



*Effective
Supervision
Inspection*

*of the
National Probation Service for
England and Wales*

Report on:
Dyfed-Powys Probation Area

2005

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Home Office

FOREWORD

We are pleased to report generally favourably on the work of the Dyfed-Powys Probation Area. There is active and effective leadership, with an accessible and visible senior management team, and there are also good relationships with partner organisations, such as the police, and with sentencers. Performance is improving, although some key national targets have still to be achieved.

We have found a relatively low rate of reconviction in offenders under supervision and evidence of the work of the probation area having impact on offence related problems around employment, accommodation and drug and alcohol misuse. Good work is being done in some cases which pose a high risk of harm to the public. Against that, though, more attention needs to be given to the quality of risk of harm assessments and supervision planning and to ensuring that all staff receive sufficient supervision to enable them to carry out their work effectively.

Andrew Bridges
HM Chief Inspector of Probation

February 2005

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We would like to express our thanks to the Dyfed-Powys Probation Board, its managers and staff for the considerable assistance received in enabling the inspection to proceed smoothly. Without their help, most especially in arranging a complicated programme of interviews with case managers, the work could not have been completed successfully.

The inspection also depended on the contribution made by local area assessors who assisted with the case manager interviews. Their participation and commitment was greatly appreciated.

HM Assistant Chief Inspectors: John Hutchings, Alan MacDonald

HM Inspectors: Joy Neary, Rose Burgess, Sally Lester, Ian Menary, Nigel Scarff

Practice Assessor: Stephanie Mason

Information Manager: Kevin Ball

Inspection Admin Officer: Pippa Bennett

*Area Assessors: Stevie Arrowsmith, Sandra Birks, Jeremy Corbett, Alan Hussey,
Sera Llewellyn, Kathy Powis, Mandy Rosser, Ruth Wakelam*

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GLOSSARY

ACE	Assessment, Case Recording and Evaluation System
ACPO	Assistant chief probation officer
CO	Chief officer
CP	Community punishment
CPO	Community punishment order
CPRO	Community punishment and rehabilitation order
CRAMS	Case Record Administration and Management System
CSB	Cognitive Skills Booster
DM	Divisional manager
DTTO	Drug treatment and testing order
ECP	Enhanced community punishment
EEM	European Excellence Model
ESI	Effective Supervision Inspection
ETE	Employment, Training and Education
HMI Probation	HM Inspectorate of Probation
HRoH	High risk of harm
IDAP	Integrated Domestic Abuse Programme
ISP	Initial supervision plan
LCJB	Local Criminal Justice Board
LSI-R	Level of Service Inventory-Revised
MAPPA	Multi-Agency Public Protection Arrangements
MAPPP	Multi-Agency Public Protection Panel
NOMS	National Offender Management Service
NPD	National Probation Directorate
NPS	National Probation Service
OASys	Offender Assessment System
OGRS2	Offender Group Reconviction Scale
OSAP	Offender Substance-Abuse drug interventions Programme
PIP	Performance Inspection Programme
PO	Probation officer
PSO	Probation service officer
PSR	Pre-sentence report
SMART	Specific, Measurable, Achievable, Realistic and Time-bounded
SMT	Senior management team
SPM	Supporting Performance Measure
SSR	Specific sentence report
TPO	Trainee probation officer
WAG	Welsh Assembly Government

SUMMARY AND RECOMMENDATIONS

Key findings

- **Quality of Management:** The Board and senior managers worked together effectively within the national framework, whilst recognising the role and influence of the WAG. There was a collaborative and inclusive style of management, with staff and unions involved in business planning. The SMT was regarded as accessible and visible and the CO had taken a lead on a number of issues, in particular on diversity.

Performance reporting was of a high standard, with regular information provided to the Board, staff and key stakeholders. Performance was improving generally, but a number of key targets had yet to be achieved. There were deficiencies relating to the consistent functioning of MAPPA, and OASys was not yet embedded fully. PSO grade staff were underutilised in work with offenders posing a lower risk of harm. There were shortfalls in the supervision and appraisal of some case managers. However, the new staff development and review scheme, which had been positively received by staff, was expected to address this gap.

There were good relationships overall with other agencies, both contracted and statutory partners, including police, and positive communication with sentencers.

- **Quality of Assessment:** Case managers were generally doing well in assessing the criminogenic factors which could influence an offender's likelihood of reoffending, but the quality and timeliness of initial risk of harm assessments was less satisfactory. Likewise, the quality of ISPs needed to improve as did the reviews of risk of harm.

Offenders were well informed as to the demands of their order or licence, with clear explanations being given as to expectations for attendance and behaviour. Overall, case records were well organised and recording was sufficient, though there were differential practices in relation to the storage of confidential information.

- **Quality of Interventions:** Case managers were sensitive to the diverse needs of offenders and there were good examples of interventions delivered to encourage the reintegration of offenders into the community. However, in a number of cases literacy needs were not sufficiently well addressed. Enforcement practice had received considerable attention and performance had improved. There were problems with achieving national standards contact levels in some cases, a lack of home visits contributing to this.

Not all offenders eligible for accredited programmes were referred to them, particularly those released on licence, and there were delays in programme starts. Reviews of supervision plans and identification of offender progress against objectives were not given sufficient priority and further attention was needed to the ongoing management of risk of harm issues.

Overall, practice was better in HRoH cases than in cases posing a lower risk to the public.

- **Quality of Initial Outcomes:** In the case sample inspected there was a relatively low level of reconviction during the period of supervision, with the majority of cases showing progress on the offender's priority criminogenic needs. Most offenders contacted were very positive about the impact of supervision in making it less likely that they would reoffend. Overall, there was a good match between the needs and risk of an offender and the resources given to the case, broadly representing good value for money.

There was good attention being paid to long-term community reintegration by case managers and some evidence of evaluation data being used to improve service delivery. However, OASys was not being re-scored regularly and thus an opportunity missed to evidence effective practice and use aggregated data to inform resource allocation.

Recommendations

The Probation Board should ensure that:

- 1. achievement of national targets continues to be prioritised, particularly accredited programmes completions*
- 2. strategic probation involvement in MAPPA is increased and consideration given to the introduction of a MAPPA coordinator post to address issues of consistency in MAPPA functioning across the area*
- 3. PSO roles are reviewed so that more effective use is made of staff resources, particularly in low and medium risk of harm cases*
- 4. all staff receive regular supervision and an annual appraisal*
- 5. a training strategy is developed and implemented to make sure that all staff have the appropriate knowledge and skills required for their role*
- 6. the quality of risk of harm assessments is improved so that initial assessments are comprehensive and timely, reviews are undertaken on time and, where appropriate, changed circumstances relevant to risk of harm are reflected in revised assessments*
- 7. risk of harm registers are reviewed so they include all appropriate cases*
- 8. supervision planning is given a higher priority and the quality of plans and reviews is improved, including attention to diversity issues.*

Next steps

- This report has been submitted to the Secretary of State and copies provided to the Chief Executive of NOMS, the National Offender Manager, the Director General of the NPS, the Probation Board and CO. Copies have also been made available to the press and are on the website of HMI Probation at:
<http://www.homeoffice.gov.uk/justice/probation/inspprob/index.html>
- The report makes a number of recommendations which are designed to encourage the area in its work, to take further some of its own good practice and to promote improvements in quality and effectiveness in the future.
- The Board will be asked to send a response to the recommendations, together with an action plan, within three months of the publication of the report. It is anticipated that the recommendations will normally be implemented within 12 months of publication which should allow sufficient time for integration with existing developments. We will also expect the NPD to ensure that recommendations to Boards are implemented.
- Unlike previous area inspection programmes, ESI does not include routine follow-up inspections unless there is an issue of serious concern that needs to be addressed quickly. The inspection of the Dyfed-Powys Probation Area has not revealed any such issues.
- As well as reports on individual areas we will publish periodic reports about findings across several probation areas, reflecting the fact that this is an inspection of the NPS. Such reports will include addressing race equality and wider diversity issues, bearing in mind that, for example, the number of minority ethnic offenders is typically very small in many probation areas. These reports will also include comparisons of the performance of areas with similar characteristics.
- Over the three year period of the ESI programme we will be looking at the NPS's work with about 4,500 cases. We have arranged with the Home Office Research, Development and Statistics Directorate that cases in the sample will be followed through to the two year reconviction point. This will give a longer-term picture of the effectiveness of both individual areas and of the NPS as a whole. In addition, we will be contacting the area to obtain the OASys score at the end of supervision for each case examined in the inspection. This will make it possible to examine the impact of work done with the offender, in terms of change in the OASys score, over the whole period of supervision.

