



Her Majesty's
Inspectorate of
Probation

An inspection of probation services in:
Hampshire and Isle of Wight
Community Rehabilitation Company

HMI Probation, July 2020

Acknowledgements

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

The role of HM Inspectorate of Probation

Her Majesty's Inspectorate of Probation is the independent inspector of youth offending and probation services in England and Wales. We report on the effectiveness of probation and youth offending service work with adults and children.

We inspect these services and publish inspection reports. We highlight good and poor practice, and use our data and information to encourage high-quality services. We are independent of government, and speak independently.

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

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Contents

| | |
|--|-------------------------------------|
| Foreword | 4 |
| Ratings..... | 6 |
| Executive summary | 7 |
| Recommendations..... | 13 |
| Background..... | 15 |
| Contextual facts | 17 |
| 1. Organisational delivery | 18 |
| 2. Case supervision | 36 |
| 3. CRC-specific work | Error! Bookmark not defined. |
| Annexe 1: Background to probation services..... | 60 |
| Annexe 2: Methodology | 61 |
| Annexe 3: Organisational design and map..... | Error! Bookmark not defined. |
| Annexe 4: Inspection data..... | 68 |

Foreword

This is the tenth inspection in the second round of our inspections of Community Rehabilitation Companies (CRCs). We previously inspected Hampshire and Isle of Wight CRC in January 2019. At that time, we rated its work as 'Good'. It was the only CRC to achieve this rating in our year one inspection programme. It is therefore disappointing to find a sharp decline in the quality of case supervision since the previous inspection. We have concluded that this directly relates to a shortfall in sufficiently trained and experienced practitioners in this service. In contrast, the Through the Gate services have improved to Outstanding with the benefit of additional funding from the Ministry of Justice. Unpaid work services continued to be rated as Good.

This inspection coincided with the COVID-19 pandemic taking hold in the UK. As a result, week three of the onsite inspection fieldwork was cancelled, at the request of the CRC. Although we were able to complete our assessments of individual cases and had undertaken some inspection of organisational delivery arrangements in the first two weeks of fieldwork, more interviews and focus groups would have been undertaken, had the third week been completed. It was, therefore, decided not to rate the four standards relating to organisational delivery or to provide an overall rating for this CRC. The COVID-19 pandemic has radically altered the operating model of all probation services; our inspection relates to the service as it operated before these changes were implemented.

Hampshire and Isle of Wight CRC is one of five Purple Futures services delivered by the parent organisation Interserve Justice. Reduced income across all the Purple Futures services prompted a decision to curb expenditure through a major organisational restructure at the beginning of 2019. However, this new operating model works on the presumption of an experienced skilled workforce. In Hampshire and Isle of Wight CRC, the restructure failed to take sufficient account of a predictable shortage of skilled staff or the time required to recruit, train and consolidate the training of new case managers and develop the skills of existing case managers to manage complex work, including cases involving domestic abuse. We found that the number of skilled probation officer grade staff had fallen by 38 per cent since our last inspection and while the number of lower grade case managers (probation service officer equivalent) had risen significantly, 45 per cent were new to the service at the time of our inspection. The negative impact of this on the cases we inspected had been profound.

Complex casework has been assigned to responsible officers beyond their capability, who have not had sufficient time to develop the necessary core skills. Existing skilled staff at all levels have had to manage high workloads, which has compromised the quality of their work. Management oversight has been stretched and has not attended to risk of harm indicators well enough.

New practitioners require more time and further training to develop their skills, and the interventions team needs to be resourced sufficiently to meet demand, so that court order requirements and licence conditions are delivered as intended.

It is to the credit of local leaders, who understand the problems they face, that they have communicated openly with staff throughout this difficult year. It is clear that the organisation is working cohesively, and is pulling together to make improvements. However, at the time of this inspection their efforts were not delivering the outcomes required.

A handwritten signature in black ink that reads "Justin Russell". The signature is written in a cursive, flowing style.

Justin Russell
Chief Inspector of Probation

Ratings

Hampshire and Isle of Wight
Community Rehabilitation Company

| | | |
|-----------------------------------|---|---|
| Overall rating | No overall rating is provided due to the third week of fieldwork being cancelled as a result of COVID-19 | |
| 1. Organisational delivery | These standards are not rated | |
| 1.1 Leadership | | N/A |
| 1.2 Staff | | N/A |
| 1.3 Services | | N/A |
| 1.4 Information and facilities | | N/A |
| 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

This inspection coincided with the COVID-19 pandemic taking hold in the UK. As such, the third week of inspection fieldwork was cancelled, at the request of the CRC. Although a full sample of cases was inspected, including a large number of interviews with responsible officers, the full range of interviews and focus groups which normally inform our judgements on organisational leadership and delivery could not be completed. It was, therefore, decided not to rate domain one standards or to provide an overall rating. Our judgements relate to the service as it was operating before the COVID-19 pandemic and the major changes that has necessitated to the operating models of all probation services.

Normally, we inspect against ten 'standards', shared between the domains. The 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.¹ Published scoring rules where all three domains have been fully inspected generate the overall provider rating.² The narrative findings for the three domains and subsequent ratings for domains two and three are described here.

1. Organisational delivery



In light of the third fieldwork week not taking place due to COVID-19, our findings on organisational delivery (domain one standards) are based on: the written evidence provided in advance and gathered during fieldwork weeks one and two; our interviews with 50 responsible officers as part of our case inspections (domain two); and 19 domain one meetings completed during weeks one and two. These meetings included focus groups with responsible officers, middle managers, unpaid work staff, resettlement staff, prison resettlement leaders, service users, providers of commissioned services, and strategic managers with responsibility for operations, interventions, women's services, estates and health and safety, equality and diversity, learning and development, hub management and partnerships and stakeholders. A further 17 meetings had been planned, but did not take place.

This has been an exceptionally testing and challenging year for the leaders of Hampshire and Isle of Wight CRC. As a consequence of implementing the revised Interserve Justice operating model in January 2019, the organisation lost many experienced and skilled practitioners within a short space of time. Complex cases, including those with a history of domestic abuse, have been inappropriately allocated to staff who lack sufficient experience and knowledge. The more experienced staff have carried excessive caseloads, limiting their capacity to deliver the quality of work required.

The management team, based locally in Hampshire, has focused on recruiting and training new case managers. However, these actions have not offset the reduced capacity and capability of the CRC to deliver good-quality case supervision or to

¹ HM Inspectorate of Probation's standards can be found here:

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

² 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'.

provide sufficient intervention services to meet court orders or licence requirements. So, this inspection has found a sharp decline in the quality of case supervision and availability of services required to deliver court requirements, despite efforts by the management team to address underlying issues. Although the shortage of skilled staff was predictable, work to address the shortage took effect too late. While the recruitment of new case managers, who make up of 45 per cent of this grade of staff, is starting to mitigate excessive caseloads, their practice has yet to mature to enable them to deliver the quality of work required.

Managers are supported by good arrangements for gathering information. However, we found that the quality of management oversight was poor, particularly in respect of managing risk to keep other people safe. This in turn raises questions about the quality of the organisation's quality assurance information.

The CRC leaders have been transparent with staff about the problems the organisation faces, and they have deployed an imaginative range of solutions, allowing everyone to contribute to the improvement journey required. However, this does not outweigh the overall sharp decline in the quality of service delivery since the last inspection.

Key strengths of the organisation are as follows:

- Senior leaders and managers work cohesively and transparently with their staff and keep them apprised of the challenges facing the organisation, as well as its achievements.
- The organisation demonstrates a culture that is committed to learning and development.
- The CRC pays good attention to service user engagement and values service users' contribution to improving service delivery.
- Operational staff are supported with modern technology that encourages their capacity to work flexibly.

The main areas for improvement are as follows:

- Strategic planning and implementation of organisational changes do not take enough account of the availability of sufficiently trained and skilled staff.
- The banding allocation tool does not take sufficient account of the assessed skills and experience of case managers before allocating complex cases, particularly their ability to identify and manage the risk of harm.
- The intervention team, which delivers accredited programmes and rehabilitation activity requirements (RARs), is not sufficiently staffed to meet demand.
- The nDelius flags for domestic abuse are not always reliably applied; this undermines the quality of important management information.

2. Case supervision



We inspected 66 community sentence cases and 31 post-release supervision cases; interviewed 50 responsible officers and 6 service users; and examined the quality of assessment, planning, implementation and delivery, and review work. Each of these elements was inspected in respect of engaging the service user and addressing issues relevant to offending and desistance. In the 81 cases where there were factors related to harm, we also inspected work to keep other people safe. The quality of work undertaken in relation to each element of case supervision needs to be above a specific threshold for it to be rated as satisfactory.

The inspection results from the domain two sample are very disappointing. The quality of case supervision has deteriorated considerably since the previous inspection in January 2019.

The CRC has fallen from a leading position for case supervision compared with other CRCs to some of the lowest findings to date in the second year of this inspection programme.

Fewer than 50 per cent of cases met all our requirements in terms of assessment, planning, implementation and delivery and reviewing, which led to our judgements of 'Inadequate' against these four standards of work. Practice was found to be 'Inadequate' across all four of the standards for work to keep people safe, with insufficient use made of information available. Risk management activity did not sufficiently coordinate with the work of other relevant agencies. Inspectors found that too often responsible officers do not seek to verify information they are given by service users. Their actions lack analysis and the responses required to manage risk of harm well.

In general, the quality of engagement, particularly at assessment, is weak. Engagement can be compromised when the work is allocated to other staff members to complete in order to avoid a backlog and missed targets. However, responsible officers, do take account of the commitments to employment and family responsibilities that service users have and are willing to adjust reporting instructions, in relevant cases, to support their compliance. Implementation and delivery work is undermined by the lack of timely access to sufficient structured interventions. As a result, in too many cases service users have not started interventions, or made sufficient progress in addressing the reasons why they have offended, by the six-month stage of their supervision.

The shortage of sufficiently experienced and skilled staff available within the CRC, both for case supervision and to deliver the required volume of interventions, is recognised as the core explanation for the decline in quality since the last inspection. While newly recruited responsible officers demonstrate good commitment, they are on steep learning curves and 'do not know what they do not know'. Managers are working hard to encourage novice responsible officers, but all too often they fail to address risk of harm indicators and encourage the necessary investigative approach or demand that action to manage risk is taken.

The quality of work is higher for senior case managers (probation officer equivalent), although they held excessive caseloads throughout much of the year, which they gave as an explanation for the weak attention to risk of harm work.

Key strengths of case supervision are as follows:

- Responsible officers usually identify the reasons why an individual offends.
- Planning work focuses on reoffending and supports desistance for those released on post-release supervision.
- Responsible officers are flexible and responsive in their approach, which supports the individual's ability to engage and comply with their supervision.
- Attention to compliance and enforcement is consistent and appropriate.

Areas of case supervision requiring improvement include:

- Responsible officers lack sufficient analytical skills when assessing the reasons for reoffending, which is necessary to inform planning and delivery.
- Arrangements to support the timely sharing of information with key agencies, (in particular, the police and children's social care services), to keep people safe are not reliable.
- Responsible officers cannot access sufficient interventions to meet the requirements of court orders, so that the interventions can be completed within the period of supervision.
- The quality of management oversight does not reliably address past behaviour and the verification of information linked to risk of harm, including consideration of the use of home visits.
- Responsible officers lack the skills to analyse and coordinate information with other agencies in the management of risk of harm.
- Insufficient attention is given to making sure reviews are completed where there are changes in factors related to risk of harm.

3. CRC-specific work

A blue folder icon with the letters 'CRC' in white text on a blue background.

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

Unpaid work

We inspected the management of 35 pre-COVID-19 unpaid work requirements, looking at assessment and planning; safety; and implementation of the court order. We also observed one induction session and six work parties, to examine the extent to which unpaid work is delivered in a way that supports desistance.

In this CRC, over 75 per cent of the unpaid work cases we inspected were appropriately assessed, planning was personalised and the sentence of the court implemented. Unpaid work was delivered safely in the large majority of cases. Opportunities for service users to develop skills and achieve qualifications were underdeveloped and there remained room to improve the arrangements to maximise the rehabilitative elements of unpaid work and support desistance. Overall, these findings led to a judgement of 'Good' for unpaid work.

In HIOW, in normal, pre-COVID-19 conditions, most service users undertake a group induction for unpaid work. After the induction, they take part in unpaid work the same day, on a generic project. Individuals are then risk-assessed for the most suitable placement available, which can be in a group or an individual placement. Group

projects provide placements for 55 per cent of all hours worked, with the remainder fulfilled by individual placements. This supports the CRC's capacity to address diverse needs. Women are usually given an individual placement, but may be placed in a mixed group to manage any specific risks.

Key strengths of unpaid work are:

- Reliable induction arrangements and allocation to projects.
- The opportunity to experience an unpaid work project immediately after the induction helps to reduce barriers and improve engagement.
- The CRC gives good attention to health and safety to make sure the work is delivered safely.
- Placements are arranged to complement and take account of childcare responsibilities.

Areas for improvement for unpaid work are:

- Facilities for service users to develop skills and achieve qualifications are underdeveloped and not enough opportunities are available.
- Arrangements for informing unpaid work supervisors of service users' risk indicators are fallible. Supervisors would be better supported if they had secure access to electronic records via a tablet or phone.
- The reasons recorded for missed unpaid work appointments are not always clear.

Through the Gate

We inspected the management of 24 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 two governors with responsibility for resettlement from the two resettlement prison establishments, the middle manager responsible for Through the Gate services and a group of CRC and Catch 22 resettlement workers (commissioned by the CRC) who are directly responsible for assessing and preparing resettlement plans and/or meeting identified resettlement needs.

During the January 2019 inspection of HLOW, we rated Through the Gate services as 'Requires improvement'. It was pleasing on this inspection to find that delivery of Through the Gate services had improved significantly. We found that resettlement planning focused appropriately on offending-related factors and coordinated resettlement activity in 96 per cent of the cases we inspected. There was effective coordination of resettlement activity in 92 per cent of the cases. We have, therefore, rated Through the Gate work as 'Outstanding'. Through the Gate services have benefited from an increase in resources since the introduction of the enhanced specification. This has allowed for additional staff who have more time to spend with individuals preparing for release.

The CRC has made good use of the additional funding to deliver the enhanced specification for Through the Gate services since April 2019. The Through the Gate team has quickly become respected, and its contribution to resettlement services is valued within HMP Winchester and HMP Coldingley. Good examples of collaboration are evident both at senior manager/partnership and practitioner custody/community

levels. The revised arrangements can target resources and services where they may have the greatest impact on reducing reoffending.

Key strengths of Through the Gate work are:

- Resettlement plans take account of the individual's strengths and protective factors.
- Resettlement work in prison takes account of the individual's assessed risk of harm.
- Collaborative and effective working relationships are established with key agencies to support access to resettlement activities.
- Good communication and coordination take place between Through the Gate staff and resettlement case managers in the community to support release arrangements.

Areas of improvement for Through the Gate work are:

- The individual's diversity and personal circumstances are not considered in all cases.
- Continue to address and seek improvement for relevant domestic abuse information to be provided from Hampshire police to support the management of risk of harm in resettlement work.

Recommendations

Achievement of recommendations from the previous inspection³

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

We recommended that the CRC:

1. *'Reconsider the ratio of senior case managers to case managers holding cases, in the context of findings around the quality of service'.*

The CRC has made no progress on this recommendation.

