequencing and the available timescales, were delivered to a minority of service users. Too few services were delivered to address accommodation, and education, training and employment needs. Delivery of services to address alcohol misuse, drug misuse, lifestyle issues, problematic thinking and behaviour, family and relationship issues, and attitudes to offending was inadequate.

In relation to work to build on protective factors, delivery of services to build on non-criminal identity and having a place within a social group was outstanding, and services to build on employment and motivation to change were good. Services to improve family and relationship support required improvement. Responsible officers referred service users to relevant accredited programmes, such as Building Better Relationships to build upon their motivation to change.

We found good examples of liaison between responsible officers and their unpaid work colleagues. This enabled one service user to change from a work group to an individual placement, to better fit their skills and interests.

The involvement of other organisations in delivering services was sufficiently well coordinated for only a minority of service users. This was a significant deterioration from our 2019 inspection findings. Inspectors found a lack of consideration and support for recovery from substance misuse, and this impacted on the planning and delivery of the further work that was needed.

Key individuals were engaged in less than half of the service users' lives, where this would have been appropriate to support their desistance. The implementation and delivery of services had not effectively supported desistance. More priority should be given to contact with service users' families, for example, through home visits from the initial stages of release.

Too few service users had the same responsible officer assigned to them from the start of their order. The level and nature of contact with service users were

insufficient to support reduced reoffending and desistance. Referral to RAR programmes was not made quickly enough and this was often due to a delay in the programme being offered.

Local services were engaged to support and sustain desistance during the sentence and beyond for too few service users. Responsible officers reported that they tried to obtain feedback from the Changing Lives drug service about service users' drug treatment but had been unsuccessful. We found that there was a long delay in receiving feedback from some other service providers.

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

The level and nature of contact offered were enough to manage and minimise the risk of harm for only a minority of service users. There was insufficient focus on addressing risk of harm in one-to-one supervision, for example, through structured work to address relationships. Time spent with service users in supervision often focused on a 'catch-up' on personal circumstances rather than on delivering any offence-focused interventions.

Insufficient attention was given to protecting actual and potential victims. We found some good efforts to manage risks to victims of domestic abuse, although the police did not respond to some checks that were sent to them and this was not followed up. Inspectors found a lack of an inquisitive approach around victims and children, including a lack of review of child safeguarding information.

Involvement of other agencies in managing and minimising the risk of harm was sufficiently well coordinated for less than half of service users. This was a significant deterioration on last year's inspection findings. While MARAC to support victims of domestic abuse was evidenced in some contact records, we found insufficient requests for information from the police to check the behaviour of service users involved in these cases. We also found some delays in communication with children's services to inform child safeguarding.

Inspectors found evidence that key individuals in service users' lives were engaged in only a minority of cases where this would have been appropriate to support the effective management of risk of harm. This was a significant decline since last year's inspection. More home visits would have assisted engagement with service users' families.

Home visits were undertaken in only a quarter of cases where they were necessary to support the effective management of risk of harm. This practice too had significantly waned since our last inspection. Opportunities to conduct home visits were not taken often enough when they would have been beneficial to monitor risks. Home visits shortly after release from custody would also have been helpful to promote compliance.

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

**Our rating<sup>32</sup> for reviewing is based on the percentage of cases we inspected being judged satisfactory against three key questions:**

Comparison with Humberside, Lincolnshire & North Yorkshire in previous inspection and all CRCs	Previous inspection	Current inspection	All CRCs <sup>33</sup>
Does reviewing focus sufficiently on supporting the service user's compliance and engagement? <sup>34</sup>	65%	70%	65%
Does reviewing focus sufficiently on supporting the service user's desistance? <sup>34</sup>	60%	60%	60%
Does reviewing focus sufficiently on keeping other people safe? <sup>34</sup>	53%	<b>42%</b>	44%

Reviewing focused sufficiently on supporting compliance and engagement for a reasonable majority of service users. Too few service users were meaningfully involved in reviewing their progress and engagement. Reviewing focused sufficiently on keeping other people safe for only a minority of service users.

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

Reviewing considered compliance and engagement levels and any relevant barriers in a reasonable majority of cases, although adjustments were made to ongoing plans of work in too few cases where this was needed. There was good liaison with unpaid work in terms of working commitments.