SCORING SUMMARY SHEET

Section A: Quality of management	
A1: Leadership and planning	Satisfactorily met
A2: Resource allocation	Satisfactorily met
A3: Management and supervision of staff	Partly met
A4: Partnership/contracting out	Well met
A5: Effective communication with sentencers	Well met

Section B: Quality of assessment	
B1: Assessment of risk of harm	56%
B2: Assessment of likelihood of reoffending	80%
B3: Case management	54%
B4: Documentation	73%
Score for section B	65%

Section C: Quality of interventions	
C1: Managing attendance and enforcement	80%
C2: Delivering appropriate supervision	68%
C3: Diversity needs	85%
C4: Responsivity	72%
C5: Management of risk of harm	69%
Score for section C	75%

Section D: Quality of initial outcomes	
D1: Interventions are delivered with the desired outcomes	64%
D2: Improvements are sustainable	68%
D3: Outcomes of interventions are assessed and reviewed using available data	Partly met
D4: Interventions demonstrate value for money	84%
Score for section D	73%

OVERALL SCORE FOR SECTIONS B-D (excluding D3)	71%
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INSPECTION ARRANGEMENTS

- The ESI programme started in June 2003. All 42 probation areas comprising the National Probation Service for England and Wales are being inspected over a three year cycle, with areas of similar characteristics (in terms of size and population density) visited in the same year to facilitate comparisons in performance. This enables us to identify and promote effective work with offenders and disseminate information about good practice.
- Probation areas are being assessed on how well they have met defined inspection criteria focusing on the:
 - overall management of the area
 - quality of the assessments carried out on offenders
 - quality of the interventions carried out with offenders
 - initial results of the interventions, both in relation to criminogenic factors such as employment, accommodation and substance misuse, and also whether there has been any reduction in the risk of harm and the risk of reoffending.
- The inspection takes account of the regular NPS performance data. These are produced by the NPD who are responsible for their collection and quality assurance.
- Each inspection takes place over two weeks, about three or four weeks apart. The area is asked to identify a random sample of 100 offenders (more in the largest areas) who have been under supervision for approximately nine/ten months, 20 of whom are registered as high risk of harm. The cases come from most categories of orders and licences.
- During the first week of the inspection we examine the file, carry out an in-depth interview with the case manager and, where possible, interview the offender and any other people significantly involved in the supervision (e.g. accredited programme tutors, hostel key-workers, police in high risk of harm cases, CP supervisors, and staff of other organisations involved in providing a service to offenders in relation to drugs, alcohol, employment, etc).
- Inspection of about a third of the cases in the sample is carried out by experienced staff of the probation area being inspected. We think this provides a positive experience both for the area and the staff directly involved and that it increases ownership of the findings.
- The second week of the inspection involves meetings with senior and middle managers and Probation Board members to cover issues around the management of the probation area concerned, and to provide some feedback from the first week of the inspection. We also talk with the police in relation to the area's supervision of high risk of harm cases and with representatives of other organisations that are assisting the area with the supervision of offenders.
- ESI also includes an additional thematic element which, in due course, leads to the publication of a separate report describing the work of several probation areas. In the second group of probation areas being inspected in 2004/2005 the thematic element is on Offender Accommodation. A summary of the provisional findings in relation to Dyfed-Powys is included at the end of this report.

SCORING APPROACH

Assessment of the Quality of Management criteria is based on written evidence and discussions with Board members, managers and other organisations that work with the probation service in the supervision of offenders. A descriptive score is assigned to each of these criteria. Scoring of the Assessment, Interventions and most of the Initial Outcomes criteria is based on the inspection of work with the 100 offenders in the case sample. A numerical score is calculated for each of these criteria. More detailed information about the scoring methodology is available on the HMI Probation website.

Quality of Management criteria

- A score is derived from assessment of performance on each of the individual evidence items within the criterion (excluding those relating to the NPD). Scores are defined as:
 - **Very well met:** very strong performance on each item
 - **Well met:** strong performance on each item
 - **Satisfactorily met:** strong performance on the majority of items and at least satisfactory performance on the others
 - **Partly met:** good performance on some of the items and at least satisfactory performance on the others
 - **Not met:** at best only satisfactory performance on some of the items
 - **Poor:** otherwise.
- For Leadership and Planning some additional weighting is given to performance on NPD and other Government targets. These are DTTO commencements, enforcement, accredited programme completions, sickness absence, ECP completions, victim contact, PSR timeliness, basic skills starts and basic skills awards.
- There is some discretion for lead inspectors for scores to be adjusted if this seems appropriate from other findings or contextual information.
- The same approach is adopted for the Quality of Initial Outcomes criterion D3 'Outcomes of interventions are assessed and reviewed using available data'.

Quality of Assessment, Interventions and Initial Outcomes criteria

- A score is calculated for each criterion based on the reading of case files, interviews with case managers, contact with others significantly involved in the supervision and, if possible, conversations with the offenders themselves.
- Scores for each of the criteria are weighted as set out below, with the critical criteria being weighted as twice the important criteria.

Quality of Assessment		
B1	Assessment of risk of harm	Critical
B2	Assessment of likelihood of reoffending	Critical
B3	Case management	Critical
B4	Documentation	Important

Quality of Interventions		
C1	Managing attendance and enforcement	Critical
C2	Delivering appropriate supervision	Critical
C3	Diversity needs	Critical
C4	Responsivity	Important
C5	Management of risk of harm	Critical

Quality of Initial Outcomes		
D1	Interventions are delivered with the desired outcomes	Critical
D2	Improvements are sustainable	Important
D4	Interventions demonstrate value for money	Critical

- An overall performance rating for the area is then calculated, weighted as follows:
 - Quality of Assessment 30%
 - Quality of Interventions 40%
 - Quality of Initial Outcomes 30%

- The scoring sheet shows the assessment or score recorded for each criterion, plus the overall scores for Sections B, C and D. The assessment and scores are also recorded alongside the relevant criterion in the text.

OVERVIEW OF THE AREA

- In terms of its main revenue budget of £6.5 million in 2004/2005, Dyfed-Powys is the fifth smallest probation area in England and Wales, though it covers over half the landmass of Wales. It has a total population of some 488,300 with a population density (persons per square km) of 213, much lower than the England and Wales average of 348. As such, Dyfed-Powys is one of the ‘small size, low density’ areas in the family grouping of areas which we currently use for making comparisons.
- The latest available data show that 1% of the population are from minority ethnic groups, which is a much lower proportion than the average of 9% for England and Wales as a whole.
- In 2003/2004 the number of all recorded crimes per 1,000 population was 63, considerably lower than the figure of 113 for England and Wales as a whole. However, the corresponding figure for violent crime – 16 per 1,000 population – was similar to the national one of 18.
- In 2002 (the latest year for which data are available) 1,383 persons were found guilty or cautioned for indictable offences per 100,000 population, somewhat higher than the England and Wales figure of 1,050.
- Data collected by the NPD on Dyfed-Powys’s performance on the main Home Office targets and on certain other key NPS and national standards targets are shown in the table overleaf. Except where indicated, the figures relate to the first two quarters of 2004/2005.
- The area had performed well and achieved targets on PSR timeliness, basic skills awards, ECP completions, and victim contact. Breach action was a ‘near miss’ and above the national average. (Locally produced performance figures showed achievement of this target though this was not reflected in the NPD data as there had been an error in the local information originally supplied.) DTTO commencements were the same as the national average but below the target. The target for sickness absence had not been met and the area had a higher rate of absence than the national average. Performance on basic skills commencements and accredited programme completions was poor and well below the national average.
- The NPD produces a weighted scorecard comparing area performance against targets for some of the above results. The latest scorecards revealed that Dyfed-Powys was placed 26th out of 42 NPS areas in September 2004, compared to 32nd in June 2004. That had been its lowest position, its highest to date having been fourth in September 2003.
- The reconviction rate for community orders was statistically significantly lower than that predicted, suggesting some success in reducing reoffending. However, some caution is needed in interpreting reconviction data particularly at individual area level and the results need to be considered in the context of police clear-up rates and other variables. Dyfed-Powys Police had a policy of investigating all reported crime and the lower reconviction rate is noteworthy in this context.