This recommendation was not accepted by the CRC. The CRC restructured the organisation in January 2019; implemented a revised operating model (Enabling Our Futures) and reduced the number of senior case managers. The CRC has struggled to provide sufficient skilled senior case managers and case managers. This has had a detrimental impact on the quality of case supervision. Our domain two data on a sample of individual cases provided clear evidence of a deterioration in the quality of case management work across all four standards.

2. *'Increase the extent of staff engagement in the implementation and review of policy and strategy'.*

The CRC has made sufficient progress on this recommendation.

The operational senior managers have worked exceptionally hard to improve staff engagement. They have used a wide range of approaches, including regular visits to the hubs, house newsletters, changing the format of leadership meetings to empower middle managers to contribute, staff surveys and local engagement and wellbeing forums. Staff understand the challenges in managing delivery with insufficient skilled staff and they recognise the actions senior managers are taking to address this.

3. *'Develop a clearer focus on public protection in the implementation and review of the sentence in all cases'.*

The CRC has made no progress on this recommendation.

Since the previous inspection, the CRC has prioritised the delivery of risk of harm and safeguarding training to all responsible officers. This has involved the delivery of a risk of harm training module to all practitioners and the delivery of SARA 3 (for domestic abuse), where required. However, our domain two data provided evidence that case management practice to keep people safe had deteriorated.

³ HMI Probation. (2019). *An inspection of Hampshire & Isle of Wight Community Rehabilitation Company*.

4. *'Use quality management systems to drive the delivery of high-quality work, as defined by HM Inspectorate of Probation standards'.*

The CRC has made no progress on this recommendation

Since the previous inspection, the CRC has relied on its Interserve Quality Assurance Model (IQAM) framework. The most recent CRC IQAM audit (carried out October to December 2019) assessed that case management was partially delivered, with some shortfalls. Based on the domain two data for this inspection, however, we judged management oversight to be ineffective, insufficient or absent in just over 70 per cent of relevant cases, and assessed practice as 'Inadequate' across all four case supervision standards.

New recommendations

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

Hampshire and Isle of Wight CRC should:

1. ensure the availability of sufficiently trained and skilled staff when planning and implementing organisational change
2. review the allocation criteria for the banding and allocation tool, so that it takes account of case managers' experience and skills before allocating cases with a history of domestic abuse
3. improve arrangements for timely and relevant domestic abuse information to be provided from Hampshire police to the CRC to support the management of risk of harm
4. improve management oversight so that information on risk of harm is properly analysed, verified and acted upon to keep other people safe
5. improve the capacity and capability of the intervention team to meet the demand for interventions
6. improve access to education, training and employment for relevant service users completing unpaid work requirements
7. develop a clearer focus on public protection in the implementation and review of the sentence in all cases. **This recommendation has been repeated from the previous inspection.**

Background

Hampshire and Isle of Wight CRC

Hampshire is a large county in southern England, with expansive rural areas and highly populated areas. The county town is the city of Winchester. Southampton, Portsmouth and the Isle of Wight are administered separately as unitary authorities; the rest of the county is governed by Hampshire County Council. Local strategic partnership arrangements align with these governance structures. The population is just under two million, with Southampton and Portsmouth being the most densely populated cities.⁴ A higher proportion of the population identify as white English than the average for England.⁵

There are strong historical links with the Royal Navy and the maritime industry. Hampshire is one of the most affluent counties in the country, with unemployment lower than the national average. However, there are significant pockets of deprivation, with unemployment in Southampton and the Isle of Wight being above the national average. Recorded crime is below the national average, although violence against the person is slightly above the average for England.⁶

A lower proportion of offenders reoffend in Hampshire (38.21 per cent) than the CRC national average (41.27 per cent).⁷

There is one Police and Crime Commissioner and police force for Hampshire, which is supported by the Hampshire Criminal Justice Board.

HIOW CRC provides resettlement services to two male prisons: HMP Winchester and HMP Coldingley. Women prisoners are usually held at HMP Bronzefield, where resettlement services are delivered by London CRC – MTC Novo.

At the time of this inspection, HIOW CRC supervised 2,005 individuals in the community on community sentences. A further 816 were supervised in the community on licence or post-sentence supervision.⁸

The number of full-time equivalent staff employed by the CRC has risen slightly from 158 last year to 163.9.⁹ This includes an increase in the number of staff to implement the revised specification for Through the Gate services. At the time this inspection was announced, the CRC was operating with 14 staff vacancies. There are 21.05 senior case managers (SCMs, also known as probation officers), a reduction from 34.32 12 months previously. The number of case managers (CMs, also known as probation services officers) has increased from 47.4 to 66.10 over the previous 12 months.⁹ The CRC states that 45 per cent of the case managers have been recruited and trained since the previous inspection in January 2019.

Recruitment in Hampshire has been very challenging, affected by high local employment and the cost of living in the area. In addition, uncertainty about future employment arrangements, after the Ministry of Justice announced its intention to bring forward the termination of the CRC contracts, may have had an impact. The

⁴ Office for National Statistics. (2019). *UK populations estimates, mid-2018*.

⁵ Office for National Statistics. (2011). *Ethnic group, local authorities in England and Wales*.

⁶ Office for National Statistics. (2020). *Crime in England and Wales: Police Force Area data tables*.

⁷ Ministry of Justice. (2019). *Payment by Results statistics: October 2015 to March 2019*.

⁸ Ministry of Justice. (2020). *Offender management caseload statistics as at 30th September 2019*.

⁹ Data supplied by the CRC.

CRC has struggled, in particular, to recruit sufficient skilled staff to deliver accredited programmes and structured interventions. Inevitably, the challenges the CRC has faced with recruitment and needing to train up many case managers has had a negative impact on workloads for staff across the organisation and made for a difficult year.

Purple Futures

Purple Futures owns five CRCs: Cheshire and Greater Manchester; Hampshire and Isle of Wight; Humberside, Lincolnshire and North Yorkshire; Merseyside; and West Yorkshire. The five CRCs work collaboratively with one another, sharing learning and resources wherever practicable. At the time of the fieldwork for this inspection, one Chief Executive Officer (CEO) had overall responsibility for HIOW CRC, supported by the enhanced head of operations, whose responsibilities had been extended since the previous inspection. Since April 2020, this CEO has had overall responsibility for the five CRCs, 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.

Contextual facts



| | |
|-----------------|---|
| 2,005 | The number of individuals supervised on community sentences by Hampshire and Isle of Wight CRC. ¹⁰ |
| 816 | The number of individuals supervised post-release by Hampshire and Isle of Wight CRC. ¹⁰ |
| 38.2% | The proportion of Hampshire and Isle of Wight CRC service users with a proven reoffence. ¹¹ |
| 41.3% | The proportion of CRC service users (England and Wales) with a proven reoffence. ¹¹ |
| £10.233m | Annual turnover for January - December 2018. Operating loss after tax was £2.956 million. ¹² |
| £1.413m | Operating loss forecast for January - December 2019. ¹³ |

Performance against targets

| | |
|------------|---|
| 74% | The proportion of individuals recorded as having successfully completed their community orders or suspended sentence orders for Hampshire and Isle of Wight CRC. The performance figure for all England and Wales was 77%, against a target of 75%. ¹⁴ |
| 73% | The proportion of positive compliance outcomes with licences and, where applicable, post-sentence supervision periods for Hampshire and Isle of Wight CRC. The performance figure for all England and Wales was 65%, against a target of 65%. ¹⁵ |
| 92% | The proportion of positive completions of unpaid work requirements for Hampshire and Isle of Wight CRC. The performance figure for all England and Wales was 92%, against a target of 90%. ¹⁶ |

¹⁰ Ministry of Justice. (2020). *Offender management caseload statistics as at 30th September 2019*.

¹¹ Ministry of Justice. (2020). *Proven reoffending, Payment by results, January to March 2018 cohort*.

¹² <https://beta.companieshouse.gov.uk/company/08802540/filing-history>.

¹³ Data supplied by the CRC.

¹⁴ Ministry of Justice. (2019). *CRC Service Level 8, Community performance quarterly statistics, July 2018 – September 2019, Q2*.

¹⁵ Ministry of Justice. (2019). *CRC Assurance Metric J, Community performance quarterly statistics, July 2018 – September 2019, Q2*.

¹⁶ Ministry of Justice. (2019). *CRC Service Level 10, Community performance quarterly statistics, July 2018 – September 2019, Q2*.

1. Organisational delivery



In light of the third fieldwork week not taking place due to COVID-19, our findings on organisational delivery (domain one standards) are based on: the written evidence provided in advance and gathered during fieldwork weeks one and two; our interviews with 50 responsible officers as part of our case inspections (domain two); and 19 domain one meetings completed during weeks one and two. These meetings included focus groups with responsible officers, middle managers, unpaid work staff, resettlement staff, prison resettlement leaders, service users, providers of commissioned services, and strategic managers with responsibility for operations, interventions, women's services, estates and health and safety, equality and diversity, learning and development, hub management and partnerships and stakeholders. A further 17 meetings had been planned, but did not take place.

Since the previous inspection, HIOW CRC has implemented the new Purple Futures operating model, Enabling Our Futures (EOF). Experienced senior case managers (SCMs – equivalent to probation officers) were seconded to the National Probation Service (NPS), and part of their caseload allocated to case managers (equivalent to probation services officers). This strategy directly contributed to the loss of a large number of experienced, trained staff to the NPS and has had a negative impact on organisational delivery.

HIOW CRC performed better than other CRCs in the previous inspection; however, over the past 12 months it has operated with a significant shortage of skilled practitioners, which has compromised its ability to deliver high-quality, personalised and responsive services to all service users. In our last inspection, we commented that the planned restructuring would create a workforce that was markedly below the capacity needed to deliver an effective service. Strategic planning to move to the EOF operating model did not serve to mitigate the risks to service delivery. In particular, the revised banding and allocation tool allows complex work to be allocated to case managers (CMs) who are not yet sufficiently skilled.

Management capacity has been severely tested since the previous inspection. Due to its geographical distance from the other four CRCs owned by Interserve Justice, HIOW CRC is less able to achieve some of the opportunities of scale and resilience. Recruitment in Hampshire can be challenging, particularly towards the north of the county.

Local leaders are cognisant of the challenges the CRC faces. The CRC states that 45 per cent of its CMs have joined the organisation since the last inspection. We found these new recruits to be enthusiastic, with the potential to become good probation practitioners. However, at the time of this inspection their inexperience was evident in their practice. Furthermore, experienced staff were required to carry excessive caseloads while the new CMs were recruited and trained; this has contributed to their inability to deliver high-quality services.

The intervention team, which delivers accredited programmes and rehabilitation activity requirements (RARs), remained understaffed at the time of this inspection. The CRC is drawing on staff volunteering for overtime to assist, but continues to struggle to meet demand.

CRC leaders at the operational level have worked hard since the previous inspection to recruit and train new staff to address the significant gaps in skilled practitioners required to deliver an effective service. While their efforts are now starting to deliver results, this cannot detract from what has been a bruising year. Staff have carried

excessive workloads, sickness absence increased in the summer of 2019 and the quality of service delivery deteriorated.

It is to the credit of the local managers that they have worked cohesively and transparently with their workforce. Staff have had a good understanding of the challenges that the CRC has faced and understand the action managers are taking to address staffing shortfalls. Staff across the organisation have been encouraged to pull together to address gaps in services. The use of overtime has been appreciated. However, covering assessments on a 'piece-rate' basis will inevitably compromise the quality of the assessments and the engagement with the service user.

Managers have worked to provide regular supervision and encourage staff to access training. However, inspectors were concerned that the quality of management oversight was not sufficiently robust.

HIOW CRC is supported by access to timely information and uses this to understand the profile and needs of the caseload and to engage partner agencies and providers. Leaders pay close attention to tracking completion of key targets and monitoring demand against capacity to deliver. They are aware of the gaps in provision of structured interventions. Actions have been taken to address these gaps, including use of overtime, commissioning additional providers and paying attention to attrition levels, so that best use is made of every structured intervention opportunity. It remains the case, however, that too many service users are not receiving the structured interventions intended as part of their supervision.

A specific problem has been Hampshire police failing to respond to requests for domestic abuse checks. The response from children's social care services to safeguarding enquiries can also be problematic. CRC senior leaders have worked hard to address these concerns. There was some indication of improvement just before the inspection fieldwork, but these problems were reflected in the sample of cases inspected for domain two in respect of keeping people safe.

The CRC pays attention to service user engagement, which reinforces its strengths-based desistance approach. It values the service user council and acts on its recommendations for improvement.

The arrangements for information and facilities are supported by an effective combination of centralised pan-Interserve CRC services and local managers. The office facilities are of a high standard, and good efforts have been made to provide women-only facilities for service users. Operational staff are supported with modern technology, which supports flexible working practices. The CRC pays good attention to health and safety arrangements. Monitoring arrangements for compliance with information security are in place and extend to the commissioned providers. The CRC has good analytic capability provided locally and is also supported well by the pan-Interserve CRC centralised services.

Strengths:

- Senior leaders and managers work cohesively and transparently with their staff and keep them apprised of the challenges facing the organisation, as well as its achievements.
- The organisation demonstrates a culture that is committed to learning and development.
- The CRC pays good attention to service user engagement and values service users' contribution to improving service delivery.
- Operational staff are supported with modern technology that encourages their capacity to work flexibly.

Areas for improvement:

- Strategic planning and implementation of organisational changes do not take enough account of the availability of sufficiently trained and skilled staff.
- The banding allocation tool does not take sufficient account of the assessed skills and experience of case managers before allocating complex cases, particularly their ability to identify and manage the risk of harm.
- The intervention team, which delivers accredited programmes and rehabilitation activity requirements (RARs), is not sufficiently staffed to meet demand.
- The nDelius flags for domestic abuse are not always reliably applied; this undermines the quality of important management information.

| | Previous inspection | Current inspection |
|---|--|---|
| 1.1. Leadership |  |  |
| The leadership of the organisation supports and promotes the delivery of a high-quality, personalised and responsive service for all service users. | Good | N/A |

Key data

| | Previous inspection | Current inspection |
|---|---------------------|--------------------|
| Proportion of staff interviewed who agreed that the organisation prioritised quality. ¹⁷ | 36% | 59% |

¹⁷ HMI Probation inspection data.

Based on the evidence gathered both in advance of fieldwork and over the first two weeks of the inspection, including from a wide range of interviews, we explored the following three questions relating to leadership of the service.

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

A clearly defined vision and strategy – Enabling Our Futures – is in place, which is shared across all five of the Purple Futures/Interserve CRCs and articulated in the HIOW CRC annual service plan. The Interchange model provides a strengths-based approach to desistance. This comprises six modules: induction, assessment, plan, networks, review and exit. These modules have remained in place as part of the new operating model.

The enhanced head of operations role makes sure criminal justice partners are kept apprised of the work of HIOW CRC and provides high-quality information about the strategic needs of the caseload to encourage their engagement.

Since the previous inspection, there has been a change to the senior leadership structure. The new, smaller, senior leadership team has worked exceptionally hard to follow through on a recommendation from the year one inspection to improve staff engagement, and there is good evidence that it has made progress. Its work has included a staff conference, two-monthly staff newsletters, senior leadership surgeries within each hub, and the CRC engagement and wellbeing forum. Of those responsible officers interviewed, 59 per cent considered there was a clear vision and strategy to deliver a high-quality service; this is an improvement on 36 per cent in our previous inspection.