Just over half of service users were meaningfully involved in reviewing their progress and engagement. Inspectors found examples of inclusive reviews of sentence plans, which considered progress made and motivation issues around compliance, with amendments made to reflect progress and work being carried out to address key remaining areas of concern.

For a reasonable majority of service users, written reviews were completed as appropriate as a formal record of actions to implement the sentence. Enabling plans were helpfully reviewed, taking account of changes in personal circumstances, such as in health conditions and employment commitments. We saw examples of sentence plan reviews that were an improvement on initial plans.

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

Too few reviews identified and addressed changes in factors linked to desistance and offending, or made necessary adjustments to the ongoing plan of work. Some review assessments contained minimal information and lacked analysis. Desistance factors were not always adequately identified, for example, service users' triggers for offending, such as problematic thinking, behaviour and attitudes.

<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 between June 2018 and 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.

A reasonable majority of reviews focused on building upon the service user's strengths and enhancing protective factors. Reviews highlighted the progress made by service users towards changing their behaviour and achieving desistance. Additional areas of need were identified, and plans amended accordingly.

Less than two-thirds of reviews were informed by the necessary input from other agencies working with the service user. More input should have been sought from partner organisations, such as Offpoy around progress with education, training and employment, and there were significant delays in obtaining feedback from drug treatment providers.

A large majority of written reviews were completed as appropriate as a formal record of the service user's progress towards desistance. Responsible officers appropriately added new sentence plan objectives, such as monitoring of drug use, and acknowledged the progress made towards desistance, for example, securing employment and/or independent accommodation.

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

We found too few cases where changes in factors linked to risk of harm had been reviewed. Necessary adjustments were made to ongoing plans of work in only a minority of cases. We would have expected some reviews to have been completed much sooner where there were significant changes in circumstances that impacted on the level of risk posed.

Reviewing informed by the necessary input from other agencies involved in managing the service user's risk of harm was inadequate and had significantly deteriorated since our last inspection. We were concerned to find cases where there was no evidence of a response to new information. For example, we saw cases where domestic abuse call-outs had not led to any additional monitoring or increase in reporting requirements.

#### **Poor practice example**

Although there was evidence of a recent OASys review in relation to Daniel, it remained unclear what, if any, interventions were being delivered by the Changing Lives partnership. The review had not led to the responsible officer seeking out further information from children's services in relation to Daniel's involvement with the family, and whether there is a current 'open' case or not. There is no evidence that the responsible officer had any further contact with the children's services agency since July 2019 to ensure that they were aware of the index offence and the evidence of domestic abuse being witnessed by children. The review did not confirm whether the service user is currently in a relationship with the victim or having contact with the children involved.

Less than one-third of service users, and key individuals in their lives where this was appropriate, were meaningfully involved in reviewing their risk of harm. Reviewing should actively involve and include service users, and home visits could have been carried out in many cases to inform a review of the risk of serious harm.

A reasonable majority of reviews were completed as appropriate, as a formal record of the management of the service user's risk of harm. Reviews included ongoing assessment of risk of serious harm, drawing upon requested intelligence and partnership agency updates. Some reviews provided more information and analysis of risk, and some risk management plans were updated with more clarity on contingency actions and the roles of other agencies.

### 3. CRC-specific work

CRC

	Previous inspection	Current inspection
<b>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 work done by unpaid work staff in 40 unpaid work cases, looking at assessment and planning, safety, and implementation of the court order. We also observed three unpaid work induction sessions and seven group work projects to examine the extent to which unpaid work focused on desistance from further offending and joined up with probation supervision. We visited projects across the CRC area, which included gardening and environmental works, painting and decorating, and cemetery maintenance.

We found that service users' diversity and personal circumstances were well-considered, and unpaid work was delivered safely through good communication with responsible officers, where this was required. The sentence of the court was implemented appropriately in nearly 8 out of 10 cases, with arrangements for unpaid work encouraging the service user's engagement and compliance with the order in most cases.

#### Strengths:

- Service users were aware of how their work benefits the local community.
- Unpaid work supervisors modelled pro-social attitudes and behaviours.
- Assessment considered the service user's diversity and personal circumstances and the potential impact these may have on their compliance.
- The unpaid work allocated was suitable, taking account of the service user's diversity and personal circumstances.