	Target	Dyfed-Powys	England & Wales average
Proportion of magistrates' courts PSRs prepared in 15 working days	90%	92%	78%
Basic skills: % performance against starts target	100%	53%	123%
Basic skills: % performance against awards target	100%	100%	114%
Accredited programme completions: % performance in relation to target	100%	58%	91%
Enforcement – breach taken where required within ten working days (all orders/licences)	90%	89%	85%
DTTO starts: % performance in relation to target	100%	80%	80%
Home Secretary's race equality employment target	1.7% (target for Wales)	3.9% (result for Wales)	11.3% (2003)
Sickness absence: average days absence	9 days	13.3 days	11.5 days
ECP: % performance against completions target	100%	135%	150%
Proportion of victims of serious sexual/violent offences (where offender sentenced to custody of 12 months or more) offered contact within eight weeks	85%	100%	93%
Proportion of appointments arranged in line with national standards	90%	86%	86%
Proportion of appointments attended in line with national standards	65%	65%	62%
Two year reconviction rate for community orders (information for commencements in the first quarter of 1999)	To achieve actual rates that were lower than predicted	Actual 49.3% Predicted 53.7%	Actual 50.2% Predicted 51.7%

SECTION A QUALITY OF MANAGEMENT

A1 Leadership and planning

Satisfactorily met

Description:

The Board and CO lead the area in the achievement of national targets and implementation of national policies through the production of local policies and procedures which are regularly monitored and reviewed. Areas are enabled to work efficiently and effectively by the NPD who develop national targets and policies in line with Ministerial priorities and provides guidance and resources. The SMT is committed to the implementation of national and local targets and priorities, including What Works strategies, risk management and promoting diversity.

Strengths:

- Since it was formed the Board had worked hard to fulfil its statutory responsibilities and develop its role. Its committee structure made good use of the expertise of members who brought a variety of experiences in business and financial planning. The Board was viewed by the SMT as supportive, but also able to challenge and hold them to account in respect of performance. The Board functioned effectively within the national framework, whilst recognising the role and influence of the WAG which held devolved responsibility in respect of a number of issues affecting the area including housing and substance misuse.
- The SMT was small in number, resulting in each senior manager holding a wide portfolio of responsibilities. They were committed to working as a team and operated collaboratively, with the CO also taking a clear lead on various issues, in particular on diversity. Senior managers were perceived by other staff as being accessible and visible and their lead in policy promotion and implementation was welcomed, recent examples being policies on public protection and the new Staff Review and Development Scheme. Policies and procedures were available to staff in electronic format and indicated review dates.
- The area's business plan was produced in the prescribed format, including improvement priorities, and had been developed in a very inclusive style. Board members were actively involved in the formulation of the plan and its associated budget, and unions were represented in the planning process along with a variety of grades of staff. Key stakeholders were also consulted, including the Race Equality Council, and feedback from the WAG and the local Health Board had resulted in additional objectives in the 2004/2005 plan relating to substance misuse and mental health issues. In addition, the area had contributed to the All-Wales Probation Business Plan. The CO had taken the lead on its Welsh Language Scheme and EEM elements, whilst the Board Chair had led on the business improvement model.
- Clear expectations were set in the plan that all national targets would be met. The plan was circulated electronically to all staff who also had access to the published version in both Welsh and English. In addition, a useful abridged version was sent to all staff and stakeholders in order to convey key elements. DMs felt very involved in business planning and this aided the production of team and unit action plans identifying how they were intending to achieve the top 20 targets. Each staff member and key stakeholders also had a copy of the area's performance management framework which set out what aspects of performance were being measured and how this would be done. This document formed the

basis of performance reporting to DMs and the SMT on a monthly basis and to the Board quarterly, evidencing achievements against targets and objectives and indicating action to be taken to address gaps. The CO also followed up personally any shortfalls in performance by asking managers to account for them. The improvement in enforcement performance had resulted from a considerable focus on this area of work.

- Whilst there had been tensions in relationships with the NPD, particularly in respect of recognition of the differences between England and Wales and the impact of this on target achievement, support from the Regional Manager and the Director General had been appreciated. There had been positive feedback on the format of the business plan and on achievement across a range of performance targets in 2003/2004. The latter resulted in an Achiever's Bonus for the area in August 2004.
- There had been a focus on collaborative working across the four probation areas in Wales. Performance reporting included bi-annual All-Wales reports, which enabled Dyfed-Powys to benchmark itself against the others. Planning for the future under NOMS had included a recent workshop for SMTs across Wales on the implications of contestability. As part of giving attention to the implementation of NOMS in Wales, the NPD had now set up a pathfinder project to address this issue.
- The area remained committed to the What Works agenda and had recently rolled out the accredited substance abuse programme OSAP. It intended to implement the new domestic violence programme IDAP on a collaborative basis across Wales in the first half of 2005/2006, and plans had also been put in place to introduce the CSB programme in the area early in 2005. Both initiatives would enhance the range of interventions provided.
- Clear leadership has been demonstrated by the CO on diversity issues. The Race Equality Scheme was integrated in the strategic planning process and incorporated recommendations from our race thematic follow-up inspection. Dyfed-Powys had been identified as a good practice example by external consultants in the Year Two Race Equality Scheme progress report to the NPD. The Welsh Language Scheme had been approved by the Welsh Language Board in July 2004 and the CO chaired the area's implementation group for this. All managers had recently undertaken diversity training focusing on cultural awareness and the religious beliefs of communities in Wales, using the *Living in Harmony* booklet produced by the Welsh probation areas. This training was scheduled to be rolled out to teams in early 2005. Work on diversity issues was also being undertaken through the LCJB, including a specific focus on PSR concordance data to ensure offenders from minority ethnic groups were treated fairly with respect to proposals and outcomes. Where there were concerns regarding PSR content, this was followed up in person by the CO to seek an explanation.

Areas for improvement:

- By the second quarter of 2004/2005 national performance targets had not yet been achieved in relation to accredited programme completions, basic skills commencements, DTTO starts, and sickness absence. Action had already been taken to address these issues, including moving resources – see section A2. Progress on basic skills commencements had been hindered by the lack of provider infrastructure in Wales compared with England. The area had needed to develop its own partnerships with local colleges or other training providers, which had proved challenging given the rural nature of Dyfed-Powys and the limited number of offenders in any one location.

- Access to accredited programmes by offenders on post-release licences remained a concern, particularly as this had been identified as an outstanding matter in our PIP follow-up in June 2003.
- Joint work with the police in some HRoH cases had pre-dated MAPPA and historically all meetings had been chaired by the police. This responsibility was now shared with probation and DMs chaired both level 2 meetings and MAPPP at level 3. Depending on the profile and seriousness of the case, meetings at either level could be chaired by ACPOs. Given the requirements of the national MAPPA guidance, it would have been expected that senior managers, rather than DMs, were involved in the MAPPP in all instances. There was a lack of consistency in the workings of MAPPA across the area, including variation in the grade of police officers attending meetings and in how the meetings were conducted. In some there had been decisions to review, in detail, all MAPPA cases monthly, regardless of current risk posed, and this had led to a backlog in reviews, including some on serious sex offenders. The strategic management board was engaged in a process of change and was working towards implementing the new MAPPA guidance. The variations in practice had been acknowledged by police and probation and work was underway, through the strategic management board, to produce multi-agency guidance on risk classification and MAPPA processes. A jointly funded administrator post was planned, to address quality issues regarding meeting minutes, but no MAPPA coordinator post was envisaged. Such an appointment (successfully introduced in other areas) would address issues of consistency in MAPPA functioning.

A2	Resource allocation
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Satisfactorily met

Description:

The area demonstrates a strategic approach in allocating resources to deliver effective performance and shows positive results in relation to value for money.

Strengths:

- The widespread and predominantly rural nature of Dyfed-Powys posed particular challenges in resource allocation and the area showed creativity and flexibility in meeting performance requirements and offender need. For example, allocating resources to assist with transport and working collaboratively with neighbouring areas to enable access to the sex offender programme.
- There was a workforce plan and the workload prioritisation framework (in the process of being updated) conveyed to staff how resource allocation decisions were made in the face of competing demands.
- Property had been rationalised in order to make efficiency savings. The area had been awarded the ‘Two Ticks’ Disability Symbol user status and all offices now had in place strategies to ensure equal access to services. However, it was recognised that some buildings were not yet conducive to requirements under The Disability Discrimination Act 1995.
- Resources had been shifted to address performance issues in accredited programme provision. Four full-time PSO posts had recently been dedicated to programme delivery and early indications were that this was improving the rate of completions.