Operational senior leaders are passionate about the success of the organisation and make earnest efforts to address barriers that can impair delivery. However, they are also realistic and acknowledge that there have not been sufficient skilled staff to deliver a quality service since the revised operating model was introduced, and since the previous inspection.

Close oversight of the delivery plans takes place through the OPeN icon, which produces daily 'to do' lists (on all desktops), and the performance app. The CRC's governance arrangements are supported by reliable, timely data and analysis.

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

A CRC risk register is in place and kept under review. However, although leaders knew the risks involved in implementing the new operating model (EOF), the action taken did not sufficiently mitigate the damage to service delivery, despite this risk being identified during the previous inspection. The CRC says that a reduction in its income made it necessary to go ahead with the restructure; however, implementation failed to take sufficient account of the recruitment difficulties, the time required to provide training for CMs and consolidate the training, and the skill level of existing CMs in HIOW. The negative impact on service delivery has been profound.

Business continuity arrangements are tested and kept under review. The CRC leadership can be agile. This was demonstrated by leaders' speed in developing contingency plans for COVID-19 during the inspection fieldwork. The CRC is represented at the local HM Prison and Probation Service transition board. However, work to prepare for exit management and transition to the NPS and probation delivery partners was described by managers as immature in their region.

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

The roll-out of the EOF operating model by pan-Purple Futures leaders took insufficient account of the workforce profile of HIOW CRC. The EOF operating model has yet to be completely embedded in HIOW because there are not enough trained staff. At the time of the inspection, senior case managers were yet to receive training and move into the role of coach/mentor to CMs.

The revised banding and allocation tool (BAT) works on the assumption that there are sufficient skilled and experienced CMs; it allocates cases with a domestic abuse or child protection history (unless there is a 75 per cent or above OGRS score) to CMs.¹⁸ The strategy to provide new CMs with core training and withhold complex cases until they have been in post for six months, while thought through, is unrealistic. It underestimates the necessity of experience and further training to consolidate learning. Given the historical HIOW workforce profile, where no domestic abuse cases were allocated to CMs, existing staff also needed the time to be trained and brought up to speed. This strategic decision contributed to significant delivery problems throughout 2019. These difficulties are demonstrated throughout the domain two outcomes and resonate with a finding and recommendation from our recent thematic inspection of domestic abuse.¹⁹

The revised EOF operating model created an intervention team. This team's function continues to be affected by staff vacancies and insufficient trained staff; as such, it is unable to meet demand. Given the small number of staff on the Isle of Wight, it has not been possible to implement EOF there, and practitioners multi-task across the functional responsibilities. In spite of problems with other aspects of the EOF operating model, it has worked well in relation to dedicated women's services.

The Purple Futures remote professional service centre, which provides administrative support to the CRC, appears to be working reasonably smoothly for HIOW. Interserve Justice partners with 3SC to manage supply chain providers. The 3SC manager is based in HIOW and provides contract management, support and governance oversight. This supports smaller providers, which suits HIOW's localism agenda and has helped sustain continuity of some small one-to-one consultancy services in Hampshire.

¹⁸ Offender Group Reconviction Scale.

¹⁹ HMI Probation. (2018). *Domestic abuse: the work undertaken by CRCs*. Recommendation 4: responsible officers have the right training and support to identify and manage the risk of harm posed by perpetrators of domestic abuse.

| | Previous inspection | Current inspection |
|---|--|---|
| 1.2. Staff |  |  |
| Staff within the organisation are empowered to deliver a high-quality, personalised and responsive service for all service users. | Requires improvement | N/A |

| Key staffing data ²⁰ | Previous year | Current year |
|---|---------------|--------------|
| Total staff headcount (FTE) | 158 | 164 |
| Total number of probation officers/SCMs or equivalent (FTE) | 34.3 | 21.1 |
| Total number of probation services officers/CMs or equivalent (FTE) | 47.4 | 66.1 |
| Total number of unfilled posts | 21.8 | 14 |
| Total number of unfilled probation officer (PO) or equivalent grade posts | 3.31 | 0 |
| Sickness absence rate (all staff), average working days lost to sickness, across all grades | unavailable | 13.89 |
| Staff attrition (percentage of all staff leaving in 12-month period) | 18% | 13% |

| Caseload data | Previous year | Current year |
|---|---------------|--------------|
| Average caseload per probation officer (FTE) ²¹ | 47.9 | 50.2 |
| Average caseload per probation services officer (PSO) (FTE) ²¹ | 63.9 | 58.5 |

²⁰ Data supplied by the CRC.

²¹ Data supplied by the CRC.

| | | |
|--|-----|-----|
| Proportion of probation officers (or equivalent) in this CRC describing workload as unmanageable ²² | 88% | 44% |
| Proportion of PSOs (or equivalent) in this CRC describing workload as unmanageable ²² | 81% | 69% |

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 workloads were unmanageable.

Based on the evidence gathered both in advance of fieldwork and over the first two weeks of the inspection, including from a wide range of interviews, we explored the following three questions relating to staffing of the service:

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

While recruitment and training are ongoing, it remains the case that there are not enough trained staff to deliver core services. Achieving the required number of staff for the intervention team has been particularly problematic. The team should have 12.7 programme facilitators, but had only 6 until July 2019. At the time of the inspection it had 10 FTE. This included those off sick and on maternity leave.

There has been a 38 per cent reduction in SCMs since the previous inspection, partly offset by an increase of 21.5 per cent in CMs (excluding additional CMs taken on for the integrated Through the Gate service).

The CRC has been operating below establishment since the last inspection. This has resulted in experienced staff having to carry excessive caseloads, use of staff overtime and cases allocated to staff who lack sufficient experience.

Workloads are reducing from the exceptionally high levels in mid-2019. However, they remain too high, with a reported average of 50 cases per SCM and 58 per CM in January 2020. As new CMs complete their six-month probationary period, they are allocated a full caseload, which in turn reduces the average caseloads. Experienced responsible officers, who had been carrying high caseloads, confirmed that they were noticing this. Only 37 per cent of responsible officers said they had a manageable workload.

Due to the staff shortages, the CRC has not yet been able to fully implement the model, in relation to the SCMs taking on a mentoring role for CMs. Similarly, the lack of resourcing in the intervention team means that the CRC has not been able to deliver the full portfolio of interventions.

The average number of working days lost to sickness is high, at 13.89 (across all grades and including temporary staff/agency staff). Comparative data for the previous year was not available.

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

The CMs interviewed believe they have the skills to manage complex cases, but this is not supported by the domain two data. Inspectors found that recently recruited CMs were enthusiastic and completing processes that they had been asked to do,

²² HMI Probation inspection data.

but 'they do not know what they do not know', hence important risk indicators were not sufficiently addressed or investigated. Of those responsible officers interviewed, 86 per cent thought they had the skills and knowledge necessary to supervise their caseload.

Forty-five per cent of CMs have been recruited in the last year, completing six to eight weeks of core training before they were allocated cases. After six months in post they have been assigned a full or excessive caseload. These cases may include individuals with a history of domestic abuse or child safeguarding concerns. Inspectors concluded that complex casework was being assigned to responsible officers beyond their capability, who had not yet had sufficient time to consolidate their core skills.

The overall age profile of practitioners reduced when HIOW seconded SCMs to the NPS. Men make up 27 per cent of the CRC workforce, with 55 per cent of men employed at Band 3/CM. The percentage of the population of Hampshire and the Isle of Wight whose ethnicity is other than white is 8.35 per cent, which compares with 5.4 per cent of CRC staff. The CRC has been attentive to addressing diversity, and has explored, with some success, recruiting people from outside the university route, such as those from a 'recovery background'. The north of the county remains challenging to recruit to, affected by housing costs and the proximity to London. Planning for replacing the SCMs who transferred to the NPS in January 2019 with CMs did not take sufficient account of the local labour market and time required.

The CRC has an effective approach to service user engagement. It commissions User Voice to provide trained volunteers to support and engage service users. In addition, a volunteer coordinator is in place to support volunteer mentors in undertaking a variety of roles in different settings across the organisation.

The CRC provides opportunities for progression. Experienced staff are encouraged to contribute to training, and middle managers contribute to the development of strategy. Four SCMs have been promoted to Interchange Managers (IMs – senior probation officer equivalents) since December 2018. Men make up 30 per cent of the IM staff group. Sixteen per cent of the workforce identify as disabled.

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

Most practitioners reported that they received regular supervision (84 per cent) and spoke positively of their managers. This is encouraging but, given our assessment of the quality of management oversight, supervision is not reliably addressing areas where practice needs to improve. Staff reported that there is a range of approaches to supervision, including individual supervision, group supervision and peer learning events.

Management oversight is provided but this was found to be ineffective, insufficient or absent in 72 per cent of cases inspected in domain two. Middle managers acknowledged that they struggle to complete the enhanced management oversight required to meet the CRC policy. Given the large number of new CMs in the community teams, this task has placed significant demand on their managers, so managers from other functions have assisted. The CRC's own IQAM results for December 2019 reported that practice was not delivering the expected level of service, although these assessments judged work to be of a higher quality than that judged by inspectors in the domain two sample, providing some insight into the quality of management oversight.

Given the large number of vacancies, the CRC's learning and development board has kept its approach to recruitment and induction under review. One good initiative

was the introduction of a pre-interview assessment day, which has helped applicants understand what the work entails and reduced subsequent attrition. Arrangements for appraisal are in place, and there is a clear approach to capturing training needs; these are analysed by the learning and development board and inform the training plan.

For standalone unpaid work cases, IQAM is completed quarterly by a quality officer in the centralised Interserve practice team. Unpaid work supervisors considered that management oversight has become limited since the CRC reduced to one unpaid work manager. A quarterly centralised unpaid work supervisor meeting seeks to incorporate training.

Are arrangements for learning and development comprehensive and responsive?

The CRC has a culture that values learning across the organisation and there is justified pride across the management group in having delivered a substantial training programme to help address the skill shortfalls. Senior leaders were cognisant of the shortfall in skills and focused on attending to this, recognising that it will take time to develop skilled practitioners. The HIOW CRC training plan is kept under regular review by the learning and development board, which plans and monitors delivery of classroom events and virtual learning. It was impressive that, of the responsible officers interviewed, 73 per cent considered that the organisation provides sufficient in-service training and promotes a culture of continuous learning.

The CRC has made considerable efforts to deliver core training to a large number of new CMs and Through the Gate resettlement staff; much of the responsibility for training delivery has been absorbed by managers across the organisation in addition to their normal responsibilities. There is a thought-through induction and core skills training programme for new staff, which has been delivered in cohorts. The core skills programme was extended from six to eight weeks following feedback from participants.

Since the previous inspection, all practitioners have been required to attend the risk of harm module of the core training and given the opportunity to attend other modules, including SARA 3 (for domestic abuse assessments), where this was identified as helpful. Learning and development has further been supported by coaching and peer-led learning workshops.

We were pleased to see that the organisation was not overly reliant on online training and that it had prioritised classroom-based activity for induction and core training. Interserve withdrew the opportunity for CRC staff to enrol for the professional qualification in probation (PQiP) training, following the Ministry of Justice announcement of the early termination of the CRC contracts. However, three NPS PQiP staff are currently based within the CRC for their training, with a further five places agreed for the next PQiP cohort, as part of the plans for a unified NPS for the South-Central region.

Do managers pay sufficient attention to staff engagement?

The senior leadership team are visible in the hub offices and also in HM Prison Winchester, where the Through the Gate team is located. There are good opportunities for staff to give feedback through senior leader surgeries, local wellbeing and engagement forums and the staff survey. Unpaid work supervisors, however, complain that they have less opportunity to engage, although they were recently brought together for a development day. Staff representatives from each hub can raise issues at, and contribute to, the two-monthly engagement and wellbeing

forum, which is chaired by the enhanced head of operations. Interchange managers have a private meeting, before the CRC leadership meetings, to collectively agree any issues they wish to raise with senior managers. Responsible officers confirmed that arrangements are in place to consult and engage with staff.

It is worth noting that, while 78 per cent of SCMs reported that appropriate attention was paid to staff wellbeing, only 39 per cent of CMs took the same view. In contrast, 80 per cent of responsible officers interviewed thought appropriate attention was given to staff safety.

Staff award arrangements are in place, which range from local team and hub award and recognition arrangements, to the CRC reward and recognition voucher scheme, IQAM good practice awards and nominations for national awards and recognition.

The CRC newsletter recognises achievements. Of the responsible officers interviewed, 59 per cent confirmed that managers recognise and reward exceptional work. Feedback from staff is collated and analysed every two months.

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

Based on the evidence gathered both in advance of fieldwork and over the first two weeks of the inspection, including from a wide range of interviews, we explored the following three questions relating to services.

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 ²³ | All CRCs in year one | This CRC in current inspection |
|---|----------------------|--------------------------------|
| Proportion of caseload who are female | 17% | 18% |
| Proportion of inspected cases who are black or minority ethnic | 14% | 9% |
| Proportion of inspected cases with a disability | 49% | 54% |
| Proportion of inspected cases where inspectors identified substance misuse problems | 72% | 75% |

²³ HMI Probation inspection data.

| | | |
|---|-----|-----|
| Proportion of inspected cases where inspectors identified domestic abuse issues | 41% | 37% |
| Proportion of inspected cases where inspectors identified child safeguarding issues | 32% | 23% |

The reducing reoffending strategy takes account of the strategic needs analysis, which informs how interventions and services are targeted. Service users in the current 'payment by results' cohort who are identified as being the most likely to reoffend are placed on the 'purple' list. This helps to ensure they are prioritised and that resources are targeted at them. While there is an overlap between those on the purple list and those receiving Integrated Offender Management (IOM), the groups are not identical because the police criteria for IOM are not aligned with those for the purple list. The performance information unit tracks purple cases for reoffending monthly and identifies when they are due to be released from custody.

There is good analysis and monitoring of demand for accredited programmes, supported by a well-maintained coordination and scheduling database, which tracks demand and allocates individuals according to programme availability. The suite of rehabilitation activity requirement (RAR) interventions available from the published portfolio is comprehensive and designed to address the needs of the caseload; however, the actual services available are more limited due to the lack of capacity in trained staff. Cases that are unlikely to complete requirements within the timeframe of the sentence are identified. We learned that sentencers can be resistant to agreeing to remove requirements where the service user's ill-health is put forward to explain that the requirement is unworkable.

Good analysis of criminogenic needs is undertaken, broken down by nDelius flags, OGRS, responsible officer or team, locality and protected characteristics, using the reoffending analysis tool (RAT). The RAT is also used to monitor cohorts against payment by results. Those leaving custody with accommodation and drug misuse issues made up 43 per cent of all post-release cases. This analysis is used to inform strategic planning for the resettlement and Through the Gate teams. Service users identified as BAME make up seven per cent of the caseload, which is just below the general population profile²⁴. However, this should be treated with caution given that the identity of 12 per cent is not recorded.

The women's specialist team has developed a reducing reoffending plan specifically for women. This is supported by a range of RAR provisions to meet women's needs. Women make up 16 per cent of the HIOW caseload. The CRC uses their needs analysis to inform the women's services they commission in HIOW, with a particular focus on access to mental health and counselling services. 3SC provide performance management for the third sector commissioned services and provide the contract management for these services.

The enhanced head of operations makes good use of the strategic needs analysis to engage strategic partners in her capacity as co-chair of the Reducing Reoffending Board.

²⁴ Office for National Statistics. (2011). *Ethnic group, local authorities in England and Wales*.