#### Areas for improvement:

- There were not enough opportunities to develop employment-related skills
- Service users were not informed enough about health and safety requirements during induction.
- Unpaid work was experienced as useful and rewarding in less than 60 per cent of all projects.

## Unpaid work key data

	To date of current inspection	12 months previously
Average unpaid work stand-down rate in previous 12 months <sup>35</sup>	0.95%	Not provided
Percentage of successful completions of unpaid work requirements in previous 12 months <sup>35</sup>	88.4%	90.2%

Our rating<sup>36</sup> for unpaid work is based on four key questions:

Current inspection	
Is the assessment and planning of unpaid work personalised? <sup>37</sup>	85%
Is unpaid work delivered safely? <sup>37</sup>	<b>75%</b>
Do arrangements for unpaid work maximise rehabilitative elements and support desistance?	This question produces qualitative evidence only, used to moderate the provisional rating calculated from case inspection data <sup>38</sup>
Is the sentence of the court implemented appropriately? <sup>38</sup>	78%

Unpaid work was delivered safely in three-quarters of cases, and therefore we have rated this CRC's delivery of unpaid work as 'Good'. The sentence of the court was implemented appropriately in 78 per cent of cases and, impressively, the assessment and planning of unpaid work were personalised for 85 per cent of service users. Arrangements for unpaid work to support desistance were not consistent. Too few unpaid work projects were experienced as useful and rewarding, and only a minority of unpaid work offered opportunities to develop employment-related skills. On a more positive note, the pro-social modelling of unpaid work supervisors and the consistent application of unpaid work rules were outstanding.

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

The assessment and planning of unpaid work were personalised in most cases. Assessment considered the service user's diversity and personal circumstances, and the impact of these in almost all cases. Account was taken of employment

<sup>35</sup> Data supplied by CRC.

<sup>36</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.

<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> The ratings panel considers the range of qualitative evidence, and decided to make no change to the provisional rating. See Annexe 2 for a more detailed explanation.

commitments, health and substance misuse difficulties. Unpaid work was arranged to take place on weekends to accommodate a range of needs and existing work obligations.

Unpaid work built upon the service user's strengths and enhanced their protective factors in too few cases. Where there was an education, training and employment (ETE) need, most assessments did not identify this and should have done. We found that ETE needs were not routinely identified and there was very little information on protective factors, other than employment.

Well over three-quarters of the allocated work was suitable, taking account of the service user's diversity and personal circumstances. Allocation of unpaid work was considered in light of service users' availability, and appropriate account was taken of diversity needs to determine allocation to group or individual placements. Child care commitments were also thought through to determine the allocation of working patterns. For example, a seven-hour working day would be split over two days to accommodate existing childcare arrangements.

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

Unpaid work was delivered safely in a reasonable majority of cases. The assessment of the level of risk of serious harm at the start of the unpaid work requirement was correct in almost all cases. The delivery of unpaid work took account of the risk of harm to others in three-quarters of cases. The risk of harm to others was sufficiently assessed through checks with police domestic abuse units and children's services when this was required.

The unpaid work allocated considered issues relating to the health and safety or potential vulnerability of the service user in most cases. In a small number of cases, we found that information on health difficulties identified by the service user in court did not appear to have been assessed or recorded on unpaid work documents. Work placements were identified to accommodate the geographical location of service users and to work around existing commitments, such as child care responsibilities.

Where the responsible officer was engaged in other work with the service user, regular communication took place in well over three-quarters of cases. We found that feedback was passed on to responsible officers by unpaid work supervisors. Inspectors also found that responsible officers monitored service users' progress on unpaid work and maintained communication to manage the risk of serious harm.

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

Unpaid work was experienced as useful and rewarding in too few of the projects that inspectors observed. Some projects make a visible contribution to community regeneration and were appreciated by service users, beneficiaries and the public. But in other projects, such as litter picking and foliage clearance, service users did not find the work particularly rewarding. Female service users are given the option of completing unpaid work hours on individual placements, though some may still choose to work in a group to gain specific types of work experience.

Unpaid work offered opportunities to develop employment-related skills in only a small number of the projects that we observed. Service users developed work skills on some projects, including the use of power tools, although there did not appear to be sufficient strategic priority to identify and translate the skills gained into qualifications. Some service users were able to use their existing skills on work projects, and interacted positively with each other to share information about potential work opportunities.

