



OFFENDER  
MANAGEMENT  
INSPECTION  
INSPECTION

A report on Offender Management in  
Cumbria

An inspection led by  
HM Inspectorate of Probation

November 2006

## **FOREWORD**

The results in this report bear testimony to the steady progress made by Cumbria Probation Area over the last two years in particular. The findings of our Effective Supervision Inspection in 2004 had been disappointing, showing serious shortcomings especially in Risk of Harm work. Whilst our follow-up inspection in 2005 showed some improvement, further work was needed. Cumbria has not stinted in that work, eschewing the 'quick fix' for a patient and persistent 'long haul' approach. A determined performance culture was being nurtured which attended not only to the achievement of targets but to the quality agenda.

Along with a number of other aspects of service delivery, Risk of Harm work in particular had seen a significant improvement following a great deal of hard work by managers and staff alike. Board and managers together had given strong leadership and the area was to be congratulated for rising to the challenge of repeat inspection scrutiny by engaging well with the Offender Management Inspection and evidencing progress clearly. This mature and open approach to learning opportunities was to be applauded.

No issues of major concern were noted in this inspection – we have made some management and service delivery improvement recommendations, to consolidate and further improve the work of the organisation. These included making sentence planning more effective, attending to victim issues and focusing more consistently on outcomes.

Cumbria described to us its use of the concepts of 'celebration and ambition' to drive the organisation forward. There is much to celebrate in this report and the area's ambition to improve further, will, I am sure, guard against complacency.

**ANDREW BRIDGES**

HM Chief Inspector of Probation

## ACKNOWLEDGEMENTS

We would like to express our thanks to the Cumbria 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 offender 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 offender manager interviews. Their participation and commitment was greatly appreciated.

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## LIST OF ABBREVIATIONS/ ACRONYMS

ACO	Assistant chief officer
ASRO	Addressing Substance Related Offending
CO	Chief officer
CDRP	Crime and Disorder Reduction Partnership
CRAMS	Case Record and Management System
CROP	Cumbria Reducing Offending Partnership
DAAT	Drug and alcohol action team
DIDs	Drink Impaired Drivers
DMT	Divisional management team
DRR	Drug rehabilitation requirement
DTTO	Drug Treatment and Testing Order
ESI	Effective Supervision Inspection
FDR	Fast delivery report
HMI Prisons	Her Majesty's Inspectorate of Prisons
HMI Probation	Her Majesty's Inspectorate of Probation
HMP	Her Majesty's Prison
HMYOI	Her Majesty's Young Offender Institution
HR	Human resources
ISP	Initial sentence plan
LCJB	Local Criminal Justice Board
MAPPA	Multi-Agency Public Protection Arrangements
NAPO	National Association of Probation Officers
NOMIS	National Offender Management Information System
NOMS	National Offender Management Service
NPD	National Probation Directorate
NPS	National Probation Service
NSPCC	National Society of Prevention for Cruelty to Children
OASys/eOASys	Offender Assessment System/electronic OASys
OCA	Observation, classification and allocation
OGRS2	Offender Group Reconviction Score2
OMI	Offender Management Inspection
OMU	Offender Management Unit
PC	Probation Circular
POA	Prison Officers Association
PO	Probation officer
PPO	Prolific priority offender

PSO	Probation service officer
PSR	Pre-sentence report
REM	Race and ethnic monitoring
ROM	Regional offender manager
RoH	Risk of Harm
SDR	Standard delivery report
SFO	Serious further offence
SLA	Service level agreement
SMB	Strategic Management Board
SMT	Senior management team
SOTP	Sex Offender Treatment Programme
SPO	Senior probation officer
UNISON	Trade union with members working for public services
YOI	Young Offender Institution
YOT	Youth Offending Team

## SUMMARY

### Assessment and Sentence Planning

Work in respect of preparing for sentence was strong in Cumbria and reports contributed positively to the sentencing process. Offender assessments showed many strengths. This included assessments of the likelihood of reoffending, of offender criminogenic needs and of the motivation, diversity and engagement issues that had to be addressed. Offender tiering and allocation arrangements were well-developed. Efficient and effective processes for commencing work with offenders were in evidence. The content of sentence plans required attention, as many were of insufficient quality.

### Implementation of Interventions

In general, offenders were well prepared for the work they would undertake under supervision. Good staff communication arrangements (both internal and external) were in place and communication between staff and offenders was also good. The quality of offender management support for offenders during intervention varied across the area. We found that the planned resources and contact levels with offenders were consistent with the aim of resources following risk. The area offered offender appointments in line with national standards and when offenders failed to meet their reporting requirements this was followed-up quickly. The profile of work in relation to victim issues needed to be increased. Both constructive and restrictive interventions showed strengths. The offender diversity needs identified at the assessment stage were generally acted upon throughout the period of supervision.