Does the CRC provide the volume, range and quality of services to meet the needs of the service users?²⁵

CRCs deliver accredited programmes, including Building Better Relationships (BBR), the Thinking Skills Programme (TSP), Resolve (for males – violent and aggressive behaviour) and the Drink Impaired Drivers Scheme (DID). They also provide structured interventions delivered as part of RARs.

²⁵ Data supplied by CRC.

| | Previous inspection | Current inspection |
|---|----------------------------|---------------------------|
| Average waiting time for BBR | 38.7 weeks | 35.3 weeks |
| Average waiting time for TSP | 31.9 weeks | 33.9 weeks |
| Average waiting time for RAR (<i>for cases that did start RAR work</i>) | 11.1 weeks | 10.3 weeks |
| Successful completion BBR | 88.39% | 89.09% |
| Successful completion TSP | 70.83% | 92.31% |
| Successful completion of RAR | 68.79% | 65.48% |

The intervention team is carrying significant vacancies and unable to meet demand. Many responsible officers, including those with limited experience, work overtime to try to address the backlog in delivery of structured interventions. All CMs who have completed the core skills training are potentially able to deliver RAR interventions; most of these interventions do not require additional training. These are delivered from an off-the-shelf manual, supported by an initial PowerPoint presentation.

The scheduling, allocation, attendance, completion and attrition for accredited programmes are closely monitored to maximise capacity and limit the number of non-completions. Accredited programmes are delivered in the evenings across all three hubs and on Saturdays in the north and east hubs. The CRC is attentive to quality in its delivery of the portfolio of accredited programmes; this has been validated under the HMPPS interventions integrity framework. Those living on the Isle of Wight who are ordered to complete accredited programmes or group structured RAR work are required to travel to the mainland to complete their course.

Despite the reduced capacity of the CRC to deliver accredited programmes due to a shortage in trained staff, the CRC has been keen to retain the offer of the four accredited programmes. BBR is prioritised for delivery, followed by TSP. As of December 2019, 47 service users were waiting to start the DID programme, with 7 undertaking the programme. In respect of the Resolve programme, 14 were undertaking the programme, with a further 32 on the waiting list. This compares with 125 undertaking BBR, with 168 on the waiting list and 40 undertaking TSP, with 58 on the waiting list.

To reduce the backlog of people waiting to complete the BBR programme, the CRC has run bonus schemes for SCMs and intervention staff who commit to delivering additional programmes. For the north hub, the CRC has commissioned an outside provider, RISE, to deliver five BBR programmes. Despite these efforts, the backlog of individuals waiting to begin structured interventions remains considerable. This was evident in our case sample, where services to effectively support the individual's desistance were delivered in only 43 per cent of cases inspected. Responsible officers frequently commented that they were unable to enrol service users onto structured interventions.

A range of specific services for women are in place: this includes a one-to-one structured bespoke programme for women, including for those living on the Isle of Wight. Commissioned providers, managed by 3SC, deliver one-to-one counselling work and meet low-level mental health needs. Education, training and employment (ETE) provision had been poor, but has improved since the start of 2020 following a

new initiative in the east hub, where unemployed service users carrying out unpaid work are allocated to a certified course with Romsey college. Plans were in hand to expand provision across the county at the time of the inspection fieldwork.

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

Following a change to the email address for Interserve employees, Hampshire police had refused to share domestic abuse call-out information. This was compromising the CRC's efforts to address and manage concerns about risk of harm. The enhanced head of operations had recently achieved some resolution after writing that HMIP would be inspecting the service. While good strategic relationships were reported to be in place, responsible officers reported that children's social care services can be slow or resistant to share information due to their own work pressures. They gave examples of when social care staff would only respond to an enquiry if the family is known to them, leaving other enquiries unanswered.

Commissioned providers have good relationships with the 3SC manager. Providers spoke positively about the arrangement with 3SC and, for the smaller providers, it was clear that they benefit from opportunities to work together collaboratively and access resources and guidance. However, some providers commented that demands for data can be onerous.

Relationships with the courts and NPS regarding interventions are maintained. CRC staff reported that the courts could be resistant to amending orders deemed unworkable for health reasons. Beyond the delivery of the BBR programme, the NPS makes limited use of the rate card services. Where RAR activity is purchased, it tends to call upon the commissioned one-to-one delivery services for women, which were respected and in place before the transition from Hampshire Probation Trust.

Senior leaders are working with the NPS to secure regular access to sentencers and provide a HIOW newsletter for sentencers.

The CRC leaders contribute to key strategic partnership meetings. They have worked hard to make sure the work of the CRC is understood and to exploit opportunities for collaboration. Other public services were described as initially distrustful of a privately-owned organisation providing probation services following *Transforming Rehabilitation*. The senior leaders, who have remained familiar names within Hampshire throughout, have worked hard to overcome these barriers and reported strong, influential and effective relationships.

Service user involvement

The CRC commissions and works closely with User Voice, a charity that supports and promotes the service user's perspective within the criminal justice system. A clear framework, supported by a coordinator, is in place to support User Voice trained volunteers to meet service users at each hub and gather their views.

Service users' proposals for improvements to the service are considered at the Service User Council, which meets every two months. Where proposals are agreed, clear actions are recorded, implemented and monitored to improve outcomes. There is a high level of commitment from senior management, and the arrangements are designed to be inclusive and representative of staff from all operational locations. Inspectors verified an initiative that had been designed and led by User Voice volunteers. A handbook of local services and resources has been created and made available in waiting rooms. The CRC and User Voice have evaluated how this handbook has been used. They noted that, while the handbook was seen by only 27 per cent of those interviewed, it was found to be useful by 75 per cent of these

service users. The User Voice representatives are exploring how to improve awareness of the handbook and their services further.

Service users are encouraged to volunteer for User Voice. They can receive training and progress to sessional work or secure employment with User Voice. The User Voice Council also provides a forum for the CRC to consider the results of the annual service user survey and take actions for improvement. There was good evidence that the CRC values and analyses the results from the annual survey. Five of the six service users we spoke to indicated that they found one-to-one contact useful. Group supervision was felt to be the least useful contact type. This raises some challenges for the operating model, which has group work as the approach for many of the structured interventions. When we explored this with members of User Voice, their response was measured and constructive; for example, they considered how peer mentors might be able to help alleviate anxieties.

The CRC is rightly proud of its commitment to supporting individuals through their journey to desistance. It has actively sought to recruit individuals into the organisation from a 'recovery background', with examples of individuals progressing to become case managers.

Desistance can be described as a personal journey. The following account from one service user we spoke to illustrates this well:

“Recently my responsible officer has helped, looking at employment courses and stuff. I am clearer now about what I'm getting help with. I have a good relationship with my officer now. He has listened to me and not penalised me for being breached (received 10 additional hours of unpaid work). They say everyone makes mistakes; they have not judged me. I am now moving on and getting help to stay out of trouble”.

Another highlighted the influential role an officer can play in encouraging a person's motivation:

“It has given me the boost I've needed to sort myself out. I can be open with her”.

Unpaid work

Unpaid work is referred to as 'community payback' in this CRC. Those sentenced to an unpaid work requirement must complete between 40 and 300 hours of unpaid work in the community, to serve the purposes of punishment and rehabilitation. In HIOW, most service users undertake a group induction for unpaid work; these are delivered every Wednesday and Saturday morning. After completing the induction in the morning, the service user usually takes part in unpaid work the same afternoon in a generic project. The CRC has found that the opportunity to experience an unpaid work project immediately after the induction helps to reduce barriers and improve engagement. Individuals are then risk-assessed for the most suitable placement available, which can either be in a group or in an individual placement.

Placements for individuals assessed as a high risk of harm and/or of serious concern will be overseen and endorsed by the community payback manager. Group projects provide placements for 55 per cent of all hours worked, with the remainder fulfilled by individual placements, often in charity shops. This supports the capacity to address diverse needs. Women are usually provided with an individual placement, but may be placed in a mixed group to manage any specific risks. The CRC has good arrangements in place to provide group placements with the local authorities, parish councils and conservation projects across Hampshire.

Standalone unpaid work orders are managed remotely by a dedicated team at the professional services centre. A centralised, bespoke quality assurance framework is in place to monitor this work.

Through the Gate

In 2018, the Ministry of Justice announced additional investment of £22 million per year to further stabilise and improve delivery of Through the Gate by providing an enhanced Through the Gate specification delivered by CRCs in prisons. These arrangements have been in place since 01 April 2019. The HIOW provision of Through the Gate services was revised in collaboration with relevant agencies. They analysed the needs of the caseload, and identified the relevant agency with the right expertise to meet the need. Our inspection of Through the Gate cases found this area of work to be Outstanding, with cooperative working relationships described with key agencies (and verified by prison resettlement managers), both with CRC and Catch 22 staff.

The Integrated Through the Gate team is based at HMP Winchester and provides services to HMP Winchester and HMP Coldingley resettlement prisons. HIOW CRC has recruited and trained additional resettlement staff and built upon the services already in place delivered by Catch 22. The approach tailors services to meet different levels of need and includes: brief and group interventions that are delivered in custody; interventions that can be continued in the community as part of a licence; coordination throughout the journey by a named case manager; and, where appropriate, a high intensity transition team (HITT) to support those who are vulnerable or have complex needs. Prisoners are assessed, using the basic custody screening tool, as to whether they require access to the primary service – level 1, referral to a specialist service – level 2, or have complex needs or are vulnerable – level 3 (HITT).

| | Previous inspection | Current inspection |
|--|--|---|
| 1.4. Information and facilities |  |  |
| Timely and relevant information is available, and appropriate facilities are in place to support a high-quality, personalised and responsive approach for all service users. | Outstanding | N/A |

Based on the evidence gathered both in advance of fieldwork and over the first two weeks of the inspection, including from a wide range of interviews, we explored the following three questions relating to information and facilities.

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

A desktop platform called Wisdom provides access to both local HIOW policies and procedures and those that apply across Interserve Justice. The system does not allow the CRC to monitor how well used it is, but it is promoted by managers. Local teams deliver regular huddles or workshops to deliver key messages and policy/practice changes.

Responsible officers confirmed that they are aware of Wisdom, but do not access it regularly due to time pressures. Some commented that the system is not intuitive. Interchange support officers (ISOs) are located in the east and west hubs and provide support to the north hub to encourage and support staff to make use of Wisdom.

The main organisational policies are coordinated and issued by Interserve Justice across the five Purple Futures CRCs; and are kept under review by the change control board. Practice briefs are issued explaining new policies and procedures.

HIOW CRC has developed a case management toolkit tile within Wisdom, to improve access to core guidance and policy relevant to safeguarding and public protection in Hampshire. Newly recruited CMs commented that they found this helpful. The majority of responsible officers interviewed confirmed that there was a clear policy about case recording to support defensible decision-making and effective communication.

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

Three of the four operational main offices continue to be shared with the NPS. There are close working relationships on the Isle of Wight, where staff from both organisations share office space. The number of reporting centres has been reviewed and reduced slightly since our previous inspection, shaped by a desire to deliver group-based interventions from the main offices. Services for female service users that were previously delivered at three different locations are now provided at a dedicated women's centre in Cosham for the east hub.

Separate women-only reporting centres are available in the north (two locations), the east and on the Isle of Wight. Currently, there is no dedicated women-only facility in the west hub and the CRC makes an effort to limit attendance to women only on one day, although this is compromised to some extent by the reception being shared with NPS service users.

The estate and facilities management for each hub is attended to by the interchange support officers (ISOs). A longstanding vacancy for the north ISO is covered by the local interchange managers and east and west ISOs.

All offices provide suitable facilities of a good standard, including one-to-one and group work space; there is also access to reporting centres for the smaller communities for one-to-one work.

Staff are provided with personal safety devices, but these are under-used due to the low number of home visits. The CRC is piloting the use of a more modern device.

It was noticeable that staff expressed more concerns about their safety and wellbeing in the north of the area, possibly influenced by the lack of dedicated ISO support there.

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

Information and communications technology (ICT) infrastructure is supported by a pan-CRC Interserve Justice team and monitored on a monthly basis.

Responsible officers are given laptops and mobile telephones to support them to work remotely. Staff are encouraged to take their ICT kit home to ensure business continuity if offices cannot be accessed.

Unlike in other Purple Futures' CRCs recently inspected, we heard little concern about the operation of the central professional services centre in Liverpool, with staff reporting that they were familiar with their remote point of contact, if required.

3SC monitors compliance with information security policies well, and ensures that commissioned providers avoid breaches of security. Arrangements for exchanging information vary according to the size of the commissioned provider, with some having direct access to the case management system and others delivering within the CRC premises and passing information securely to the professional service centre.

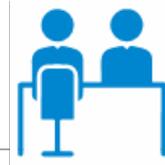
Is analysis, evidence and learning used effectively to drive improvement?

The learning and development board uses enhanced management oversight, IQAM and case audits to identify training needs. We found that managers can have a 'rose tinted' view of the work they oversee and do not pay sufficient attention to the accurate use of domestic abuse or child safeguarding flags on nDelius. This in turn can weaken the quality of and analysis of important data. From our domain two sample of supervised cases, it was unclear if there were current domestic abuse concerns in 22 per cent of cases. This accords with our findings in the recent HM Inspectorate of Probation thematic inspection of domestic abuse, which recommended that: 'domestic abuse cases are flagged appropriately on the information management systems to provide an accurate national picture of domestic abuse cases managed by CRCs'.²⁶

A well-maintained 'dashboard' reports on commencement of new court orders and breach rates (by age, gender, ethnicity), with data reviewed quarterly. The RAT is used to monitor reoffending outcomes for the cohorts against the payment by results mechanism, analyse the protected characteristics and criminogenic needs of the caseload and inform strategic planning. The performance information unit has analysed the successful completions of community orders; this has identified that service users with mental health issues have lower completion rates. It also revealed that those with learning disabilities and dyslexia have lower completion rates (six per cent and eight per cent lower, respectively). The CRC was considering how it can address this issue.

In conjunction with Portsmouth University, the CRC has supported research opportunities for qualified staff to undertake research examining women's services and achieve MSc qualifications. A pan-Interserve CRC initiative is underway to analyse the role of the partner link worker and proven reoffenders undertaking BBR. HIOW is supported by the central Interserve Justice evaluation officer, who is responsible for evaluation of all RAR activities. Good monitoring arrangements are in place, which break down analysis to the respective CRCs for dissemination. Analysis and learning from serious further offences are completed and disseminated.

²⁶ HMI Probation. (2018), *Domestic abuse: the work undertaken by CRCs*.



2. Case supervision

We inspected 66 community sentence cases and 31 post-release supervision cases; interviewed 50 responsible officers and 6 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 81 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.

In this CRC, the fact that fewer than 50 per cent of cases met all our requirements in terms of assessment, planning, implementation and delivery and reviewing led to our judgements of 'Inadequate' for these four standards of work.

While it is clear that there is enthusiasm and commitment to deliver effective case supervision, there is also a realistic acknowledgement that, throughout the period since the CRC was last inspected, it has lacked sufficient skilled staff. This issue has had a direct impact on the quality of case supervision delivered. Workloads at all levels have been high. Staff are working beyond their capacity and, in too many instances, their capability. A shortage of sufficiently experienced skilled and trained staff has meant that the complexity of cases, particularly within the management of medium risk of serious harm cases, has not been sufficiently explored, assessed or responded to. Those staff with the necessary skills and experience have been overloaded and unable to give sufficient time to provide the quality of work necessary. Managers' time and energy has focused on recruitment, training and providing encouragement to novice responsible officers. This has possibly contributed to managers taking a rose-tinted view of the work they oversee, and overlooking important public protection issues that require more attention.