- Operational support staffing had been restructured following an extensive review. The new divisional administrator posts were seen as a positive move, reducing inconsistencies in staffing and procedures across the area and providing additional support at the front line.
- The Annual Audit Letter (November 2004) noted that the Board was often faced with competing priorities and limited resources with which to meet these. It found that sound financial management had been demonstrated in the face of increasing budgetary pressures and that those pressures were expected to continue. The area's internal systems of financial control had met the required Internal Audit standards and business risk management arrangements were well embedded into the day-to-day management of the Board. Internal Audit had been reduced for 2004/2005, showing that the area was delivering good value for money. Regular performance and budget reports to the NPD also demonstrated how it was held to account for its allocation of resources.

Area for improvement:

- The area had taken a decision not to involve PSO grade staff (apart from in CP) in undertaking risk assessments or supervision planning, even in cases posing a low risk of harm. This was a source of frustration to many PSOs and meant that a valuable resource was underutilised at a time when PO case managers were feeling under increasing pressure. It was recognised by the area that this needed to be reviewed, particularly in the light of the impending implementation of the Criminal Justice Act 2003 and the likely need to focus more resources on work in courts.

A3	Management and supervision of staff	Partly met
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Description:

The Board and CO have human resources planning strategies that ensure delivery of effective supervision to offenders.

Strengths:

- As already indicated in section A1 performance targets were broken down to divisional and team level and performance data were discussed in team meetings, with appropriate action being taken. An example from CP had involved examination in the team meeting of offender compliance figures. Renewed attention had been given to motivating offenders and this had led to immediate improvement in performance in the next quarter. Regular workforce reviews were undertaken, covering service delivery and wider human resources issues including vacancies, arrangements for TPOs and shifts in workload. A recent example involved the realignment of work between two teams to achieve a more equitable workload.
- The area had launched a new Staff Supervision and Appraisal Scheme in March 2004, with the lead taken by the head of human resources and the CO. The Staff Review and Development Scheme had also been received positively by staff and managers, being seen as a process that made appraisal more collaborative. However, see overleaf for findings during the inspection.
- Diversity briefings had been provided regularly to the Board and managers in relation to employment issues such as sexual orientation and faith. Race equality and diversity targets and outcomes in relation to staff had been evidenced in the annual report. A diversity advisor had been involved in the recruitment of managers, though not in respect of other grades of

staff. The area had demonstrated sensitivity to issues of language, with all external publications produced in both Welsh and English. The NPD had provided funding for the area's attendance at the National Eisteddfod of Wales and the Royal Welsh Show, both of which increased the visibility of the probation service and offered recruitment opportunities.

Areas for improvement:

- Sickness absence had been a cause for concern with an average of 13.3 days per employee in the first two quarters of 2004/2005, well above the national target of nine days. Extensive work had been undertaken to reduce this figure, some of which had involved long-term illness. The latest local figures had been more encouraging as some staff had been able to return to work and others had been approved for retirement on health grounds. However, the area was aware of the need to continue its focus on staff attendance and ensuring a healthy workforce.
- Whilst a variety of staff training had been provided there was no overall training strategy. There had been victim awareness training for managers and for specialist staff involved in victim contact work but none for case managers. There was evidence of a lack of knowledge about domestic violence on the part of a number of case managers, and access to child protection training also seemed to vary across the area. Induction of new staff took place but, again, there was no consistent provision. The area needed to identify core training for all case managers (POs and PSOs) and monitor its provision, uptake and outcomes. This needed to include induction and refresher training.
- The launch of OASys had been undertaken as a single exercise, with both the new assessment process and its electronic version implemented at the same time. Technical difficulties with the latter had impacted adversely on the understanding and use of the system by staff, and it was evident in the inspection that some case managers still lacked the requisite knowledge and understanding to undertake risk assessment and management using OASys. CP case managers appeared particularly affected and this was recognised in the recent CP self-assessment exercise. The area acknowledged that refresher training for some staff was needed and was considering how best to engage with this.
- Inspection figures showed that a small number of the case managers interviewed had not received an appraisal in the previous year, and half had had a formal supervision session with their line manager only once every six months or less. Worryingly, some case managers indicated that they had not had a single formal supervision session in the last 12 months and some of these were relatively inexperienced staff working with HROH cases. Personnel difficulties in one office, which took ten months to resolve, had clearly affected the provision of formal supervision and appraisal there. That situation was now resolved and a new DM was in post, but the inspection findings were not confined to that office.

Description:

The Board and CO have strategies and procedures in place to ensure that the area's partnerships with both voluntary and statutory agencies support service delivery and are value for money.

Strengths:

- The area had undertaken a major review of all contracted provision by partner agencies in 2003/2004, following a needs assessment. New partners were identified in this process and a standardised partnership contract, initially for a 12 month period, was now used. There were partnerships with a wide variety of organisations covering housing advice and support and mentoring, accommodation and bond schemes, basic skills, and drug and alcohol services.
- All partners were required to have equal opportunity policies in place and to have the facility to carry out interventions in the Welsh language. One of the new partnerships was with Crime Concern and offered mentoring for women offenders. Along with colleagues on the LCJB, the area was working to develop networks with a wider number of community groups, including minority ones, with the eventual aim of improving service provision.
- There was a strong focus on working collaboratively with other agencies, whether contracted or statutory partners, both in the Dyfed-Powys area and across Wales. The Criminal Justice Substance Misuse Scheme was a partnership with the police, the four local Health Boards and four Community Safety Partnerships, to provide DTTO and Arrest Referral Services. This had been reviewed positively in 2004 by outside consultants whose report commented on the outstanding partnership work demonstrated, including the use of pooled budgets. The area also contributed to a seconded post at the WAG – see the provisional findings relating to the offender accommodation thematic for details.
- Partner agencies, including police, interviewed during the inspection were clear about their role in reintegrating offenders into the community and overall were positive about their relationship with the probation area.
- A significant number of community agencies provided regular CP placements, both individual and group. The area had been concerned about whether these placements could meet ECP quality standards but had been encouraged by the NPD to continue use of the projects given the importance of community involvement.

Areas for improvement:

- There was monitoring of referrals to partnerships and the number of offenders provided with services, but no monitoring of the quality of provision or the outcomes of the intervention.
- No specific partnerships had been developed to support work with minority ethnic groups and there was no specific monitoring of service provision to minority groups.
- Although there were regular monitoring meetings with individual contracted partner agencies, there was no consultative forum for these service providers. Such a forum could provide an opportunity to share good practice and facilitate communication, particularly around changes in probation practice.

- There was a perceived gap in provision in one part of the area for offenders with mental health difficulties. This could be pursued by the newly formed Four Counties Multi-Agency Criminal Justice Mental Health Group.

GOOD PRACTICE EXAMPLE

Some offenders starting CP now attended a 'taster session' and had an assessment of their basic skills, in conjunction with the Basic Skills Agency. The agency had also delivered awareness training for CP staff and was involved in reviewing the standard letters used with a view to making them more easily understandable and thus more user-friendly.

A5 Effective communication with sentencers

Well met

Description:

There is high quality, proactive communication by the area, supported by the NPD, with local sentencers and clerks to the justices about the supervision of offenders and the provision of reports.

Strengths:

- Formal meetings with sentencers were held twice yearly at bench level, using an area-wide agenda to ensure consistency in communication. Presentations had included information about new initiatives in the probation area and reports on achievement against targets. NPD materials had also been used to convey information, for example the video on ECP. Board members who were sentencers confirmed the usefulness of these meetings and the high attendance at them by magistrates.
- There were formal protocols in place with magistrates' and Crown Courts in the area and specific agreements had been reached, including guidelines for the preparation of PSRs and SSRs and attendance at Narey courts. There was regular communication with legal advisors through court users' groups, and with the clerk to the justices and heads of other criminal justice agencies through the LCJB.
- The area had produced an excellent *Sentencers' Pocket Guide*, detailing in English and Welsh the services available to courts and the community sentences provided. Other information leaflets and posters had been provided and the presiding judge and justices' clerk had confirmed their presence in retiring and robing rooms.
- Twice yearly a PSR quality improvement programme was undertaken as a joint exercise between staff (including TPOs), managers, magistrates and the resident judge. PSRs were analysed and feedback given to teams and individual report writers. Both case managers and sentencers viewed this as a positive exercise which had influenced practice.
- The CO and ACPO with specific responsibility for courts had used probation case studies in magistrates' training, working alongside the presiding judges for the two Crown Courts.