Inspectors spoke to some service users who were not aware that 20 per cent of their unpaid work hours could be used for ETE activities. A positive exception to this is the work of Academy 3:13, which provides skills tutors to attend unpaid work projects in York to support service users gain employment-related skills and qualifications.

Almost all unpaid work supervisors followed the principles of pro-social modelling, demonstrating good behaviours. We found that experienced unpaid work supervisors were respected and in some cases were helped by peer mentors, who had experience of completing unpaid work. This was good practice in relation to service user involvement. The unpaid work supervisors who we observed were polite, fair and respectful to service users, and were enthusiastic about the work that needed to be completed.

There was clear information and consistent application of the rules in well over three-quarters of the projects seen. Inspectors found that service users understood on-site rules and regulations, including wearing appropriate protective clothing. Gathering information on risk relies on supervisors checking the case records for each service user that they supervise. This does not appear to be a failsafe system, and colour-coded risks, for example, would make the sharing of risk information clearer.

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

The sentence of the court was implemented appropriately in a reasonable majority of cases. Unpaid work began promptly and happened regularly in many cases. It usually began within seven days of case allocation and work was scheduled to take place weekly. Unpaid work was delayed appropriately in some cases, for example, to address alcohol misuse.

Arrangements for unpaid work encouraged the service user's engagement and compliance with the order in a large majority of cases. Unpaid work was allocated to the weekend or to specific weekdays, in agreement with the service user, to accommodate existing education and work commitments. This promoted the service user's engagement and helped them to complete unpaid work hours.

Appropriate professional judgements were made in relation to missed appointments in well over three-quarters of cases. Valid reasons for accepting absences were recorded and service users were reminded of the requirement to complete all unpaid work hours. Unpaid work hours were rescheduled appropriately around employment commitments where necessary.

Enforcement actions were taken when necessary in three-quarters of cases. Priority was given to enforcement, including for unacceptable behaviour while on site. In one example, a service user was sent home for persistent poor behaviour and there was breach action to return them to court. We also saw examples where individuals re-engaged with enforcement action and completed further unpaid work hours.

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

We inspected work done in 35 cases where the CRC had delivered pre-release Through the Gate resettlement work, looking at resettlement planning, delivery of resettlement services and the coordination of resettlement activity. The CRC delivers a Through the Gate service in HMPs Askham Grange, Hull, Humber, Lincoln and North Sea Camp.

In our 2018 inspection, we rated Through the Gate services as 'Good', having found that resettlement plans that addressed identified needs and communication between prison-based staff and responsible officers in the community, before and at the point of release, were good. We found on this inspection that delivery of Through the Gate services had improved to 'Outstanding', due to positive improvements in resettlement planning, activity and the coordination of service delivery.

The new specification for enhanced Through the Gate work has been implemented well through the introduction of integrated Through the Gate in April 2019, which includes support for groups of vulnerable service users with complex needs. As part of this new initiative, high intensity teams provide an enhanced mentoring and support service.

Resettlement planning focused sufficiently on the service user's resettlement needs and on factors linked to offending and desistance in almost all cases. Resettlement activity helped to prepare service users for life after prison in a large majority of cases, and there was effective coordination of services for prison release in almost all cases.

#### Strengths:

- Service users were meaningfully involved in planning their resettlement.
- Resettlement plans took good account of service users' diversity and personal circumstances.
- Resettlement activity took enough account of factors related to the risk of harm.
- Plans drew sufficiently on available sources of information.

#### Area for improvement:

- Delivery of resettlement services to address some complex needs.

**Our rating<sup>39</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>40</sup>
Does resettlement planning focus sufficiently on the service user's resettlement needs and on factors linked to offending and desistance? <sup>41</sup>	81%	94%	69%
Does resettlement activity focus sufficiently on supporting the service user's resettlement? <sup>41</sup>	81%	94%	62%
Is there effective coordination of resettlement activity? <sup>41</sup>	76%	<b>91%</b>	59%

We found this area of practice to be 'Outstanding'. Resettlement planning focused on preparing service users for their release back into the community in over 9 out of 10 cases. Similarly, resettlement work focused on supporting service users' transition in 94 per cent of cases, and activity was effectively coordinated in almost all the cases examined.