Strengths:

- Responsible officers usually identify the reasons why an individual offends.
- Planning work focuses on reoffending and supports desistance for those released on post-release supervision.
- Responsible officers are flexible and responsive in their approach, which supports the individual's ability to engage and comply with their supervision.
- Attention to compliance and enforcement is consistent and appropriate.

Areas for improvement:

- Responsible officers lack sufficient analytical skills when assessing the reasons for reoffending, which is necessary to inform planning and delivery.
- Arrangements to support the timely sharing of information with key agencies, in particular, the police and children's social care services, to keep people safe are not reliable.
- Responsible officers cannot access sufficient interventions to meet the requirements of court orders, so that the interventions can be completed within the period of supervision.

- The quality of management oversight does not reliably address past behaviour and the verification of information linked to risk of harm, including consideration of the use of home visits.
- Responsible officers lack the skills to analyse and coordinate information with other agencies in the management of risk of harm.
- Insufficient attention is given to making sure reviews are completed where there are changes in factors related to risk of harm.

| | Previous inspection | Current inspection |
|--|--|---|
| 2.1. Assessment |  |  |
| Assessment is well informed, analytical and personalised, actively involving the service user. | Good | Inadequate |

Our rating²⁷ for assessment is based on the percentage of cases we inspected being judged satisfactory against three key questions:

| Comparison with Hampshire and Isle of Wight in previous inspection and all CRCs | Previous inspection | Current inspection | All CRCs ²⁸ |
|---|---------------------|--------------------|------------------------|
| Does assessment focus sufficiently on engaging the service user? ²⁹ | 79% | 48% | 68% |
| Does assessment focus sufficiently on the factors linked to offending and desistance? ²⁹ | 77% | 60% | 63% |
| Does assessment focus sufficiently on keeping other people safe? ²⁹ | 75% | 39% | 55% |

The quality of assessment work has significantly deteriorated at every level since our last inspection. The decline is particularly marked in respect of activity to engage the service user at the start of supervision and the attention given to keeping other people safe. The CRC is rated as 'Inadequate' for assessment, as the lowest scores for the key questions are 48 per cent for assessment to engage the service user and 39 per cent for assessment to keep other people safe.

²⁷ 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.

²⁸ HMI Probation inspection data, from inspections conducted between June 2018 and June 2019.

²⁹ The answers to these key questions are underpinned by more detailed 'prompts'. The table in Annexe 4 illustrates the percentage of the case sample with a satisfactory 'yes' response to each prompt.

Does assessment focus sufficiently on engaging the service user?

Assessment work undertaken to engage individuals is assessed as sufficient in just under half of the cases we inspected.

One possible explanation for the decline in the quality of work to assess an individual's motivation at the start of their supervision, was that our case sample coincided with a period when the CRC was operating with a high number of responsible officer vacancies and those recently recruited had not yet completed sufficient training. To address the shortfall in capacity to carry out this work, the CRC paid existing responsible officers to work overtime to complete initial assessments, without necessarily meeting with the individual. While this contingency arrangement met service level measures in the CRC contract, it failed to engage individuals well, as a comment from an inspector illustrates:

Poor practice example

An initial OASys was completed late by an officer not known to Sheila, as sessional work. It was over-reliant on historical assessments and had not taken account of Sheila's current circumstances and vulnerability.

In some instances, responsible officers stated they simply had not had time to complete an assessment due to their high caseload.

Induction for men is usually delivered in groups, where individuals complete a self-assessment questionnaire; however, the way this information was used to inform the initial assessment was variable. The following comment from an inspector highlights this issue:

Poor practice example

The initial assessment was completed without service user input. Two relevant factors to engagement are that Cliff cannot read/write and is from the travelling community. There is very brief reference to this but no consideration of the impact on engagement or whether Cliff might have a learning disability.

In contrast, where responsible officers took time to assess and engage an individual and take account of the person's needs and personal circumstances, it was possible to see how this could support the individual:

Good practice example

At the initial appointment there is a discussion around Jane's personal and diversity needs and Jane identifies that she has significant health concerns. These are further explored during the unpaid work induction. Jane has parental responsibilities and is a single parent. There is evidence that the responsible officer takes this on board and checks out how this might impact on her ability to engage in the court order, which includes supervision, RAR, unpaid work and the proposal of engagement with the Women's Centre.

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

In three-fifths of our case sample we found that assessment focused sufficiently on the factors linked to offending and desistance. Analysis of the case sample, however, showed that, while this was achieved in three out of four of the cases managed by an SCM, we found it in only just over half of the cases managed by a CM.

Less than two-fifths of cases sufficiently assessed and analysed factors linked to offending behaviour. When this data was explored, we found that responsible officers were good at identifying the factors associated with offending behaviour (81 per cent). However, their ability to analyse how these factors have contributed to the likelihood of further offending was considerably weaker (39 per cent). This is perhaps not surprising for practitioners who have received only six to eight weeks of core training and are in their first year of practice, and demonstrates the importance of experience and the opportunity to develop skills and consolidate practice following classroom training.

Does assessment focus sufficiently on keeping other people safe?

Practice within the CRC, in relation to assessing how to keep other people safe, has fallen from 75 per cent of cases being satisfactory to only 39 per cent when assessed against our standard. A combination of unhelpful factors has contributed to this downward spiral.

Since our previous inspection, Interserve Justice had implemented a new corporate email address, which Hampshire Constabulary initially considered not sufficiently secure to allow for the exchange of domestic abuse call-out information. This resulted in safeguarding and call-out information from the constabulary ceasing. Partial resolution was achieved a few weeks before the fieldwork for this inspection commenced. Following intervention by a senior manager, responsible officers started to receive essential timely information from the police on domestic abuse call-outs relating to known service users, when they made an enquiry.

It remains a concern that the police will not run call-out checks on all cases – only those with an offence related to domestic abuse – and the CRC is not automatically informed of domestic abuse call-outs for individuals under its supervision. Domestic abuse checks were not undertaken in 51 per cent of the cases, contributing to critical risk of harm information not being considered. Some responsible officers recorded the following statement to explain:

'Local arrangements with social services and the police safeguarding unit are not currently in place to allow for safeguarding enquiries to be made in every single case. As there are no known concerns regarding children or domestic abuse in this case, initial safeguarding enquiries have not been made. If concerns are raised at a later point, such enquiries will promptly be made.'

The following case note by an inspector illustrates how important it is that practitioners are provided with this information:

Poor practice example

No domestic abuse or children's social care services checks were undertaken at court and Cameron was assessed as a low risk of harm. Following allocation, it transpired that his children were subject to child protection procedures due to his domestic abuse history, which included allegations of rape and having held his ex-partner's head under water on more than one occasion, alongside other call-outs'

In almost half of the case sample, relevant child safeguarding information-sharing had not taken place. In less than a third of the assessments of relevant cases, inspectors concluded that the assessment of risk of harm had drawn sufficiently on available sources of information, including past behaviour and convictions, or involved other relevant agencies. This is a critical area for skill development, particularly for the CMs, who were either in the first year of learning their practice or

lacked experience in managing cases with a domestic abuse or child safeguarding history. Another inspector’s observation illustrates this issue:

Poor practice example

Lewis’s risk of harm assessment is quite superficial and does not draw upon the domestic abuse information gained pre-sentence. This includes details of a historical attempt of rape of his partner and domestic abuse incidents going back to 2014. Analysis of these incidents would have given a clearer understanding about the nature of the risk of harm. There is reference to children’s social care services involvement, although no evidence of the ‘child in need’ plan or details of the social worker’s assessment informing the initial assessment’.

The quality of assessment of risk of harm which takes account of past behaviour and convictions was found to be sufficient in three out of four cases completed by an SCM, compared with only half for CMs.

The CRC’s internal analysis indicated that 26 per cent of the caseload were assessed as low risk of harm; however, our inspectors assessed that this was the case for only 19 per cent of the case sample, indicating that risk of harm indicators had not been sufficiently considered. The centralised allocation process may also encourage responsible officers to focus on process and to be less curious when allocated a band one case:

“In interview, the responsible officer stated that she only completed Layer 1 OASys on all her cases as these were categorised as Band 1 Engagement Team cases. Domestic abuse checks were also not said to be required in these cases.”

| | Previous inspection | Current inspection |
|--|--|---|
| 2.2. Planning |  |  |
| Planning is well informed, holistic and personalised, actively involving the service user. | Good | Inadequate |

Our rating³⁰ for planning is based on the percentage of cases we inspected being judged satisfactory against three key questions:

³⁰ 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.

| Comparison with Hampshire and Isle of Wight in previous inspection and all CRCs | Previous inspection | Current inspection | All CRCs ³¹ |
|--|---------------------|--------------------|------------------------|
| Does planning focus sufficiently on engaging the service user? ³² | 79% | 54% | 63% |
| Does planning focus sufficiently on reducing reoffending and supporting the service user's desistance? ³² | 78% | 66% | 64% |
| Does planning focus sufficiently on keeping other people safe? ³² | 63% | 42% | 46% |

The quality of planning work has deteriorated since our previous inspection, although this standard provides the strongest area of practice for case supervision within this inspection. The CRC was rated as 'Inadequate' for planning, as the lowest score for the key questions was 42 per cent for planning work to keep other people safe, falling within the rating band for 'Inadequate'.

Does planning focus sufficiently on engaging the service user?

High-quality planning work is achieved when the individual can see that their circumstances are recognised and they can be involved in, and contribute and commit to, the work that they are expected to complete. Analysis of the inspection data demonstrated that the quality of planning work to engage individuals was consistently better in resettlement cases than in community sentences. This supports our findings for the Through the Gate work taking place, where good-quality resettlement plans can enhance the quality of initial sentence planning on release.

Good practice example

The planning starts pre-release with the support of Through the Gate and PACT.³³ Planning is proposed and then discussed, with Adam being involved from the pre-release stage, including details and the rationale for additional licence conditions. The plan takes into account Adam's previous non-compliance and support is put in place to promote engagement, including using his motivation to engage with 'Saints for Sports' as a positive factor to improve self-esteem.

Perhaps not surprisingly, the initial sentence plans of the more complex cases held by an SCM set out more clearly what was expected of an individual in respect of the level, pattern and type of contact. It was concerning that some responsible officers planned for monthly reporting early in the order, stating that they had been encouraged to do this to mitigate the effects of managing a high caseload.

There was a risk that, when male service users attended group induction and were assessed as a low risk of harm, they would be directed to report to the engagement hub irrespective of their individual needs. In contrast, where individual needs were recognised and addressed, engagement and compliance could be enhanced:

³¹ HMI Probation inspection data, from inspections conducted between June 2018 and June 2019.

³² 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.

³³ Prison Advice and Care Trust.

Good practice example

The responsible officer was able to consider Barney's attendance, by thinking of his mental health and impact on travel arrangements to the probation office. The responsible officer allows his mother to accompany him to appointments due to his health condition of anxiety.

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

Overall, the quality of planning to address factors to reduce reoffending and support desistance was good. For SCMs, this work was found to be outstanding, with good attention given to offending-related factors and ensuring the most critical are prioritised.

Rather than complete the sentence plan template built into OASys, responsible officers completed a word-based sentence plan, which could easily be shared with the individual. This activity was carried out consistently, with 82 per cent of the case sample having a written plan in place to address reducing reoffending and support desistance. However, there was less convincing evidence (53 per cent) that these plans had been completed with the person concerned and built upon their strengths and protective factors.

The quality of planning work to reduce reoffending and support the service user's desistance was noticeably stronger in the west and east hubs, possibly linked to the availability of intervention services, which responsible officers reported were less easily available in the north hub. The following illustrates where this work was carefully thought through:

Good practice example

The sentence plan identified a referral to alcohol treatment services and prosocial activities. A referral was made for Shaun to receive mentoring and bereavement services to address his emotional wellbeing in relation to the death of his father. Potential barriers were identified as disengagement from probation and support services, not having a support network, negative influences from his peer group and continuing his misuse of alcohol.

Does planning focus sufficiently on keeping other people safe?

It was disappointing and concerning that the quality of planning work to keep people safe had deteriorated since the previous inspection. There was a noticeable difference in practice, with the SCMs consistently addressing public protection indicators more effectively than CMs across all the prompt questions for this key question. It was of concern that in only seven of twenty-four relevant cases did CMs undertake adequate planning to address domestic abuse. In-service training to address domestic abuse had been provided during 2019.

Managers acknowledged that managing cases with a domestic abuse profile was not just a new activity for the newly recruited responsible officers, it had also been a new activity for experienced case managers too, who were not routinely allocated such cases in HIOW CRC until the EOF operating model was implemented at the start of 2019. The harsh reality is that it takes time and experience to develop these skills, which are unlikely to be cemented by classroom training alone or six months from starting work as a new case manager.

While care should be taken in interpreting the results from smaller sub-samples, practice in respect of planning work to keep people safe was noticeably stronger in the east hub (64 per cent, 21 out of 33 cases) than in the west hub (26 per cent or 9

out of 34 cases) and north hub (29 per cent or 4 out of 14 cases). The following case provides an example of good risk management planning:

Good practice example

The sentence plan identified a requirement to refer Terry to the HELP group to address domestic abuse issues and to liaise with children's social care services to address safeguarding issues. Contingency planning identified: reporting to be increased if risk escalated. If Terry were to enter a new relationship or return to reside with his previous partner, a referral to children's social care services would be made. Any increase in alcohol/drug use would also bring consideration to a referral being made to relevant services. Any failures to comply with either RAR days or interventions should result in discussion with the manager regarding possible breach action.

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

Our rating³⁴ for implementation and delivery is based on the percentage of cases we inspected being judged satisfactory against three key questions:

| Comparison with Hampshire and Isle of Wight in previous inspection and all CRCs | Previous inspection | Current inspection | All CRCs ³⁵ |
|---|---------------------|--------------------|------------------------|
| Is the sentence/post-custody period implemented effectively, with a focus on engaging the service user? ³⁶ | 75% | 63% | 70% |
| Does the implementation and delivery of services effectively support the service user's desistance? ³⁶ | 59% | 43% | 52% |
| Does the implementation and delivery of services effectively support the safety of other people? ³⁶ | 49% | 30% | 41% |

The quality of work undertaken to implement and deliver services has deteriorated since our previous inspection. Practice in delivering services to effectively support the individual's desistance is weak. Implementation and delivery of work supported the

³⁴ 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.

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

³⁶ 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.

safety of others in less than a third of cases inspected, which further confirms why this standard is rated 'Inadequate'.

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

Responsible officers make good efforts to sustain contact and maintain an effective working relationship with the people they supervise. We saw many good examples of cases where they had taken a flexible and responsive approach to reporting to encourage engagement.

Contact with prisoners prior to their release was achieved in over two-thirds of the case sample. Men being released from HMP Winchester benefited from the improving coordination between the Through the Gate staff and the resettlement teams in the community.

Attention to the risk to non-compliance was satisfactory in over two-thirds of cases and we found that practice was broadly consistent between SCMs and CMs and across the different offices. Responsible officers reported that processes usually worked smoothly with the centralised professional services centre and they knew who to contact where necessary to resolve any problems. Appropriate enforcement action was taken in 73 per cent of the case sample, supported by action to re-engage the individual in just over three-quarters of relevant cases. The CRC closely monitored minimum monthly contact and enforcement processes, with responsible officers and managers supported by a 'to do' list, which was refreshed daily.