### Achievement and Monitoring of Outcomes

Most offenders complied with the requirements of supervision. However, 29% of the sample had been reconvicted during the period of supervision and this needed further exploration by the area and its partners. Achievement of the sentencing objectives: **punish, help** and **control** was strong. Achieving positive **change** with offenders was less strong but showed promise. Structured sentence planning throughout the duration of supervision was an area for improvement for Cumbria. The area's approach to the allocation of resources to work with offenders showed prioritisation of resources according to the risk profile of those under supervision. Maintaining consistency of staff involved with individual offenders helped to maintain the focus of the work undertaken. Many offenders had made positive progress as a result of supervision but the area did not systematically capture and make use of this information to improve and shape practice.

### Leadership and Strategic Management

The area had a guiding conceptual framework of 'celebration and ambition': celebration of the progress made to date and ambition to improve the work of the organisation further. The Cumbria Probation Board was actively and effectively engaged with the senior management team in addressing planning and performance issues. They had overseen a two-year period in which both the performance of the area against national targets and the quality of the services provided had steadily improved. The area's Excellence Plan overlaid the annual business planning process and helped to bring about a steady increase in performance on a year on year basis.

Good communication arrangements supported the establishment and dissemination of plans within the area and assisted staff in the local offices to be clear about their contribution to the work of the organisation. Regional collaboration was a priority in the North-West region and the Cumbria area played a full part in this. Strategic partners were very complimentary about working with the area, which was seen as making an effective contribution to the broader criminal justice and community safety agendas in the region and in the county.

Substantial progress in implementing the offender management model had been made. Internal structures and staff deployment arrangements had been adapted to meet this challenge. Divisional management structures came under pressure in this new environment and the area was considering its response to this. Staff training and development processes were well established and aligned to the business plan. Staff reported good communication and support arrangements with managers. However, many staff had formal supervision with their line manager infrequently. Quality assurance processes at the local level were under development and this was a timely initiative.

Cumbria was in the process of reviewing its arrangements for meeting a balanced budget and deploying resources within the organisation. The geography of the county posed particular problems in respect of getting staff resources to areas of high work and of facilitating offender access to services.

The area did not have a well-developed approach to capturing and using information in relation to the outcomes achieved from its work with offenders.

### **Risk of Harm**

74% of the Risk of Harm work undertaken was deemed to be satisfactory. This showed further progress by the area in addressing this aspect of practice. The Effective Supervision Inspection in November 2004 found this aspect of work gave rise to significant concern. Only 40% of the work met the inspection standards at that time and there was a follow-up inspection in autumn 2005. This found that plans had been put in place to address Risk of Harm practice issues and showed signs of having a positive impact, with 50% of the work meeting our quality standards. Whilst the measures are slightly different on OMI, the improvement to over 70% of the work meeting the quality standards, and very few cases being seen as poor, showed the ability of the area to bring about improvements in the quality of the services offered and to take staff with them on that journey.

Multi-Agency Public Protection Arrangements were in place across the area and these worked well. There were positive partnership relationships in place to support this work and the area contributed to the public protection work of other organisations through appropriate protocols and information exchange agreements.