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

A large majority of plans were clear and timely, detailing how the service user's resettlement needs would be addressed. Resettlement planning clearly identified key areas of risk and need, and there was recorded evidence of actions taken to address needs before release. Inspectors saw plans that identified health, accommodation and financial concerns, and created actions to address these within the prison setting.

Almost all plans drew sufficiently upon available sources of information, which was appropriately drawn from prison and probation case management systems, as well as from comprehensive interviews with service users. We also found examples of good liaison with other prison departments, which assisted information-sharing on service users' needs and risks.

Nearly all service users were meaningfully involved in planning their resettlement and their views were considered. Through the Gate staff used interviews to involve service users effectively in identifying their offending-related needs and to assess the risk of harm posed. We did see some plans that were led too much by service users and therefore tended to underestimate the level of need.

Most resettlement plans identified the service user's strengths and protective factors, and considered ways to build on these. Reference to family support networks were sufficient. Service users' strengths included motivation to engage with services, and

<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 between June 2018 and 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.

protective factors included settled accommodation and employment on release. We found evidence of regular and thorough meetings with service users.

Nearly all plans took enough account of the service user's diversity and personal circumstances. The main service user resettlement needs before release were: accommodation; ETE; finance, benefits and debts; personal, relationships and community; and other complex needs. For almost all service users, the correct level of need was identified for each applicable resettlement pathway. The only exception to this was for other complex needs, where the correct level of needs was identified for less than three-quarters of service users.

#### Good practice example

Richard was interviewed before release. The assessor identified that Richard suffered with a personality disorder, and he was on prescribed medication. Richard was an out-of-work fisherman who had not been claiming benefits before the sentence. The assessor referred Richard to Jobcentre Plus, the prison work coach and to a bank to open an account.

Most resettlement plans took account of factors related to risk of harm. Examples included plans that clearly referenced existing restraining orders that were in place to protect family members. We also saw examples of Through the Gate staff contacting responsible officers to initiate address checks to confirm suitability in relation to domestic abuse concerns.

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

Almost all resettlement plans focused sufficiently on supporting the service user's resettlement. Most accommodation and ETE services were delivered in line with service users' resettlement needs. Almost all finance, benefits and debts, and personal, relationships and community services were delivered to meet service users' needs in these areas. However, services to meet other complex needs were delivered to less than three-quarters of service users where these would have been beneficial.

Examples of services delivered included benefits appointments being arranged and access to mental health services provided within custody. We also saw examples of service users being provided with drug treatment, which continued after release, and being referred to local councils to avoid homelessness through securing temporary accommodation.

We saw a small number of examples where the Through the Gate worker followed the lead of the responsible officer in relation to endorsing release addresses which were inappropriate. One service user with several complex needs was 'no fixed abode' on release, and despite accessing healthcare in custody had not received prescribed medication for ongoing anxiety and depression.

Resettlement services almost always built upon service users' strengths and enhanced their protective factors. Examples included Through the Gate staff addressing accommodation issues by confirming with family members where service users would reside, and where employment could be resumed on release. We also saw evidence of some effective and tenacious co-ordinated work to retrieve a service user's belongings from previous accommodation and to secure supported lodgings for release. This included contingency plans and built upon the service user's current high level of motivation.

A large majority of resettlement activity took account of service users' diversity and personal circumstances. Positive examples of this included service users working with the drug alcohol recovery team (DART) in custody, and appointments made with the community mental health team and Addaction, a drug support service that ensures continued access to substitution drugs, such as methadone.

Almost all resettlement activity took account of factors related to risk of harm. Resettlement plans were clear about the areas needing attention for release; for example, one resettlement worker reminded a service user of a non-molestation order that was in place due to the risk of harm they posed to an ex-partner. We also saw an example of a responsible officer visiting a service user in custody to discuss licence conditions around the risk of harm presented to an ex-partner through domestic abuse, and other restrictions to control and monitor their behaviour on release.

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

We almost always found effective coordination of resettlement activity with other services being delivered in prison. Examples included access to mental health and substance misuse services being recorded on case management systems so that responsible officers could follow service users' progress in custody. Service users requiring specialist support were referred appropriately to high intensity team workers to receive additional support.