Does the implementation and delivery of services effectively support the service user's desistance?

CRC leaders acknowledged that the implementation and delivery of interventions is under strain, due to their difficulties in recruiting and training skilled intervention staff. While staff are supported with timely and accurate information which tracks whether service users are referred to and begin activities to complete the requirements or conditions of their supervision, the simple reality is that demand outstrips the services available. In less than half the case sample, services were delivered within suitable timescales, which were required to reduce reoffending and support desistance. Sufficient services to address 'thinking and behaviour' were only provided in 36 per cent of cases where this was identified as necessary. For services to address 'attitudes to offending', this reduced to 23 per cent (10/44). The following comments typified inspectors' reflections:

"It is concerning that we are seven months into a twelve-month sentence and little meaningful work has taken place. They have only completed three of fifteen RAR days and the content of these sessions appears poor."

Another inspector noted:

"BBR has not commenced (scheduled for ten months into the order)".

Furthermore, opportunities were lost to build on individual strengths and protective factors in just under half of relevant cases. This was a significant deterioration from the previous inspection. The level of contact was often minimal, with too many instances of reporting starting as fortnightly and then swiftly moving to monthly.

While our sample included only a small number of cases where work is delivered under the Integrated Offender Management (IOM) arrangements, it was positive to find examples of strong and effective multi-agency coordination, bringing together accommodation on release, methadone scripts, key workers and priority access to interventions for individuals assessed as presenting a high risk of reoffending. This

was an approach we highlighted in our recent IOM effective practice guide as demonstrating benefits.³⁷

Where services were well-coordinated and implemented, the benefits to the service user were clear to see, as the following good practice example highlights:

Good practice example

Malcolm was sentenced to a 12-month community order with 30 RAR days for an offence of common assault against an ex-partner. There have been adequate safeguarding checks and information exchange. The responsible officer is working with Malcolm to address his mental health issues and he has been referred to a RAR group to address attitudes, thinking and behaviour. Malcolm is additionally supported by a P3 worker, who provides additional support in taking him to appointments and linking him to other community services. Debts have been addressed and Malcolm is repaying rent arrears to ensure his local authority accommodation is maintained. Malcolm has demonstrated a good level of compliance and engagement, particularly with the employment intervention.

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

The operating model specified that all domestic abuse cases held by a CM should be subject to enhanced management oversight (EMO). Middle managers acknowledged that, because CMs in HIOW had not held more complex domestic abuse cases in the past, such as those undertaking the BBR programme, this had a disproportionate impact on the managers of community teams and created a significant demand on their time. The task had been shared across the IM group, to help address this pressure. While the CRC tracked whether this task was carried out, inspectors found in almost three-quarters of relevant cases that the quality of management oversight to address risk of harm was insufficient.

Professional curiosity and responses to information in respect of risk of harm and known victim indicators are not sufficiently developed among some responsible officers. While attention to protecting victims was better when undertaken by SCMs, their practice was still found to be insufficient in just over half of relevant cases. An inspector recorded:

Poor practice example

The responsible officer commented that there are no known domestic abuse or child safeguarding concerns, and when asked how she knows this, she commented that Patrick (the service user) told her.

Service users' changes in living arrangements are not reliably followed up or verified when others might be placed at risk of harm, as the following case illustrates:

Poor practice example

Julian reports disclosing an assault against his new partner. This is not pursued immediately with the police for details (on licence at this time). It is three weeks from the incident to the responsible officer gaining information from the police that Julian is indeed under investigation for assault against his partner. This did ultimately result in his recall but after a delay and without consideration for the safety and ongoing risks to the victim

³⁷ HMI Probation. (2019). *Integrated Offender Management, Effective Practice Guide*.

and risks to her children. The offence involved strangulation and there are two separate incidents in a few days against the same victim. Safeguarding checks remain outstanding and there is no information of further exchange with the police regarding the domestic abuse incidents.

Overall, the CRC involved and coordinated with other agencies in the management of risk of harm in 41 per cent of the inspected example. Here the SCMs sufficiently addressed this issue in just over two-thirds of cases inspected (12 out of 18 cases), compared to less than a third of cases inspected (13 out of 47 cases) managed by CMs. This highlights the importance of training and the experience required to coordinate the complexity of work to keep others safe. The following example exemplifies issues that can require attention to risk management and intervention.

Poor practice example

The responsible officer suspected that Tajinder had moved back home within weeks of the sentence being imposed but did not share this information with children's social care services. It appeared that children's social care services closed the case as they believed the victim was no longer having contact with him. Missed appointments for the purposes of childcare were recorded as acceptable without challenge. Police checks were only undertaken recently. There was no home visit undertaken and no assessment as to whether the victim had a choice in the perpetrator's decision to move home.

Home visits were rare, taking place in only 16 per cent of cases where inspectors considered them to be necessary to help manage the risk of harm to others. This practice was at odds with the organisation's ROSH guidance and appeared to stem from local management guidance. In interviews, responsible officers stated that they were not expected to undertake a home visit except in exceptional circumstances. Barriers to undertaking a home visit included high workloads and the large geographical area. In the north hub, which covers a large, often rural, area no home visits were undertaken to address risk management concerns. Where management oversight took place, this frequently did not consider whether a home visit was necessary to verify risk of harm indicators.

| | Previous inspection | Current inspection |
|---|--|---|
| 2.4. Reviewing |  |  |
| Reviewing of progress is well informed, analytical and personalised, actively involving the service user. | Inadequate | Inadequate |

Our rating³⁸ for reviewing is based on the percentage of cases we inspected being judged satisfactory against three key questions:

| Comparison with Hampshire and Isle of Wight in previous inspection and all CRCs | Previous inspection | Current inspection | All CRCs ³⁹ |
|---|---------------------|--------------------|------------------------|
| Does reviewing focus sufficiently on supporting the service user's compliance and engagement? ⁴⁰ | 70% | 59% | 65% |
| Does reviewing focus sufficiently on supporting the service user's desistance? ⁴⁰ | 64% | 59% | 60% |
| Does reviewing focus sufficiently on keeping other people safe? ⁴⁰ | 44% | 27% | 44% |

While review work was sufficiently focused on supporting the service user's compliance and engagement and their desistance in 59 per cent of cases inspected, review work to keep other people safe was particularly weak. Therefore, we have rated reviewing as 'Inadequate'.

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

Responsible officers when reviewing cases paid good attention to compliance and engagement. They demonstrated flexibility and readiness to make necessary adjustments to support compliance.

Meaningful involvement of service users in reviewing their progress was sufficient in only just under half the case sample, and here we found a difference between SCMs (64 per cent satisfactory) and CMs (39 per cent). The opportunity for engagement was inevitably weaker where the officer completing the review was working on an overtime basis and was not known to the individual. It was positive to note examples where responsible officers took account of individual characteristics and were ready to make adjustments to improve compliance, for example:

"There were adjustments made to enable engagement and this included seeing the individual at different places to help with compliance and to introduce him to other services".

The following provides a good practice example, where the review process was used effectively:

Good practice example

Ralph is a 29-year-old male with a long history of acquisitive crime to support class A drug use. On release from prison, Ralph benefited from working with a responsible officer who coordinated appropriate specialist interventions, many of which were put in place prior to his release. There has been a tangible positive change in Ralph's life on this licence,

³⁸ 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.

³⁹ HMI Probation inspection data, from inspections conducted between June 2018 and June 2019.

⁴⁰ 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.

culminating in winning an award. The responsible officer completed the review of the sentence plan with Ralph and gave positive feedback in the style which he best understood – in writing. To reinforce the positive message, the responsible officer shared the reviewed sentence plan with the police IOM officer and the key worker at his accommodation. This supported Ralph’s continued compliance and engagement.

Where relevant, we found reviewing took into account completion of unpaid work. Breach processes for non-compliance, however, were not reliably accompanied by a formal review, resulting in missing opportunities to revisit engagement and compliance. Written reviews were consistently completed as appropriate, as a formal record of actions to implement the sentence in 71 per cent of the relevant cases inspected.

Does reviewing focus sufficiently on supporting the service user’s desistance?

While reviewing activity identifies and addresses changes in factors linked to desistance and offending in just over three-fifths of relevant cases, analysis showed that SCMs’ practice was noticeably stronger than that of CMs.

It was disappointing that adjustments to the licence plan at the review stage were found to be sufficient in only five out of thirteen post-release supervision cases, compared with nineteen out of thirty-three cases for community sentences. All too often, reviews simply updated the previous OASys assessment to note a further conviction or enforcement process, rather than undertaking any further analysis of the relevance and sequencing of requirements to support the individual’s desistance and ensure that requirements could be completed within the timeframe of the court order.

While referrals might have been made for relevant RAR activities or to attend accredited programmes, responsible officers lacked sufficient information to formulate detailed sequencing with sentence plan reviews. They had to accept the interventions that were available and could be completed within the remaining timescale of the period of supervision, or in some instances, where they had capacity, switched to delivering the intervention themselves on a one-to-one basis.

The involvement of other organisations in reviews was sufficiently well-coordinated in 52 per cent of relevant cases. The following provides a good example:

Good practice example

There is good evidence of collaborative working, with regular liaison and joint working with the staff from the women's centre and more recently evidence of joint working with the medical services to support Tracy and the delivery of the sentence. Evidence is also in place of effective liaison with unpaid work staff when it has been necessary to make amendments to unpaid work plans to address her diversity needs.

Does reviewing focus sufficiently on keeping other people safe?

It is concerning that the quality of review work to keep other people safe was assessed to be sufficient in only just over a quarter of the cases we inspected. Practice against this key question was poor both for SCMs and CMs and requires urgent attention.

Sufficient reviews were conducted in only a third of the case sample where there had been changes in factors related to risk of harm. The quality of review work of risk management plans was poor. In almost three-quarters of relevant cases, inspectors

concluded that the necessary adjustments required to the ongoing plan of work to help manage the risk of harm had not been undertaken.

Poor practice example

A review is completed following breach, which results in the order being revoked. The assessment identifies Stuart poses a risk to a known adult, although who this is and why the risk has increased is not made clear.

The involvement and coordination of work with other agencies to help manage an individual's risk of harm to others did not take place in 71 per cent of relevant cases, for example:

Poor practice example

There was a review but no consideration was given to informing children's social care services once it was suspected that Abdul was living back in the family home.

3. CRC-specific work

CRC

| | Previous inspection | Current inspection |
|--|--|---|
| 3.1 Unpaid work |  |  |
| 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 35 cases with unpaid work requirements that had begun at least three months previously, looking at assessment and planning, safety, and implementation of the court order. We also observed five unpaid work projects across the CRC area and one unpaid work induction session to gather qualitative evidence.

In this CRC, over 75 per cent of unpaid work cases we inspected met our key questions for the way in which unpaid work assessment and planning are personalised and the sentence of the court is delivered. The quality of unpaid work delivered safely was outstanding; however, opportunities for service users to develop skills and achieve qualifications were underdeveloped and there remained room to improve the arrangements to maximise the rehabilitative elements and support desistance. This led to the overall judgement of 'Good' for this unpaid work standard.

The delivery of unpaid work is well organised and reliable, aided by an imaginative, structured approach to induction, which is followed immediately by a 'taster' session of unpaid work at a local project. Forty-five per cent of unpaid work placements are assigned to individual placements, which provides a good foundation to attend to meeting diverse needs.

Strengths:

- Reliable induction arrangements and allocation to projects.
- The opportunity to experience an unpaid work project immediately after the induction helps to reduce barriers and improve engagement.
- The CRC gives good attention to health and safety to make sure the work is delivered safely.
- Placements are arranged to complement and take account of childcare responsibilities.

Areas for improvement:

- Facilities for service users to develop skills and achieve qualifications are underdeveloped and not enough opportunities are available.
- Arrangements for informing unpaid work supervisors of service users' risk indicators are fallible. Supervisors would be better supported if they had secure access to electronic records via a tablet or phone.
- The reasons recorded for missed unpaid work appointments are not always sufficiently clear.

Unpaid work key data

| | 12 months previously | Current inspection |
|--|----------------------|--------------------|
| Average unpaid work stand-down rate in previous 12 months ⁴¹ | 4.32% | 3.99% |
| Percentage of successful completions of unpaid work requirements in previous 12 months ⁴² | 94.7% | 91.7% |

Our rating⁴³ for unpaid work is based on four key questions:

| Current inspection | |
|--|---|
| Is the assessment and planning of unpaid work personalised? ⁴⁴ | 76% |
| Is unpaid work delivered safely? ⁴⁵ | 82% |
| 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. ⁴⁶ |
| Is the sentence of the court implemented appropriately? ⁴⁵ | 79% |

⁴¹ Data supplied by CRC.

⁴² Ministry of Justice. (2019). *CRC Service Level 10, Community performance quarterly statistics July 2018 to September 2019, Q2, and July 2017 to September 2019, Q2.*

⁴³ 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.

⁴⁴ 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.

⁴⁵ Data supplied by CRC.

⁴⁶ 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.

We found the delivery of unpaid work to be good, with reliable arrangements to provide for induction and allocation to projects. The CRC gives effective attention to health and safety to make sure the work is delivered safely. Effective monitoring arrangements are in place to support compliance and take enforcement action where appropriate.

Is the assessment and planning of unpaid work personalised?

The assessment and planning arrangements for unpaid work in HLOW ensure that individual circumstances and protected characteristics are recognised. The majority of service users complete an initial classroom induction, after which it is determined whether a group or individual placement best meets their profile. All females are offered individual placements in the first instance. Inspectors came across good examples of placements being arranged to complement childcare responsibilities both for men and women. At the time of the fieldwork only three women were assigned to a group placement, taking into account their consent and the management of risk of harm.

Provision of unpaid work placements across the week was described as 'lopsided' towards weekends to meet the needs of service users who are working. This reflects the high level of employment of people on unpaid work in HLOW. Flash cards and access to interpreter services are available to address language barriers when required.

We found careful attention given to sourcing suitable placements to address disabilities, as the following example illustrates:

Good practice example

There is clear consideration of Barry's pain and mobility issues. He is allocated to an individual placement with it recorded that: "The individual placement Barry has been allocated to can let him work seated and he can alter his days if he needs to".

Unpaid work placements, both group and individual, are in place for service users living on the Isle of Wight; however, due to small numbers, individuals are required to attend group induction on the mainland.

Is unpaid work delivered safely?

Service users are risk assessed following completion of the unpaid work induction session by the placement coordinator, with an entry placed on the case management system nDelius. This is an in-house assessment specific to unpaid work. For cases where more than one requirement applies, an OASys assessment will also be completed by the allocated responsible officer. A correct risk of harm assessment was in place for the vast majority of cases inspected.

In addition to any risk flags entered onto nDelius, the unpaid work team holds a separate 'caution list', which details any specific risk management and individual health needs or concerns relating to individuals. Unpaid work supervisors leading group placements do not routinely have access to nDelius or electronic records and are required make sure they have reviewed the 'caution list' before leaving the office, which details individuals' personal issues, health concerns, restrictions etc. 'R' is added to the project details for those that are on 'restricted' placements, such as a registered sex offender, and a 'U' for those that are unrestricted. Unpaid work supervisors explained that they are required to remember individual risk details for anyone they take out on a project, to maintain confidentiality, and they incorporate their own cryptic marks against the worksheet to help them. Inspectors observed

good adherence to this practice, but unpaid work supervisors recognised the approach was fallible. In particular, we were concerned that an individual's health or learning style details, such as dyslexia, may be overlooked. We took the view that supervisors would be better supported if they had secure access via a tablet or phone to electronic records.