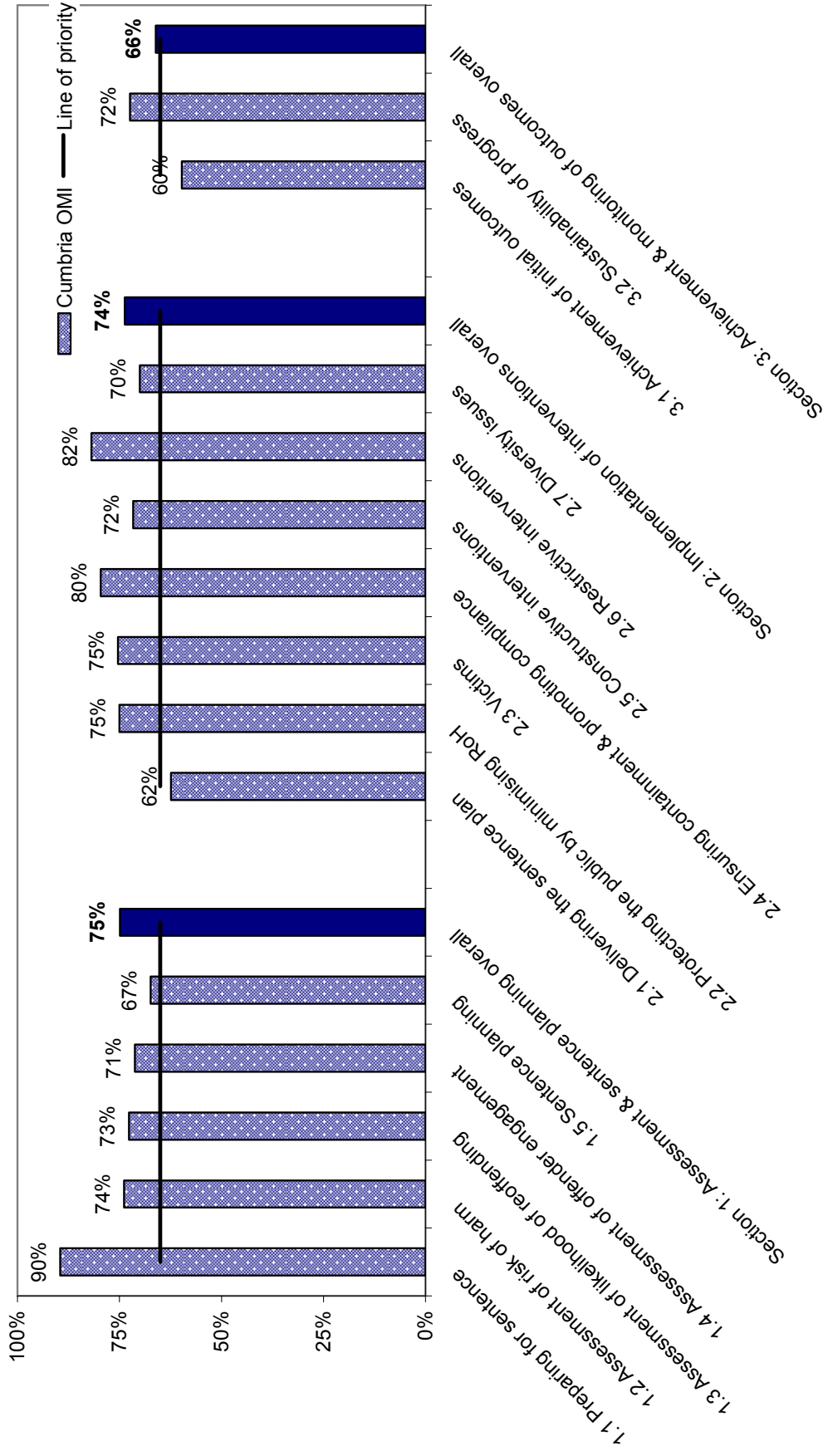
## **SUMMARY OF SCORES**

Outlined below in Chart 1 are percentage scores for each OMI Criterion in sections 1-3. A line of priority for improvement is also indicated. The scores which fall below this line (which is not a line of 'sufficiency') indicate those criteria which form a primary focus for improvement. Table 2 indicates a score drawn from a range of indicators in the *Assessment & Sentence Planning* and *Implementation of Interventions* sections about Risk of Harm work.

This score is significant in determining whether a further focused inspection will be carried out. Full details of our *Scoring Approach* are contained in Appendix 3.

Chart 1: Scoring of sections 1-3:

Omi Scoring - Cumbria (July 2006)



**Table 1: Scoring of section 4:**

4.1 General Criterion: LEADERSHIP AND PLANNING	<b>Well Met</b>
4.2 General Criterion: PERFORMANCE AGAINST NATIONAL AND REGIONAL TARGETS	<b>Well Met</b>
4.3 General Criterion: RESOURCE DEPLOYMENT	<b>Satisfactorily Met</b>
4.4 General Criterion: WORKFORCE PLANNING AND DEVELOPMENT	<b>Satisfactorily Met</b>
4.5 General Criterion: REVIEW AND EVALUATION	<b>Partly Met</b>
4.6 General Criterion: COMMISSIONING OF SERVICES	<b>Satisfactorily Met</b>

**Table 2: Risk of Harm Thread**

Score for Risk of Harm thread	<b>76%</b>
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## RECOMMENDATIONS FOR IMPROVEMENT

Improvements are necessary as follows:

1. the management structure and communications framework should be revised (as planned) to ensure that the divisional management arrangements are fit for purpose in the context of current and forecast business priorities
2. service delivery quality assurance processes are further developed and implemented in a consistent way across the area
3. area policy in respect of staff supervision issues is reviewed, communicated to all staff and implemented consistently across the area in order that regular high quality supervision is delivered to all staff
4. the area develops its information systems to ensure that data on the outcomes from its work with offenders are systematically captured and used to enhance practice and the effectiveness of the organisation overall
5. sentence planning becomes a renewed central focus and driver within the offender management model and the quality and use of sentence plans, and their reviews, is improved
6. victim issues are comprehensively integrated into all RoH assessments.