There was nearly always effective communication with the responsible officer in the community, before and at the point of release. Some communication between integrated Through the Gate staff and responsible officers could have been more clearly recorded, but nDelius entries evidenced that responsible officers were generally aware of resettlement needs upon release. Inspectors saw examples of responsible officers confirming follow-up appointments with drug treatment agencies, accommodation staff and benefits agency staff within the community.

Resettlement services largely supported effective handover to local services in the community. We found clear evidence of follow up on resettlement actions and active management of risk of harm, for example, in relation to domestic abuse, and control measures, such as restraining orders, being in place. Follow up was also evident in relation to drug rehabilitation assessment appointments, with an application made with a service user in custody. Safeguarding checks were also undertaken when this was appropriate.

## Annexe 1: Background to probation services

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Around 255,000 adults are supervised by probation services annually.<sup>42</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>43</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 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. CRCs supervise most other offenders who present a low or medium risk of harm.

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<sup>42</sup> Ministry of Justice. (2109). *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>43</sup> All those sentenced, for offences committed after the implementation of the *Offender Rehabilitation Act 2014*, to more than 1 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

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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 61 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 39 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>44</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 113 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, PO/PSO cases. Where this is the case, the margin of error for the sub-sample findings may be higher than 5.

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<sup>44</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>

### **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 40 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 seven unpaid work projects and three unpaid work induction sessions to gather qualitative evidence.

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

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

#### *Through the Gate*

We examined 35 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
- four governors with responsibility for resettlement from four prisons
- middle managers responsible for Through the Gate services in specific prisons
- a group of CRC resettlement workers directly responsible for preparing resettlement plans and/or meeting identified resettlement needs.

## **Ratings explained**

Domain one ratings are proposed by the lead inspector for each standard. They will be a single judgement, using all the relevant sources of evidence. More detailed information can be found in the probation inspection domain one rules and guidance on the website.

Domain two and three standard ratings are based on the results of the inspection of individual cases. Ratings are at the standard level and based on consolidated results (at key question level) of all cases inspected in the relevant domain. In CRC inspections only, the rating for unpaid work in domain three may also be influenced by evidence from observations.

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

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

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

### Rating unpaid work

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

### Overall provider rating

Straightforward scoring rules are used to generate the overall provider rating. Each of the ten standards will be scored on a 0–3 scale 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.