Area for improvement:

- No recent survey of sentencer satisfaction had been undertaken. Whilst feedback from sentencers who attended the twice-yearly meetings and the PSR quality improvement programme had been positive, the area recognised that a further survey would be helpful.

GOOD PRACTICE EXAMPLE

A presentation had been given to 50 magistrates, in the medium of Welsh, on the services the probation area provided to Welsh speaking offenders. The PO concerned had since been requested by the resident judge to deliver a similar presentation to the Judicial Studies Board.

SECTION B QUALITY OF ASSESSMENT

B1 Assessment of risk of harm

56%

Description:

Risk of harm is satisfactorily assessed using an approved instrument (OASys where available), specialist assessment tools, where relevant, and draws on MAPPA, other agencies' and previous probation service assessments.

Strengths:

- In 88% of cases the OASys risk of harm classification was considered to be appropriate. A majority of the offenders in the sample posed a low to medium risk of harm.
- There was evidence of appropriate management involvement in assessment in 70% of HRoH cases.
- Overall, there was a close fit between the interventions planned and the assessed risk of harm in 76% of cases, though slightly lower in HRoH cases (70%).

Areas for improvement:

- A satisfactory assessment of risk of harm had been completed at the commencement of supervision in only 49% of cases, slightly higher in HRoH cases (52%). This concerned both the content and timeliness of the assessment, with 40% of the cases inspected being insufficient or poor in respect of their content. Again, this was slightly better in the HRoH cases, where 50% had satisfactory content, but the quality of assessments of harm remained a concern. It was acknowledged that there was no full, systematic, review of HRoH cases, DMs concentrating on national standards issues rather than quality of risk assessment.
- In only 40% of HRoH cases had a satisfactory risk management plan been produced within five working days as required by the national standard.
- Reviews of risk of harm assessment were carried out to a satisfactory standard in only 14% of cases. This rose to 29% in HRoH cases, but the majority of cases were not being regularly reviewed at 16 week intervals, as required by the national standard.
- There were some inconsistencies between the OASys risk of harm classification and the risk registration on CRAMS, for example a HRoH case which was not on the CRAMS register. Not all child protection cases were registered as such on CRAMS and domestic violence registration was also missed in some cases.

GOOD PRACTICE EXAMPLE

The MAPPP meeting took place before this offender's release from custody and a multi-agency risk management plan was agreed. The offender was invited to attend the meeting on his release, in order that the plan could be fully explained to him. He declined to attend and challenged the plan, but the multi-agency focus remained on ensuring he understood what was required of him and that his licence conditions were complied with. This included appropriate enforcement action when he failed to comply.

B2	Assessment of likelihood of reoffending	80%
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Description:

The likelihood of reoffending and criminogenic factors are satisfactorily identified and assessed using an approved instrument (OASys, OGRS2, LSI-R, ACE).

Strengths:

- In 75% of cases the likelihood of reoffending and criminogenic factors had been satisfactorily assessed using OASys or another approved tool. This rose to 85% in HRoH cases.
- A clear likelihood of reoffending score had been recorded in 86% of cases.

Area for improvement:

- In 20% of cases neither OASys nor OGRS2 were used as assessment tools at the beginning of the sentence or licence.

B3	Case management	54%
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Description:

The case is managed effectively and interventions coordinated to enable criminogenic factors to be addressed and any risk of harm managed. The ISP or CPO assessment takes account of the PSR, SSR or sentence plan in licence cases, and describes an overall plan of work for each offender, in line with the assessments of risk of harm and need and the likelihood of reoffending.

Strengths:

- In 93% of cases steps had been taken to ensure that the offender understood the requirements of their order or licence. This rose to 100% in the HRoH cases. The area had a standard induction procedure that covered expectations on offenders concerning their attendance, behaviour and participation in supervision.
- Appropriate interventions in line with the risk assessment were identified in 76% of HRoH cases, though this figure dropped to 67% in the sample as a whole.

Areas for improvement:

- 66% of ISPs did not meet national standards on content and timeliness. The figure was slightly better for HRoH cases but, overall, supervision planning was not satisfactory. Many case managers also had difficulty in identifying SMART objectives to be achieved by the offender; this was sufficient in only 47% of cases.
- Liaison responsibilities between case managers and others providing interventions were clearly defined in only 39% of cases. This was somewhat better in HRoH cases (52%).
- Supervision plans demonstrated sensitivity to diversity issues in only half the cases inspected.
- In over a third of cases there was insufficient evidence that the supervision plan was communicated to the offender so that they could actively participate in the planning process.
- Where there were action plans from other meetings, for example MAPPA or child protection conferences, these were integrated into the supervision plan in only 46% of cases.

Description:

All relevant documentation is available and has been satisfactorily completed.

Strength:

- Overall, records were well organised and complete in 70% of cases, with recording clear and sufficient in 77%, rising to 80% in HRoH cases.

Area for improvement:

- Case files examined contained no 'confidential' section and third party information was stored in a variety of places within and outside the file. Also, some staff were unaware of the existence of the confidential section in CRAMS. This was worrying, as information relating to victim safety could be found in sections of the file open to the offender.

SECTION C QUALITY OF INTERVENTIONS

C1 Managing attendance and enforcement

80%

Description:

Contact with the offender and enforcement of the order or licence is planned and implemented to meet the requirements of national standards.

Strengths:

- In 84% of cases (90% of HRoH cases) offender attendance across all interventions was monitored sufficiently by the case manager, with appropriate action taken where necessary to ensure compliance.
- Judgements about offender absence were found to be appropriate in 82% of cases, rising to 88% in HRoH cases.
- Of 40 relevant cases, 78% had breach action taken within the required timescale. Again, this figure was higher in HRoH cases (86%).

Area for improvement:

- Only 53% of cases had had sufficient appointments arranged to meet national standards. There was some evidence of first appointments taking place later than required and in only half of the relevant cases had a home visit been undertaken within the timescale. The figures for HRoH cases were even more concerning, with sufficient appointments being arranged in only 45% of cases and home visits taking place in only 48%.

C2 Delivering appropriate supervision

68%

Description:

Interventions are delivered to achieve the objectives identified in the ISP and recorded according to the requirements of national standards. Supervision is prioritised according to an ongoing assessment of risk and need and takes account of previous reviews and work already undertaken by the area and other agencies. Case managers oversee and coordinate the work of other staff and partner organisations and all staff play an active part in motivating and supporting offenders throughout their supervision.

Strengths:

- There were good examples of work with offenders to address community reintegration in 86% of cases, 95% in the HRoH sample. This included interventions directed at substance misuse, ETE and accommodation issues.
- Overall, others significantly involved in delivering interventions expressed positive views about case managers' liaison with them and were clear that their work was focused on community reintegration.
- In HRoH cases, there was good evidence of the case manager liaising with others in 90% of cases, though this figure was lower in the overall sample (79%).

- Victim issues generally, and victim awareness work where there was a direct victim, were addressed sufficiently in 70% and 75% of HRoH cases respectively. However, see below regarding the general sample.
- In 90% of the HRoH cases the case manager motivated the offender by reinforcing the work undertaken by others and engaged with the offender to reduce their offending to a satisfactory standard. Again, this figure was lower in the overall sample at 74%.
- The area had arrangements with its neighbours for offenders to access a particular accredited programme where this was not readily available in their locality, for example the arrangement with West Mercia in respect of the community-based sex offender programme.

Areas for improvement:

- Review of supervision plans, and identification of progress against objectives, was not given sufficient priority by case managers. In only 14% of cases was this undertaken to national standards, 33% in HRoH cases.
- There was evidence that not all offenders who were eligible for accredited programmes were able to access them, despite the arrangements referred to above. Where the offender was within the target range for an accredited programme, but had not either completed a programme or been referred to one, the reason given was judged to be appropriate in only 24% of cases, dropping to 17% in HRoH cases. In particular, there was indication that offenders released on licence were not being considered routinely for accredited programmes.
- Where offenders were due to undertake an accredited programme, only 28% were enabled to start the programme within the required timescale; the figure was 40% for HRoH cases.
- Across the general inspection sample, victim issues were satisfactorily addressed with the offender in only 58% of cases. This was surprising given the area's good performance in relation to contact rates in statutory victim contact work and the better performance with HRoH cases. It appeared that some case managers were over-reliant on victim awareness work being undertaken on accredited programmes.
- In only 57% of relevant cases did the supervision plan reviews integrate MAPPA risk management plans.