Supervisors carefully explain health and safety procedures and expectations. Issues relating to the health and safety or potential vulnerability of the service user were addressed sufficiently in just under three-quarters of the cases inspected.

The fieldwork for this inspection took place shortly before the national lockdown for COVID-19. Inspectors observed that the CRC had already stepped up attention to health and safety measures, increasing the cleaning of unpaid work vans and equipment and providing hand sanitising gel.

We found good levels of communication between unpaid work staff and responsible officers for multiple requirement orders. There was a working assumption that priority should be given to completing the unpaid work requirement as quickly as possible, but this could be mitigated to take account of individual need and sequencing with other requirements where the responsible officer considered this appropriate.

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

HIOW operated a popular initiative designed to incentivise compliance: service users were issued with protective boots when these are required for a project. They are told they are responsible for them for the duration of the order and can keep them where they complete over 100 hours. This initiative encourages personal responsibility, and supervisors reported service users brought their boots to unpaid work every time.

Unpaid work supervisors reflected that the range of unpaid projects had diminished in recent years alongside the public face of the work, with less external celebration of the work completed in the community. Service users described the projects as something they must do, with the activity not necessarily being rewarding. Some explained to inspectors that they gained reward from the supervisors rather than the actual placements. It was particularly positive when an inspector observed a member of the public thank the workers and described what a difference their work has made to the local community in Havant.

Supervisors were observed to follow the principles of prosocial modelling, providing a firm but fair, encouraging and respectful approach.

"I observed the supervisor inform the service users that they would be doing strimming. He offered those who had not done this before the opportunity to learn and spent quite some time coaching individuals with this".

However, in a different location a service user shared that he felt that some of the tasks could be done more efficiently and therefore the community could benefit more from their work. He said that, when he spoke up about this, he was told that it is a punishment and he needs to *"get on with it"*.

The proportion of all unpaid work hours completed where the service user received formal vocational or skills for life training, allowing them to work towards a nationally-recognised qualification, was only 0.28 percent, demonstrating minimal improvement from the previous year of 0.16 per cent. For the period 17 December 2018 to 16 December 2019, 361 hours were delivered as education, employment and training (ETE) activity out of a total of 130,497 hours of unpaid work delivered by HIOW CRC in the same timeframe. We noted the ETE offer is explained in induction but the onus is on the service user to ask their case manager about this

Managers acknowledged this gap in provision and since the start of 2020 an encouraging new initiative was being led by an unpaid work placement coordinator with ETE skills. This project links training with Romsey College to a recycling placement and facilitates service users to gain certificates in health and safety and first aid. Early results looked very promising and plans were underway to extend the approach across the county.

Is the sentence of the court implemented appropriately?

The majority of unpaid work orders commence within the first two weeks. The CRC strategy, to immediately follow the group induction with attendance at a local unpaid work project, works well to make sure unpaid work starts promptly and cement expectations.

Sourcing group placements in the more rural areas of Hampshire can be challenging, and here the CRC relies heavily on the use of individual placements. These barriers limited the capacity to provide opportunities to work orders intensively in rural locations.

Practice in recording the reasons for missed appointments was less convincing. We considered whether the difficulty service users may experience in contacting the CRC by telephone if they were having problems attending could provide one explanation. Recording of explanations and evidence for missed appointments was only found to take place reliably in 58 per cent of the inspected sample. While in the majority of cases professional judgements were clearly recorded in relation to decisions about missed appointments, this process could become protracted and contribute to losing momentum in completion of the order. Appropriate enforcement action was taken in just over three-quarters of the cases inspected.

The professional services centre (PSC) in Liverpool manages all Purple Futures stand-alone unpaid work requirements. Unpaid work staff in HIOW reported that information from the PSC came through reliably. However, at induction, service users with just unpaid work were told that it can be very difficult to get hold of their case manager in the PSC hub and they were advised to log their call times and possibly come into the office to ask for help. The issue of being able to get through easily to the CRC on the phone was also raised at the service user council forum.

The attendance rate for unpaid work was estimated to operate at about 60 per cent. Group placements were over-instructed to take account of attrition. It was acknowledged that this could contribute to having to stand down individuals if too many attended. However, short-notice absence of supervisors was thought to be a more likely explanation for having to stand down service users from planned work. The unpaid work manager recognised that this was a problem and was attentive to the use of stand-downs, taking action to redirect supervisors, where feasible, to maximise use of placements.

The CRC gives good attention to monitoring completion of unpaid work hours within the twelve-month period of the court order and maintains an action plan to address those that do not complete the order or need to be returned to court who do not complete their hours within the required time.

| | Previous inspection | Current inspection |
|---|--|---|
| 3.2. Through the Gate |  |  |
| Through the Gate services are personalised and coordinated, addressing the service user's resettlement needs. | Requires improvement | Outstanding |

We inspected work done in 24 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. During the January 2019 inspection, we rated Through the Gate services as 'Requires improvement', having found that resettlement activity lacked sufficient detail of the work being undertaken in prison and effective coordination. On this inspection, it was pleasing to find that delivery of Through the Gate services had improved to 'Outstanding', with significant improvements in resettlement planning, activity and the coordination of service delivery.

Working with its partner Catch 22, the CRC delivers a Through the Gate service to prisoners in HMP Winchester and HMP Coldingley. HIOW CRC also provides a Through the Gate service by referral to the non-resettlement prison – HMP Isle of Wight. Women prisoners from HIOW are mostly held at HMP Bronzefield, with Through the Gate services in custody provided by MTC Novo, and so were not included in the inspection sample for this standard.

Strengths:

- Resettlement plans take account of the individual's strengths and protective factors.
- Resettlement work in prison takes account of the individual's assessed risk of harm.
- Collaborative and effective working relationships are established with key agencies to support access to resettlement activities.
- Good communication and coordination take place between Through the Gate staff and resettlement case managers in the community to support release arrangements.

Area for improvement:

- The individual's diversity and personal circumstances are not considered in all cases.
- Continue to address and seek improvement for relevant domestic abuse information to be provided from Hampshire police to support the management of risk of harm in resettlement work.

Our rating⁴⁷ for Through the Gate is based on three key questions:

| Comparison with previous inspection and all CRCs | Previous inspection | Current inspection | All CRCs ⁴⁸ |
|---|---------------------|--------------------|------------------------|
| Does resettlement planning focus sufficiently on the service user's resettlement needs and on factors linked to offending and desistance? ⁴⁹ | 65% | 96% | 69% |
| Does resettlement activity focus sufficiently on supporting the service user's resettlement? ⁴⁹ | 61% | 92% | 62% |
| Is there effective coordination of resettlement activity? ⁴⁹ | 64% | 96% | 59% |

HIOW CRC is providing outstanding Through the Gate services. Inspectors found that the key questions were met in the great majority of the case sample. An inspector described the services as:

“red hot, providing good resettlement plans, supported by good communication”.

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

The quality of resettlement planning work had improved significantly since the previous inspection.

Service users were meaningfully involved in developing their resettlement plans in all cases inspected apart from two, where the prisoners declined contact with the Through the Gate staff. Where relevant, resettlement plans take account of the individual's strengths and protective factors, such as recognising their motivation and building upon their previous employment history, and build these into resettlement planning. Consideration of an individual's diversity and personal circumstances in planning was found not to be sufficient in three out of 24 cases.

The most pressing resettlement needs identified ahead of release are relationships in the community and accommodation, followed by help with finance, benefits and debt. Once they have identified the core issues linked to offending, the Through the Gate staff are good at making sure these issues are included within the plan, as the following case illustrates:

Good practice example

Brad is a 32-year-old white male sentenced to 8 months for an offence of breach of a non-molestation order. He has mental and physical health needs – Hepatitis C, auditory hallucinations, depression and anxiety. He is managed as an IOM case and was identified as suitable while in custody to receive support from the high intensity transition team, which includes support to access housing, health, substance abuse services and children's social care services.

It was particularly positive to find that resettlement plans took account of factors related to risk of harm in all but one of the relevant cases.

⁴⁷ 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.

⁴⁸ HMI Probation inspection data, from inspections conducted between June 2018 and June 2019.

⁴⁹ The answers to these key questions are underpinned by more detailed 'prompts'. The table in Annexe 4 illustrates the percentage of the case sample with a satisfactory 'yes' response to each prompt.

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

A collaborative, effective set of working relationships with key agencies was described by both CRC staff and Catch 22 staff, and verified by HMP resettlement governors.

Purple Futures and Catch 22 Through the Gate staff work together as one team, for both the male resettlement prisons, within an open-plan office based at HMP Winchester, where they have effective links with a wide range of providers and partnership services. This affords good opportunities to implement resettlement work. These include Catch 22, assisting with accommodation referrals, Spurgeons, who provide support for fathers, Phoenix Futures, who link to substance misuse providers, P3, PACT, Jobcentre Plus, Citizens Advice, the Shannon Trust (Traveller support) and access to a specialised veteran service.

With the opportunities afforded by the additional resources that accompanied the introduction of integrated Through the Gate services, the prison and CRC resettlement leaders have worked together to limit duplication and develop specialist areas of interest and expertise, which supports how activities within resettlement plans are progressed. Resettlement staff are trained to deliver brief interventions that can be provided in a group or one-to-one.

Reliable arrangements were in place to follow up on accommodation needs, and we learned from a range of staff that emergency accommodation could usually be sourced. However, this was qualified by recognising that shared hostel rooms were not always popular and not necessarily taken up by some prisoners on release. It was understood that these facilities might provide a platform to progress to more independent accommodation, if stability could be demonstrated.

Activities to support education, training and employment were described in case records as more difficult to implement, given the short timespan before release for many. Reliable services were implemented to address problems with finance, benefits and debt, including setting up bank accounts and preparing appointments for release with Jobcentre Plus.

Resettlement services built on the service user's strengths to enhance their protective factors where relevant. The following case provides a good example of the quality of resettlement work taking place:

Good practice example

Andrew has a trade and employment he can return to. This is acknowledged and recorded to be verified by resettlement staff. Work on his relationships was identified as a resettlement pathway linked to Andrew's children. 'Spurgeons' service is offered for family support. Alcohol is identified as being linked to previous offending behaviour and Andrew is referred to the substance misuse partnership. Finances linked to debt are identified and he has been referred to and completed the 'Back to Basics' course and advised to contact the Citizens Advice on release.

It was reassuring to find that in all relevant cases resettlement activity provided good attention to factors related to risk of harm. This next case example illustrates well how a resettlement worker who is attentive to risk of harm indicators can enhance risk management and contribute to the protection of others:

Good practice example

The Through the Gate worker informed the responsible officer that the prisoner, Lewis's, youngest daughter had been trying to get in touch with him. This could have had implications regarding a Restraining Order and management of risk, so was appropriately passed on.

Overall, in the majority of cases inspected, resettlement activity focuses sufficiently on supporting the service user's resettlement.

Is there effective coordination of resettlement activity?

To build strong local relationships in the communities, the Through the Gate team is organised so that each resettlement worker is attached to a specific geographical hub and works with the relevant community-based resettlement team. Through the Gate staff are conscientious in making sure they communicate reliably with responsible officers, and in most instances, inspectors found there was an effective handover to local services in the community. This was a good outcome and aligned well with the recommendation from our recent thematic inspection of post-sentence supervision.⁵⁰ In over three-quarters of the cases inspected, we found that responsible officers, where relevant, followed up on outstanding resettlement actions in sentence planning after the individual's release.

A lot of effort has been made to develop effective working relationships with local authorities and housing providers, and referrals are reliably made ahead of release. Yet sadly, it remained the case that a third of cases inspected were released without any clear accommodation for their first night after release. This was also one of the findings of our post-sentence supervision thematic inspection⁵¹.

It is important when considering suitable accommodation release plans that information is exchanged and actions coordinated with other agencies to keep other people safe. It was here that we came upon further evidence of the problems the CRC has been experiencing in obtaining reliable information in respect of domestic abuse checks from Hampshire Constabulary:

“There is evidence of the responsible officer chasing up the suitability of the accommodation prior to Michael's release, enabling him to return to his partner's address, residing with her and his four children. Case records evidence the responsible officer attempting to gather information about the proposed address, but receiving a response stating that the police were unable to share their information with HIOW CRC three days prior to Christian's release. The address was not checked with the local police service prior to release. Five weeks after release, Michael was arrested for a domestic abuse incident at the home address where he was living with his partner and four children”.

⁵⁰ HMI Probation. (2019). *Post-release supervision for short-term prisoners: The work undertaken by Community Rehabilitation Companies*.

⁵¹ HMI Probation inspection data, from inspections conducted between June 2018 and June 2019.

Four of the Through the Gate sample were well-known individuals who were managed under the IOM arrangements. Here, in contrast to the previous example, we found good evidence of coordination, the sharing of information across agencies, including the police, and a readiness to work realistically and with persistence with service users who had low levels of motivation, which was impressive:

Good practice example

Mark is aged forty. He was in prison for three weeks for theft. Mark is a complex character with housing, drug use and mental health issues and an entrenched pattern of drug-related offending. Despite the short amount of time available, a plan was put in place and delivered support around key areas and to encourage engagement. He was released without accommodation to go to as he had lost the housing he had prior to custody. There was good involvement of Jobcentre Plus, Phoenix Futures and P3 to support resettlement activity. Mark declined this but a release appointment was set as a three-way for the P3 worker to explain their role and the support they can provide. Mark continued to decline but good motivational work remained in place to encourage engagement with additional support.

Annexe 1: Background to probation services

Around 255,000 adults are supervised by probation services annually.⁵² 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.⁵³

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.

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

⁵³ 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

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

Domain one: organisational delivery

The provider submitted evidence in advance and the CRC's chief executive officer delivered a presentation covering the following areas:

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

During the main fieldwork phase, we interviewed 52 individual responsible officers, asking them about their experiences of training, development, management supervision and leadership. We held various meetings with groups and individuals, which allowed us to triangulate evidence and information.⁵⁴ In total, we conducted 19 meetings, which included meetings with senior managers, operational partners and stakeholders, and with middle managers and frontline staff. This inspection coincided with the COVID-19 pandemic taking hold in the UK. As such, week three of the inspection was cancelled, at the request of the CRC. Some domain one work had been completed in weeks one and two, but no week three work took place. It was, therefore, decided not to rate the domain one standards or to provide an overall rating, but to write a narrative for domain one to be included in the report.

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 100 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.

⁵⁴ 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>

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.

Domain three: CRC-specific 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 35 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 five unpaid work projects and one unpaid work induction session to gather qualitative evidence.

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

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

Through the Gate

We examined 24 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 strategic manager in the CRC responsible for Through the Gate services
- two governors with responsibility for resettlement from HMP Winchester and HMP Coldingley
- the Catch 22 middle manager responsible for Through the Gate services in specific prisons
- a group of resettlement workers from the CRC and Catch 22 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 three key questions (numbered 4.1.1, 4.1.2 and 4.1.4 within our standards framework). 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 within our standards framework 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 HMI 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, operating model and map

Information supplied by Hampshire and Isle of Wight CRC.