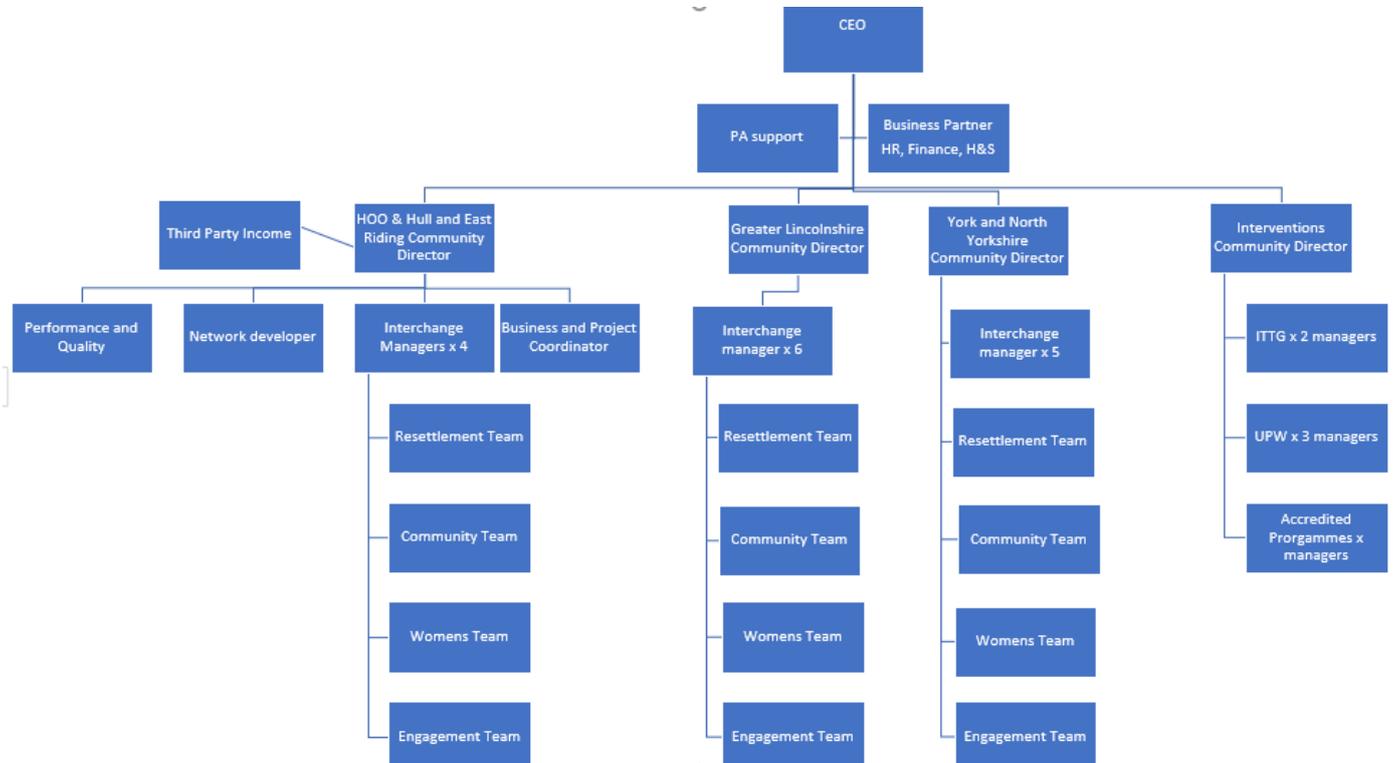
### Comparative data

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

# Annexe 3: Organisational design, map and operating model.

## Organisational design

Humberside, Lincolnshire & North Yorkshire CRC. Organisational chart, Autumn 2019



Information supplied by HLN CRC

## **Enabling our Futures:**

In September 2018, Interserve launched the 'Enabling our Futures' programme which created economies of scale within their budgetary resources. The model aims to retain meaningful contact as being central to service delivery through:

- Creation of specialisms to support delivery of Interventions and Case Management where geographically viable
- Banding and Allocation of cases retaining the principle that resource following risk, complexity and diversity
- Minimum Offender Contact
- Resource Allocation Model to support targeted sentence delivery and personalisation
- separating case management into Community and Resettlement teams
- and, introducing an Interventions team to support delivery of a new suite of evidence based structured RAR and Accredited Programmes.

## Annexe 4: Inspection data<sup>45</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 considered the answers to all the prompts and weighed 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?	87%	70%
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	57%
Is the service user meaningfully involved in their assessment, and are their views taken into account?	72%	67%
Does assessment focus sufficiently on the factors linked to offending and desistance?		
Does assessment identify and analyse offending-related factors?	66%	49%
Does assessment identify the service user's strengths and protective factors?	85%	79%
Does assessment draw sufficiently on available sources of information?	65%	54%

<sup>45</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?	54%	37%
Does assessment analyse any specific concerns and risks related to actual and potential victims?	No comparable data available	39%
Does assessment draw sufficiently on available sources of information, including past behaviour and convictions, and involve other agencies where appropriate?	No comparable data available	40%
Were domestic abuse checks undertaken?	No comparable data available	65%
Did child safeguarding information sharing take place in cases where required? <sup>46</sup>	No comparable data available	67%

## 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?	75%	70%
Does planning take sufficient account of the service user's diversity and personal circumstances, which may affect engagement and compliance?	76%	63%
Does planning take sufficient account of the service user's readiness and motivation to change, which may affect engagement and compliance?	80%	70%
Does planning set out how all the requirements of the sentence or licence/post-sentence supervision will be delivered within the available timescales?	58%	66%

<sup>46</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.

Does planning set a level, pattern and type of contact sufficient to engage the service user and to support the effectiveness of specific interventions?	46%	55%
<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?	64%	54%
Does planning build on the service user's strengths and protective factors, utilising potential sources of support?	No comparable data available	72%
Does planning set out the services most likely to reduce reoffending and support desistance?	67%	58%
<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?	55%	46%
Does planning set out the necessary constructive and/or restrictive interventions to manage the risk of harm?	55%	49%
Does planning make appropriate links to the work of other agencies involved with the service user and any multi-agency plans?	65%	52%
Does planning set out necessary and effective contingency arrangements to manage those risks that have been identified?	48%	30%