GOOD PRACTICE EXAMPLE

The case manager used a variety of partnership resources in this case to ensure that the supervision plan objectives were achieved. This included referral to the substance misuse agency Prism, the Duke of Edinburgh's Award Scheme, Careers Wales for employment and careers advice, and counselling services regarding self-harm issues. The offender, case manager and partnership agencies worked closely together on the supervision plan, monitoring progress to enable achievement of its objectives.

Description:

There is a full range of interventions to meet diverse needs. There is evidence of appropriate support arrangements for women, minority ethnic and disabled offenders.

Strengths:

- In 88% of cases the delivery of interventions was sensitive to diversity issues, though the figure was lower in HRoH cases (78%).
- 92% of offenders contacted believed that their particular needs had been taken into account, and there were a number of examples where appropriate arrangements were made for offenders with care responsibilities and those with disabilities, who made up a significant proportion of the overall sample. 25% had a disability, rising to 29% in the HRoH cases.

Areas for improvement:

- In 34% of cases (42% in HRoH cases) literacy and dyslexia issues were not sufficiently addressed and there was evidence of the basic skills assessment questionnaire being scored incorrectly.
- There were no specific support arrangements in place for the very low number of offenders from minority ethnic groups.

GOOD PRACTICE EXAMPLE

This offender requested supervision through the Welsh language. Considerable efforts were made to ensure that his case was allocated to a case manager in a different team and office so that supervision could be conducted in Welsh. This ensured his diversity needs were taken into account and that he could engage fully in the work undertaken with him.

Description:

Offenders' learning style, motivation and capacity to change are taken into account in the assessment and intervention plan.

Strength:

- In 79% of cases consideration was given to the most effective way to work with the offender and this rose to 81% in HRoH cases. This covered issues such as the type and pace of intervention or the CP work placement.

Area for improvement:

- The quality of pre-release work undertaken with licencees was satisfactory in only 43% of HRoH cases, and was only slightly better in the overall sample. A low priority was placed on prison visits given the travel distance, even in HRoH cases.

Description:

Risk of harm is actively managed in consultation with other agencies.

Strengths:

- Changes in risk of harm had been identified and managed appropriately in 83% of HRoH cases, though see below in relation to the overall sample.
- The level of interventions was considered sufficient in relation to the assessed risk of harm in 80% of cases overall.
- Where potential public protection issues had arisen, sufficient action had been taken in all but two cases and the single case that needed liaison with the NPD Public Protection Unit had been handled appropriately.

Areas for improvement:

- In 41% of cases in the main sample, changes in risk of harm had not always been recognised and acted upon and performance in this respect was judged as poor in 22% of the cases.
- Relevant HRoH cases contained an adequate MAPPAs or other inter-agency risk management plan in only 46% of cases. In 47% of cases the plan had been executed appropriately, and in 53% reviewed as required. There was differential practice across the area as to how MAPPAs risk management plans or action plans were produced and stored. Some case managers expressed concerns about the accessibility of the plans and thus their own ability to ensure they were executed and reviewed properly.
- There was satisfactory probation involvement in 82% of child protection cases, though this fell to 75% for HRoH cases. However, both figures needed to be close to 100% given the nature of the work involved.

SECTION D QUALITY OF INITIAL OUTCOMES

D1 Interventions are delivered with the desired outcomes

64%

Description:

Planned objectives are achieved and the risk of harm/likelihood of reoffending is demonstrably reduced.

Strengths:

- 85% of offenders had not been convicted for a further offence committed since the start of the order or licence (76% for HRoH cases).
- The majority of offenders contacted were very positive about the beneficial effects of their supervision in terms of making them ‘think twice’ about reoffending (77%), and making it less likely that they would reoffend (89%).
- Thinking skills, alcohol and drugs were the criminogenic needs with the highest priority in the overall sample. In 61% of cases there was evidence of progress on these factors. In the HRoH sample accommodation, health and mental health also featured as high priorities and 62% of cases showed evidence of progress on these.

Areas for improvement:

- There was evidence that learning outcomes or skills had been applied in only 48% of cases and evidence of improvement in community ties and social circumstances in 58%.
- Only 41% of cases contained evidence of positive change in their attitudes, beliefs and behaviour, dropping to 38% in HRoH cases. This contrasted with the views of the offenders contacted (see above) and may relate to a limited focus on outcomes in case recording.
- In 58% of cases the offender had attended all, or nearly all appointments or work sessions. Although this rose to 71% in HRoH cases, a higher rate of attendance would have been expected overall.
- Whilst there was evidence in 72% of HRoH cases that the risk of harm had been successfully contained, the figure was considerably lower in respect of reduction of risk of harm.

GOOD PRACTICE EXAMPLE

There was a well-considered match between this offender's needs and her individual CP placement. The placement was chosen to challenge her appropriately, raise self-esteem and increase employability, and was designed to take into account her childcare responsibilities and poor public transport provision. The offender successfully completed her CP hours and her good progress overall resulted in the court revoking her CPRO early.

Description:

Results are capable of being sustained beyond the end of supervision.

Strengths:

- ▣ There was evidence of attention being paid to long-term community reintegration issues in 72% of all cases, rising to 86% in the HRoH sample.
- ▣ Sufficient attention had been given to ensuring that offenders maintained contact with community organisations to meet their criminogenic needs in 79% of the HRoH cases.
- ▣ On display in office reception areas were leaflets and posters relating to community facilities which could be undertaken and continued once supervision ended, for example Open College facilities and the Duke of Edinburgh's Award Scheme.

Area for improvement:

- ▣ 36% of relevant cases in the overall sample contained no evidence that attention had been given to ensuring that offenders could maintain contact with community organisations to meet their criminogenic needs once supervision had ended.

Description:

All available data are used to assess the effectiveness of interventions.

Strengths:

- ▣ Use had been made of research findings on basic skills to inform the work of basic skills coordinators in each team, thus encouraging the focus on this type of intervention as a way of reducing reoffending.
- ▣ Surveys of offenders on CP and the beneficiaries of their work had been undertaken regularly.
- ▣ There had been a recent full-scale evaluation of DTTO work and operational procedures had been influenced by this.

Areas for improvement:

- ▣ OASys was not being re-scored regularly and thus an opportunity was being missed to evidence effective practice with individual offenders. Neither was the area making use of aggregated data from OASys, for example regarding criminogenic needs, to inform resource allocation and partnership provision.
- ▣ Outcome information was focused primarily on performance issues rather than practice with specific offenders. There was little evidence of case managers and middle managers reviewing interventions with individual offenders in response to monitoring and evaluation information.

Description:

Interventions are delivered with efficient and appropriate use of resources.

Strengths:

- In 85% of cases overall the resources allocated were consistent with the offender's risk of harm and the likelihood of reoffending. In HRoH cases this figure rose to 95% in respect of likelihood of reoffending.
- Resources were being used efficiently in 83% of cases overall, rising to 86% with the HRoH sample.

Area for improvement:

- In 71% of the HRoH cases, the resources allocated were judged as sufficient in relation to risk of harm. This was lower than would be expected given the nature of these cases.

THEMATIC ELEMENT: OFFENDER ACCOMMODATION

SUMMARY OF THE PROVISIONAL FINDINGS FOR DYFED-POWYS

Introduction

Every inspection in the ESI programme includes a thematic element and for the fourth group of eight areas visited this element was offender accommodation. HMI Probation developed a set of standards and criteria for the thematic inspection. These described best practice in offender accommodation fieldwork. The thematic sample was separate from the ESI sample and was focused on offenders with accommodation needs. A full report on the whole thematic inspection will be published after the visit to the last of these areas.

Pending publication of the thematic report, each of the area ESI reports includes a summary of the provisional offender accommodation findings for the area. The summary for Dyfed-Powys is given below.

Quality ratings

Quality of Offender Accommodation Management: Of the six Management criteria (A1-A5 and D2), in Dyfed Powys one was well met, one was satisfactorily met and four were partly met.

The other criteria were scored by analysing the offender accommodation work undertaken by the area in the 20 cases inspected. The scores for the individual questions were weighted and aggregated to produce the following three quality ratings.

<i>Quality of Offender Accommodation Assessment</i>	75%
<i>Quality of Offender Accommodation Interventions</i>	81%
<i>Quality of Offender Accommodation Initial Outcomes</i>	65%

Overall assessment

The Dyfed-Powys area of the National Probation Service for England and Wales faced considerable challenges in respect of responding to offender accommodation issues. It covered a vast geographical area and many offenders were from relatively sparsely populated locations. The area did not have any approved premises within its boundaries and it relied heavily on the Supporting People framework, led by the WAG, to secure access to relevant resources. The Dyfed-Powys Probation Area related to four local authorities and through these arrangements, linked to partnerships with a number of voluntary sector organisations, much of the work in respect of offender accommodation issues was progressed.