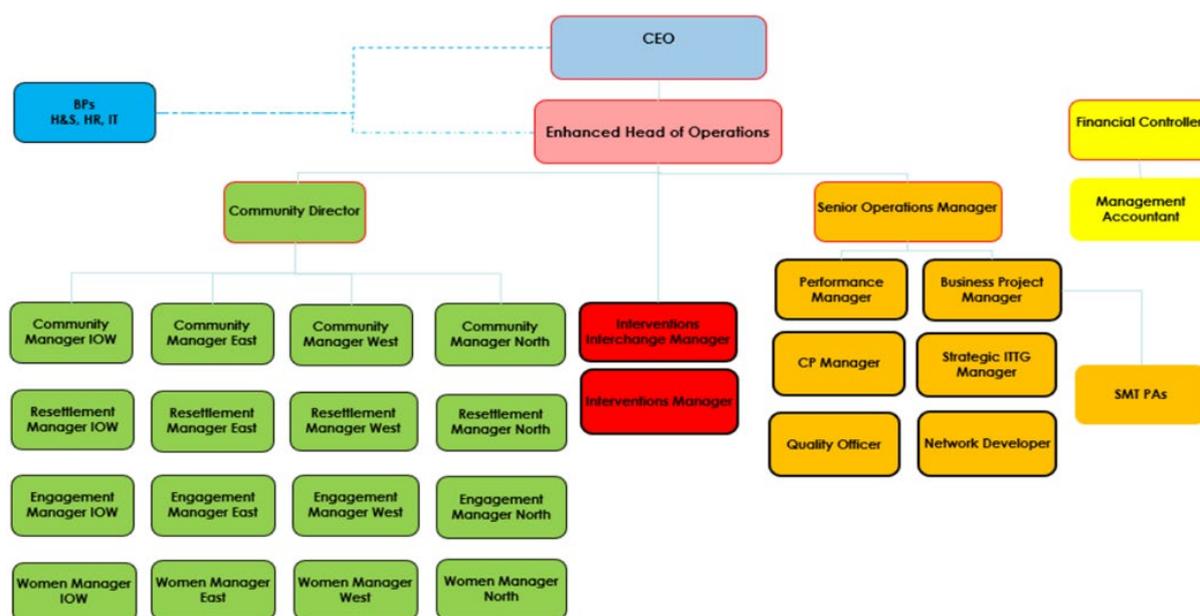
Purple Futures is a consortium led by Interserve Justice which owns five CRCs, Cheshire and Greater Manchester; Hampshire and Isle of Wight; Humberside, Lincolnshire and North Yorkshire; Merseyside; and West Yorkshire. The five CRCs work collaboratively with one another, sharing learning, some shared services and resources wherever practicable. Immediately following the period of this inspection the HIOW Chief Executive Officer (CEO) was appointed the CEO across all five CRCs, as part of the transition arrangements towards the reunification of probation case management. The Enhanced Head of Operations (EHO) became the Director of HIOW CRC.

The CRC takes a 'strengths-based' approach to its work. This means it aims to focus on the positives in individuals' lives, to encourage them to desist from offending.

Senior Probations Officer = Interchange Manager (IM)

Probation Officer = Senior Case Manager (SCM)

Probation Services Officer = Case Manager (CM)

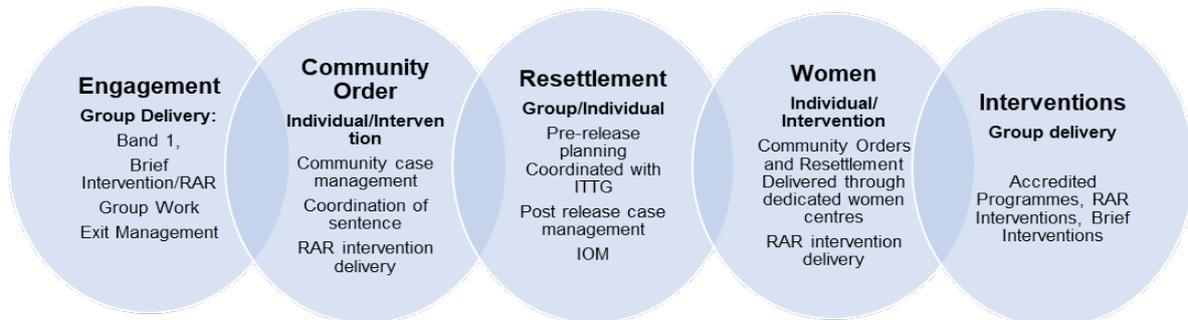


Operating model

In September 2018, Interserve led a change programme to focus resources on programme delivery, group work, resettlement, community orders and women's services called Enabling Our Future (EOF). Pre-EOF, HIOW CRC was organised into geographical teams, clustered around hubs in the West (Southampton, New Forest, Eastleigh and the Isle of Wight), East (Portsmouth, Fareham, Havant, Petersfield) and North (Andover, Aldershot Basingstoke and Winchester). These offices are supported by a number of reporting centres and women centres.

All hubs operate engagement centres, women's centres and RAR delivery. The majority of engagement team work is delivered in a group setting, based on general

offending behaviour packages and brief interventions. Women's teams are running bespoke services, including induction sessions, to provide a female-only space. The most notable change is the implementation of engagement and interventions teams separate to case management teams. The IOW is not set up in functional teams due to geographical location and size of the team. The revised model created specialist teams as below:



The overarching Interchange model of service delivery has remained, which provides a strengths-based desistance approach to working with service users. The model includes 6 modules – Induction, Assessment, Plan, Networks, Review and Exit.

The EOF Model introduced a new Banding and Allocation (IBAT) tool and responsibility for allocation of cases was moved to a central hub (Professional Services Centre – PSC). The changes to the IBAT tool include the removal of SARA to dictate allocation to an SCM, with the following exceptions to apply to all cases:

- RSR 3.0 or over
- PREVENT The case is being managed under the Government's PREVENT Strategy
- CSE Any case where there is evidence of Child Sexual Exploitation
- The case has a current Safeguarding Child Protection Register
- The case has a current index offence of a sexual nature
- The case has a current gangs and guns register
- DA register and 75%+ OGRS
- Stalking (An offence under 4A The Protection of Freedoms Act 2012)
- Wounding (related to Domestic Abuse)



Annexe 4: Inspection data⁵⁵

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

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

| 2.1. Assessment | | |
|--|------------------------------|--------------------|
| Does assessment focus sufficiently on engaging the service user? | Previous inspection | Current inspection |
| Does assessment analyse the service user’s motivation and readiness to engage and comply with the sentence? | 82% | 46% |
| 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 | 36% |
| Is the service user meaningfully involved in their assessment, and are their views taken into account? | 71% | 53% |
| Does assessment focus sufficiently on the factors linked to offending and desistance? | | |
| Does assessment identify and analyse offending-related factors? | 65% | 39% |
| Does assessment identify the service user’s strengths and protective factors? | 74% | 63% |
| Does assessment draw sufficiently on available sources of information? | 77% | 49% |

⁵⁵ HMI Probation inspection data.

| Does assessment focus sufficiently on keeping other people safe? | | |
|--|------------------------------|-----|
| Does assessment clearly identify and analyse any risk of harm to others, including identifying who is at risk and the nature of that risk? | 61% | 40% |
| Does assessment analyse any specific concerns and risks related to actual and potential victims? | No comparable data available | 45% |
| Does assessment draw sufficiently on available sources of information, including past behaviour and convictions, and involve other agencies where appropriate? | No comparable data available | 29% |
| Were domestic abuse checks undertaken? | No comparable data available | 49% |
| Did child safeguarding information sharing take place in cases where required? ⁵⁶ | No comparable data available | 51% |

2.2. Planning

| Does planning focus sufficiently on engaging the service user? | Previous inspection | Current inspection |
|--|----------------------------|---------------------------|
| Is the service user meaningfully involved in planning, and are their views taken into account? | 72% | 50% |
| Does planning take sufficient account of the service user's diversity and personal circumstances, which may affect engagement and compliance? | 77% | 52% |
| Does planning take sufficient account of the service user's readiness and motivation to change, which may affect engagement and compliance? | 73% | 63% |
| Does planning set out how all the requirements of the sentence or licence/post-sentence supervision will be delivered within the available timescales? | 76% | 59% |

⁵⁶ 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? | 68% | 43% |
| Does planning focus sufficiently on reducing reoffending and supporting the service user's desistance? | | |
| Does planning sufficiently reflect offending-related factors and prioritise those which are most critical? | 79% | 69% |
| Does planning build on the service user's strengths and protective factors, utilising potential sources of support? | No comparable data available | 53% |
| Does planning set out the services most likely to reduce reoffending and support desistance? | 83% | 67% |
| Does planning focus sufficiently on keeping other people safe? | | |
| Does planning sufficiently address risk of harm factors and prioritise those which are most critical? | 64% | 49% |
| Does planning set out the necessary constructive and/or restrictive interventions to manage the risk of harm? | 68% | 53% |
| Does planning make appropriate links to the work of other agencies involved with the service user and any multi-agency plans? | 66% | 48% |
| Does planning set out necessary and effective contingency arrangements to manage those risks that have been identified? | 62% | 47% |

2.3. Implementation and delivery

| Is the sentence/post-custody period implemented effectively, with a focus on engaging the service user? | Previous inspection | Current inspection |
|---|----------------------------|---------------------------|
| Do the requirements of the sentence start promptly, or at an appropriate time? | 78% | 59% |
| Is sufficient focus given to maintaining an effective working relationship with the service user? | 80% | 67% |
| Are sufficient efforts made to enable the service user to complete the sentence, including flexibility to take appropriate account of their personal circumstances? | 91% | 84% |

| | | |
|--|------------------------------|-----|
| Post-custody cases only: Was there a proportionate level of contact with the prisoner before release? | 62% | 67% |
| Are risks of non-compliance identified and addressed in a timely fashion to reduce the need for enforcement actions? | 76% | 69% |
| Are enforcement actions taken when appropriate? | 73% | 73% |
| Are sufficient efforts made to re-engage the service user after enforcement actions or recall? | 75% | 76% |
| Does the implementation and delivery of services effectively support the service user's desistance? | | |
| Are the delivered services those most likely to reduce reoffending and support desistance, with sufficient attention given to sequencing and the available timescales? | 57% | 46% |
| Wherever possible, does the delivery of services build upon the service user's strengths and enhance protective factors? | 73% | 52% |
| Is the involvement of other organisations in the delivery of services sufficiently well-coordinated? | 69 % | 56% |
| Are key individuals in the service user's life engaged, where appropriate, to support their desistance? | 57% | 42% |
| Is the level and nature of contact sufficient to reduce reoffending and support desistance? | 55% | 35% |
| Are local services engaged to support and sustain desistance during the sentence and beyond? | No comparable data available | 55% |
| Does the implementation and delivery of services effectively support the safety of other people? | | |
| Is the level and nature of contact offered sufficient to manage and minimise the risk of harm? | 58% | 44% |
| Is sufficient attention given to protecting actual and potential victims? | 53% | 32% |
| Is the involvement of other agencies in managing and minimising the risk of harm sufficiently well-coordinated? | 56% | 41% |

| | | |
|---|-----|-----|
| Are key individuals in the service user's life engaged, where appropriate, to support the effective management of risk of harm? | 41% | 31% |
| Are home visits undertaken, where necessary, to support the effective management of risk of harm? | 36% | 16% |

2.4. Reviewing

| Does reviewing focus sufficiently on supporting the service user's compliance and engagement? | Previous inspection | Current inspection |
|--|----------------------------|---------------------------|
| In cases where it is needed, does reviewing consider compliance and engagement levels and any relevant barriers? | 77% | 67% |
| 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? | 60% | 55% |
| Is the service user meaningfully involved in reviewing their progress and engagement? | 63% | 47% |
| Are written reviews completed as appropriate as a formal record of actions to implement the sentence? | 77% | 71% |
| Does reviewing focus sufficiently on supporting the service user's desistance? | | |
| Does reviewing identify and address changes in factors linked to offending behaviour, with the necessary adjustments being made to the ongoing plan of work? | 50% | 41% |
| Does reviewing focus sufficiently on building upon the service user's strengths and enhancing protective factors? | 66% | 59% |
| Is reviewing informed by the necessary input from other agencies working with the service user? | 64% | 52% |
| Are written reviews completed as appropriate as a formal record of the progress towards desistance? | 77% | 70% |
| Does reviewing focus sufficiently on keeping other people safe? | | |
| 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? | 32% | 15% |

| | | |
|---|-----|-----|
| Is reviewing informed by the necessary input from other agencies involved in managing the service user's risk of harm? | 41% | 29% |
| Is the service user (and, where appropriate, key individuals in the service user's life) meaningfully involved in reviewing their risk of harm? | 49% | 28% |
| Are written reviews completed as appropriate as a formal record of the management of the service user's risk of harm? | 59% | 64% |

| Unpaid work | | |
|---|------------------------------|--------------------|
| Is the assessment and planning of unpaid work personalised? | Previous inspection | Current inspection |
| 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 | 63% |
| Does unpaid work build upon a service user's strengths and enhance their protective factors? | No comparable data available | 63% |
| Is the allocated work suitable, taking account of the service user's diversity and personal circumstances? | No comparable data available | 79% |
| Is unpaid work delivered safely? | | |
| Does the delivery of unpaid work take account of risk of harm to other service users, staff or the public? | No comparable data available | 89% |
| Does unpaid work consider issues relating to the health and safety or potential vulnerability of the service user? | No comparable data available | 74% |
| Where the responsible officer is engaged in other activity/work with the service user, does regular communication take place? | No comparable data available | 88% |

| Is the sentence of the court implemented appropriately? | | |
|--|------------------------------|-----|
| Does unpaid work commence promptly and happen regularly? | No comparable data available | 71% |
| Do arrangements for unpaid work encourage the service user's engagement and compliance with the order? | No comparable data available | 86% |
| Are professional judgements made in relation to decisions about missed appointments? | No comparable data available | 81% |
| Are enforcement actions taken when appropriate? | No comparable data available | 76% |

| Through the Gate | | |
|--|------------------------------|---------------------------|
| Does resettlement planning focus sufficiently on the service user's resettlement needs and on factors linked to offending and desistance? | Previous inspection | Current inspection |
| Is there a clear and timely plan for how the service user's resettlement needs will be addressed? | 78% | 88% |
| Does the plan sufficiently draw on available sources of information? | 50% | 92% |
| Is the service user meaningfully involved in planning their resettlement and are their views considered? | 86% | 92% |
| Does the resettlement plan identify the service user's strengths and protective factors and consider ways to build upon these? | 27% | 93% |
| Does the plan take sufficient account of the service user's diversity and personal circumstances? | 59% | 88% |
| Does the resettlement plan take account of factors related to risk of harm? | No comparable data available | 94% |

| Does resettlement activity focus sufficiently on supporting the service user's resettlement? | | |
|---|------------------------------|------------------------------|
| 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 | 93% |
| Does resettlement activity take sufficient account of the service user's diversity and personal circumstances? | No comparable data available | 90% |
| Does resettlement activity take sufficient account of any factors related to risk of harm? | No comparable data available | 100% |
| Is there effective coordination of resettlement activity? | | |
| Is there effective coordination of resettlement activity with other services being delivered in the prison? | No comparable data available | 95% |
| Is there effective communication with the responsible officer in the community, prior to and at the point of release? | 65% | 100% |
| Do resettlement services support effective handover to local services in the community? | No comparable data available | 88% |



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