### 2.3. Implementation and delivery

<b>Is the sentence/post-custody period implemented appropriately, 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?	77%	66%
Is sufficient focus given to maintaining an effective working relationship with the service user?	78%	72%
Are sufficient efforts made to enable the service user to complete the sentence, including flexibility to take appropriate account of their personal circumstances?	86%	86%

Post-custody cases only: Was there a proportionate level of contact with the prisoner before release?	68%	51%
Are risks of non-compliance identified and addressed in a timely fashion to reduce the need for enforcement actions?	75%	69%
Are enforcement actions taken when appropriate?	61%	61%
Are sufficient efforts made to re-engage the service user after enforcement actions or recall?	78%	86%
<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?	49%	47%
Wherever possible, does the delivery of services build upon the service user's strengths and enhance protective factors?	69%	71%
Is the involvement of other organisations in the delivery of services sufficiently well coordinated?	70%	49%
Are key individuals in the service user's life engaged, where appropriate, to support their desistance?	54%	43%
Is the level and nature of contact sufficient to reduce reoffending and support desistance?	50%	40%
Are local services engaged to support and sustain desistance during the sentence and beyond?	No comparable data available	57%
<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?	55%	48%
Is sufficient attention given to protecting actual and potential victims?	45%	37%
Is the involvement of other agencies in managing and minimising the risk of harm sufficiently well coordinated?	58%	41%

Are key individuals in the service user's life engaged, where appropriate, to support the effective management of risk of harm?	53%	36%
Are home visits undertaken, where necessary, to support the effective management of risk of harm?	43%	25%

#### 2.4. Reviewing

<b>Does reviewing effectively support 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?	68%	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?	57%	61%
Is the service user meaningfully involved in reviewing their progress and engagement?	48%	57%
Are written reviews completed as appropriate as a formal record of actions to implement the sentence?	67%	76%
<b>Does reviewing focus sufficiently on supporting the service 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?	51%	47%
Does reviewing focus sufficiently on building upon the service user's strengths and enhancing protective factors?	63%	65%
Is reviewing informed by the necessary input from other agencies working with the service user?	68%	61%
Are written reviews completed as appropriate as a formal record of the progress towards desistance?	60%	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?	44%	32%

Is reviewing informed by the necessary input from other agencies involved in managing the service user's risk of harm?	63%	45%
Is the service user (and, where appropriate, key individuals in the service user's life) meaningfully involved in reviewing their risk of harm?	44%	31%
Are written reviews completed as appropriate as a formal record of the management of the service user's risk of harm?	55%	70%

### 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	95%
Does unpaid work build upon a service user's strengths and enhance their protective factors?	No comparable data available	60%
Is the allocated work suitable, taking account of the service user's diversity and personal circumstances?	No comparable data available	88%
<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	75%
Does unpaid work consider issues relating to the health and safety or potential vulnerability of the service user?	No comparable data available	83%
Where the responsible officer is engaged in other activity/work with the service user, does regular communication take place?	No comparable data available	85%

<b>Is the sentence of the court implemented appropriately?</b>		
Does unpaid work commence promptly and happen regularly?	No comparable data available	65%
Do arrangements for unpaid work encourage the service user's engagement and compliance with the order?	No comparable data available	85%
Are professional judgements made in relation to decisions about missed appointments?	No comparable data available	80%
Are enforcement actions taken when appropriate?	No comparable data available	75%

<b>Through the Gate</b>		
<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?	96%	91%
Does the plan sufficiently draw on available sources of information?	73%	94%
Is the service user meaningfully involved in planning their resettlement and are their views considered?	92%	97%
Does the resettlement plan identify the service user's strengths and protective factors and consider ways to build upon these?	77%	83%
Does the plan take sufficient account of the service user's diversity and personal circumstances?	92%	97%
Does the resettlement plan take account of factors related to risk of harm?	No comparable data available	84%

<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 data available	92%
Does resettlement activity take sufficient account of the service user's diversity and personal circumstances?	No comparable data available	93%
Does resettlement activity take sufficient account of any factors related to risk of harm?	No comparable data available	95%
<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	91%
Is there effective communication with the responsible officer in the community, prior to and at the point of release?	No comparable data available	86%
Do resettlement services support effective handover to local services in the community?	No comparable data available	85%



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