At the time of the inspection the area was in the position of accessing a broadly similar range of accommodation services for offenders as had existed during the Probation Accommodation Grants Scheme. Many of these services had remained on stream on a legacy basis, pending the reshaping of service provision following an accommodation needs mapping exercise across Wales. The Dyfed-

Powys area was seen as having made an important contribution to identifying and commissioning future resource provision. Offenders under the supervision of the area should benefit in due course from these developments.

We found that the area, on the whole, responded well to dealing with some aspects of offender accommodation needs. Accommodation ‘crises’, i.e. homelessness issues, were normally addressed promptly and the immediate issues addressed. However, many short-term arrangements became prolonged, as staff struggled to find suitable ‘move on’ accommodation for offenders. In the sample considered in the inspection, we noted a strong co-relation between offenders with recurring homelessness concerns and linked alcohol and/or drugs dependency issues. Many examples were seen of these issues also being addressed by staff. Nevertheless, the general position remained something of a ‘revolving door’ situation, with alcohol and/or drugs relapse issues being linked to periods of homelessness.

Recommendations

The Probation Board should ensure that the area:

- *routinely reviews the practice of staff delivering offender accommodation services and works to achieve appropriate consistency in practice across the area*
- *implements a development programme for all relevant staff working with offenders who have accommodation needs, which embraces the area's accommodation strategy, area practice guidelines and future national initiatives on accommodation issues*
- *produces supervision plans that contain SMART objectives and fully integrate accommodation intervention issues with work on other aspects of risk management or criminogenic factors*
- *continues to work with the WAG, partner agencies and the four local authorities to identify and make available the accommodation resources necessary for the effective supervision of offenders.*

SECTION A QUALITY OF OFFENDER ACCOMMODATION MANAGEMENT

A1: Leadership and planning:	Assessment
<p><i>There is an area strategy for working with offenders with accommodation needs. Effective management structures and processes exist for delivering the offender accommodation strategy and managers are held accountable for its effective operation.</i></p>	<p>PARTLY MET</p>

Strengths:

- Offender accommodation issues featured in the area business plan and there was in place a series of Supporting People strategies, each agreed with the relevant local authority and due for publication in October 2004. Similarly, agreements were due to be reached with the local authorities on local homelessness strategies.
- The Dyfed-Powys area was part of a network of relevant strategic and project groups in operation within Wales. These included: the All-Wales Probation/Prison Supporting People Group and involvement in several WAG offender accommodation project groups.
- The area had developed its accommodation plans with linkage to the local MAPPA.
- An employment and housing unit manager post was dedicated to addressing employment and accommodation issues across the area. This post had been in place for some time and had been used to create and develop a number of strategic relationships. The postholder made contributions to the priorities set out in the area business plan.
- Part funding was provided by the area for a Prisons and Probation secondment to the WAG. This post had a remit of assisting the WAG to take forward offender accommodation issues arising from the Supporting People agenda. The Dyfed-Powys area was seen as having played a full part in these developments and had influenced key decisions on the future development of accommodation services in its area and across Wales.
- Management information and reporting systems had been developed and this supported routine reporting on issues such as the offender accommodation needs profile and offender progress on accommodation issues during the period of supervision.
- Year-on-year improvements, over the past three years, of performance in respect of SPM5 targets had been achieved by the area.
- Board reporting on offender accommodation issues was through the performance and resources committee.

Area for improvement:

- From interviews with case managers, it was apparent that all not staff were aware of the approach to offender accommodation issues in place in the area. Therefore, it did not appear that these plans had become embedded within teams.

A2: Resource allocation:	Assessment
<i>Effective resource allocation for offenders with accommodation needs is demonstrated.</i>	WELL MET

Strengths:

- ❑ A specialist employment and housing unit manager was in post and the area part-funded a specialist post seconded to the WAG.
- ❑ Some 17.6% of the area's partnership funding was spent on offender accommodation issues.
- ❑ An accommodation handbook, outlining local accommodation resources, was readily available in teams across the area.

A3: Management and supervision of staff:	Assessment
<i>The area's human resources policies, strategies and personnel management practice ensures the effective delivery of offender accommodation and services.</i>	PARTLY MET

Strengths:

- ❑ The employment and housing unit manager was used as a source of consultation, information and advice for operational and management teams across the area.
- ❑ Use had been made of the experience of several new members of staff (TPOs) who had previously worked in housing service organisations.
- ❑ Housing services available in the area featured as part of a display at the 2003 Area Conference.

Areas for improvement:

- ❑ Although relevant strategies were in place, priority had not been given to staff familiarisation with these plans and many staff were unaware of issues beyond local day-to-day practice issues.
- ❑ There was evidence that many case managers approached offender accommodation practice issues primarily on the basis of local practice culture and personal experience. Little training for the task was available and the accommodation handbook did not contain sufficient practice guidelines.
- ❑ The inspection did not find any examples of staff practice issues being developed through line management arrangements. Consequently we found many variations, within and between teams, in the levels of staff knowledge and skills and consequent approaches to the task of addressing offender accommodation issues.

A4: Partnership/contracting out:	Assessment
<i>Area partnership management ensures effective delivery of the offender accommodation strategy and shows effective collaboration with other agencies.</i>	SATISFACTORILY MET

Strengths:

- ❑ Dyfed-Powys Probation Area had many contracts arranged with offender accommodation providers. Following the implementation of Supporting People arrangements, protocols were being developed with local authority housing departments and registered social landlords.

- The lead ACPO and employment and housing unit manager had effective links with a number of relevant groups, both within and outside of the area.
- Relevant information was being exchanged at the Dyfed-Powys Offender Housing and Support Strategy Forum and the Dyfed-Powys Offender Accommodation Providers Forum, with good representation by partner organisations.
- Representatives from partner organisations reported good and purposeful relationships with the area. Several examples of joint problem-solving activity were noted.

Areas for improvement:

- At the time of the inspection, feedback suggested that the Dyfed-Powys area (along with other probation areas in Wales) had not had a sufficient profile in the prison-led project to deliver housing services in all Welsh prisons.
- Several partner agencies felt that joint working would improve even further if they had greater direct access to operational teams.

A5: Effective communication with sentencers:	Assessment
<i>Area communication with sentencers and justices' clerks supports delivery of the offender accommodation strategy.</i>	PARTLY MET

Area for improvement:

- The area did not have a well-developed approach to communicating with sentencers on offender accommodation issues. Sentencer representatives on the Board acted as a link to local courts. Local probation/sentencers' meetings would address accommodation issues on an ad hoc basis.

SECTION B QUALITY OF OFFENDER ACCOMMODATION ASSESSMENT

B1: Assessment of accommodation needs:	Score
<i>Appropriate accommodation is satisfactorily identified and offenders are assessed using approved tools, drawing on relevant assessments, available victim information, previous convictions and knowledge of risk factors.</i>	73%

Strengths:

- A majority of offenders with an identified accommodation need had received an adequate assessment of their needs.
- All relevant cases evidenced referrals to specialist support services to enhance the quality assessment of accommodation issues.
- Most assessments showed consideration of race and other diversity issues.

Areas for improvement:

- In the majority of cases the accommodation needs assessment was undertaken without reference to the area's strategy for accommodation issues. From discussions with case managers it was clear that there was limited knowledge among front line staff of the area's established approach to addressing offender accommodation issues.

- Offender accommodation needs assessments were largely undertaken on the basis of individual staff or local team practices in respect of these activities. There was an absence of clear practice guidelines for these tasks.

B2: Assessment of risk of harm:	Score
<i>In those cases where an accommodation need has been identified, risk of harm is satisfactorily identified and assessed using approved tools and drawing on relevant assessments, available victim information, previous convictions and knowledge of accommodation-related risk factors.</i>	73%

Strengths:

- The majority of cases showed an appropriate risk of harm assessment, with the content of the assessment matching the risk factors in the case.
- Planned risk management interventions were satisfactory in 95% of cases in the sample.
- All relevant cases had evidence of management oversight of risk management issues.

Area for improvement:

- In 11 of 19 cases risk issues had not been reviewed in line with national standards.

B3: Assessment of likelihood of reoffending:	Score
<i>Criminogenic factors and likelihood of reoffending are identified and assessed using approved tools, drawing on all available information and previous assessments.</i>	98%

Strengths:

- All but one of the cases in the sample identified the likelihood of reoffending using an approved tool and had an identified risk of reoffending score.
- The content of the assessment was appropriate to the needs of the case in 95% of cases.
- In 13 of 18 cases the assessment identified the extent to which accommodation issues were linked to offending.

B4: Case management:	Score
<i>Supervision plans/CPO assessments incorporate appropriate accommodation services designed to minimise assessed risk, address associated criminogenic needs and take account of relevant victim/diversity issues.</i>	63%

Strengths:

- The content of 75% of supervision plans was appropriate to the needs of the case.
- 70% of cases had explicit accommodation interventions as a feature of the supervision plan.
- Planned supervision interventions were found to be appropriate to the needs of the case in 85% of supervision plans.

Areas for improvement:

- 30% of supervision plans did not meet the requirements of national standards.
- Only 50% of supervision plans were found to be sensitive to race and other diversity issues.
- Liaison responsibilities were clearly defined in only 47% of cases.

- ▣ Objectives were not set in a SMART format in 75% of supervision plans.
- ▣ Evidence of offender understanding of the content of supervision plans was available in only 42% of cases.
- ▣ There was insufficient evidence of risk management plans being satisfactorily incorporated into supervision plans in two of the three relevant cases.

B5: Documentation:	Score
<i>All relevant documentation is available, satisfactorily completed and appropriately stored.</i>	63%

Strengths:

- ▣ Files were well organised and case recording was generally satisfactory.
- ▣ There was an adequate record of plans for addressing offender accommodation issues in 81% of the sample.

Area for improvement:

- ▣ Quarterly reviews of supervision plans had an adequate update of accommodation issues in only seven of the 15 relevant cases.

SECTION C QUALITY OF OFFENDER ACCOMMODATION INTERVENTIONS

C1: Delivering appropriate supervision:	Score
<i>Accommodation services are delivered and coordinated to ensure supervision and risk reduction objectives are met.</i>	67%

Strengths:

- ▣ Appropriate interventions were carried out in 89% of cases.
- ▣ Case managers helped to prepare and motivate the offenders for supervision in 94% of cases.
- ▣ In 83% (five of six) of relevant cases appropriate action was taken to implement additional requirements.
- ▣ All cases in the sample had evidence that case managers liaised with others providing interventions to the offenders.
- ▣ Use was made of specialist resources in 97% of relevant cases.
- ▣ 95% of cases had evidence of case managers reinforcing the work done with offenders by others involved in the case.
- ▣ Work and resources were directed at community reintegration issues in all cases in the sample.

Areas for improvement:

- ▣ Contact levels with offenders were found to be outside national standards requirements in 50% of cases. The majority of these failures related to a lack of home visits to offenders.
- ▣ There was a review of the supervision plan, in line with content and timing of national standards, in only 50% of cases. Reviews rarely contained SMART objectives.

- Interventions, which challenged offenders to accept responsibly for their offending, could only be evidenced in 42% of cases.
- Victim issues did not feature in the majority of cases and there was generally an absence of work being done to raise offender awareness of the impact of the offences on identifiable victims.

C2: Meeting diversity needs:	Score
<i>Accommodation-related service delivery meets diversity needs and appropriate support arrangements are in place.</i>	82%

Strength:

- In 90% of the sample, offender accommodation interventions had taken into account race equality and wider diversity issues, in that accommodation placements were judged to be appropriate to the diversity needs of the offenders.

Area for improvement:

- Only 62% of cases had evidence that issues of literacy and dyslexia had been adequately addressed.

C3: Management of risk of harm:	Score
<i>Risk of harm is actively managed in collaboration with others.</i>	41%

Strengths:

- The intensity of the supervision arrangements was generally found to be consistent with the risk/needs assessment for the case.
- 80% of accommodation interventions were found to be consistent with the needs identified in the case.
- Probation involvement in MAPPA and child protection arrangements were satisfactory.
- Management oversight of cases was found to be consistent with area policy in all four relevant cases.

Area for improvement:

- Two of four relevant cases were found to have an insufficient record of inter-agency risk management plans.

SECTION D QUALITY OF OFFENDER ACCOMMODATION INITIAL OUTCOMES

D1: Interventions are delivered with the desired outcomes:	Score
<i>Accommodation-related objectives are achieved and risk of harm/reoffending is demonstrably reduced.</i>	76%

Strengths:

- OASys reassessments showed an improvement in offender risk of reoffending scores in 40% of cases.

- Case managers identified a number of criminogenic factors associated with offenders subject to supervision. The three issues were: deficits in thinking skills, relationships issues and alcohol issues. Discussions with case managers suggested that the majority of offenders had made progress on all three areas of difficulty.
- Eight of ten relevant cases showed positive progress in respect of accommodation needs issues.
- In 75% of cases there was evidence of an improvement in community ties and social circumstances, and 60% of cases showed that learning skills had been applied by offenders in everyday situations.
- 75% of cases saw case managers paying attention to long-term accommodation and community reintegration issues. In addition, the majority of cases showed that appropriate links had been made with the community and family resources, to help sustain the offender in the community.

Areas for improvement:

- In nine of the 20 cases in the sample (45%) the offender had been reconvicted of an offence during the period of supervision.
- There was limited evidence of a positive change in the offender's attitudes, beliefs and behaviour in relation to offending and limited increased awareness of the effect of the offence on victim(s). Only 30% of cases had evidence to suggest progress had been made on these issues.
- Approximately half of the cases had evidence that offenders had not complied with their orders fully and had not reported in line with national standards requirements.

D2: Outcomes of interventions are assessed and reviewed using available data:	Assessment
<i>Outcome data are used to evaluate area effectiveness and inform future policy and practice.</i>	PARTLY MET

Strength:

- There was evidence that some consideration of the effectiveness of offender accommodation related interventions had taken place. An example was given of the area's understanding that offenders with recurring accommodation difficulties were seven times more likely to reoffend than those in settled accommodation. This perspective helped to underpin the area's prioritisation of offender accommodation issues.

Area for improvement:

- The data available to the area on this topic were primarily focused on performance issues. The information processes could be developed to ensure that the area had the ability to evaluate the effectiveness of its work on addressing offender accommodation issues, and used that information to inform future developments in this subject.

THE ROLE OF HMI PROBATION

HMI Probation is an independent Inspectorate, originally established in 1936 and given statutory authority in the Criminal Justice Act 1991. The Criminal Justice and Court Services Act 2000 renamed HMI Probation 'Her Majesty's Inspectorate of the National Probation Service for England and Wales.' HMI Probation is funded by the Home Office and reports directly to the Home Secretary.

Home Office Aims

HMI Probation contributes primarily to the achievement of Home Office aims to:

- ensure the effective delivery of justice, avoiding unnecessary delay, through efficient investigation, detection, prosecution and court procedures. To minimise the threat to and intimidation of witnesses and to engage with and support victims
- deliver effective custodial and community sentences to reduce reoffending and protect the public, through the prison and probation services, in partnership with the Youth Justice Board.

Role

- Report to the Home Secretary on the extent to which the National Probation Service for England and Wales is fulfilling its statutory duties, contributing to the achievement of Home Office and Criminal Justice Aims and meeting performance and efficiency targets as required.
- Demonstrate that inspections contribute to improved performance in the National Probation Service.
- Contribute to sound policy and effective service delivery by providing advice and disseminating good practice, based on inspection findings, to Ministers, Home Office and National Probation Service staff and Probation Boards/areas.
- Promote actively race equality and wider diversity issues in the National Probation Service.
- Promote the overall effectiveness of the criminal justice system.

Code of Practice

HMI Probation aims to achieve its purpose by:

- undertaking its work with integrity in a professional, impartial and courteous manner
- consulting stakeholders in planning and running inspections and regarding reports
- forming independent inspection judgements based on evidence
- the timely reporting and publishing of inspection findings and recommendations for improvement
- promoting race equality and wider diversity issues in all aspects of its work, including within its own employment practices and organisational processes
- developing joint approaches with other Inspectorate and Audit bodies to ensure a coordinated approach to the criminal justice system
- working to minimise the burden of inspection on the National Probation Service.

The Inspectorate is a public body. Anyone who wishes to comment on an inspection, a report or any other matter falling within its remit should write to:

*HM Chief Inspector of Probation
2nd Floor, Ashley House
2 Monck Street
London SW1P 2BQ*