## NEXT STEPS

An improvement plan addressing the recommendations above is needed four weeks after publication.

Further focused inspections will be carried out approximately 12 months after the original OMI when HMI Probation has a serious concern about an area's RoH work.

There will not be a further inspection in Cumbria.

## SHARING GOOD PRACTICE

Below are examples of good practice we found in Cumbria

**All reasonable actions were taken to protect the public**

**OMI Criterion: 2.2**

**Protecting the public by minimising RoH**

Mr D suffered from a severe mental illness and was being released from prison after a seven year sentence for a serious violent offence. The Cumbria offender manager had short notice of the impending release of Mr D to the area. She prioritised RoH issues. On release, Mr D failed to report and was immediately recalled as planned. The recall was well handled and had a positive impact. The work done by the offender manager meant that when Mr D was subsequently re-released from prison, he was quickly committed to hospital under a section of the Mental Health Act in order that he could obtain appropriate services.

**Encouraging engagement in the sentence process**

**OMI Criterion: 2.4**

**Ensuring containment and promoting compliance**

Mr T had a substantial criminal history with several periods in custody. The offender manager initiated recall during this licence as Mr T failed to attend appointments as directed. She was concerned that he had relapsed into drugs misuse. Prior to recall, the offender manager requested that Mr T's parents participate in the supervision process. Mr T lived with his parents and they were keen to contribute to a plan for addressing his offending. During the recall period the offender manager continued work with Mr T. This support was beneficial and he subsequently completed the Prison ASRO programme and was actively involved with the prison drugs workers regarding residential rehabilitation on release.

**Interventions are delivered to meet the requirements of the sentence; help and change**

**OMI Criterion: 2.5**

**Constructive interventions**

Ms A had a long-standing drugs dependency history. Her most recent community sentence saw her placed initially as a Tier 2 case. A comprehensive assessment at the commencement of the sentence identified a range of critical concerns relating to her risk of reoffending. The PSO offender manager obtained agreement from his line manager to manage the work as a Tier 3 case and the rationale for this decision was clearly recorded. The subsequent interventions focused on supporting Ms A in drugs relapse prevention work and in securing appropriate accommodation. Ms A still faced considerable challenges in achieving the changes she wished to make in her life. The work done in this sentence brought a structure to those efforts and made a successful outcome more likely.

**Full and proper attention is paid to diversity issues**

Ms K had one conviction and this was for a serious burglary. The offence was linked to her drugs misuse and was the culmination of a traumatic period in her family. Her behaviour ran the risk of contributing to the breakdown of her family as well as increasing

**OMI Criterion: 2.7**

**Diversity issues**

contact with the criminal justice system. Her community sentence had the purposes of **punish, help** and **change**. These were delivered through a package of interventions and completion of unpaid work. Ms K had childcare responsibilities and she lived in an area of the county that was not well served by transport services. Securing the motivation of Ms K to complete this work was crucial to the success of this sentence. The offender manager put considerable effort into ensuring that the arrangements for Ms K's reporting to interventions and unpaid work sessions were viable. Meeting these commitments was a considerable challenge for Ms K. The offender manager helped her problem-solve the practical difficulties and helped to maintain her motivation. This was possible because the offender manager had taken time to understand the practical and emotional issues impacting on Ms K and to set these in a context of diversity needs for the offender. Ms K had made substantial progress. Her drugs misuse and family relationship difficulties had shown clear signs of improvement.

**Active leadership in the implementation of national policies via local policies and procedures – an Area Excellence Plan**

**OMI Criterion: 4.1**

**Leadership and planning**

Since 2004 the Cumbria Probation Area has adopted an additional tier of local planning. The Excellence Plan runs on a two-year cycle and overlays the annual business plan arrangements. The plan takes a broader perspective on external and internal developments and attempts to set the activity in the current year in a longer-term framework of organisational development. The desired outcome from this work was to assist the organisation to produce steady, year on year, improvements in performance or quality of service delivery. Also, to position the organisation favourably to respond to challenges in a rapidly evolving criminal justice business environment.

**Active leadership in the implementation of national policies via pro-active planning with other key agencies: an LCJB Process Map**

**OMI Criterion: 4.1**

**Leadership and planning**

The Cumbria Criminal Justice Board, at the suggestion of the Cumbria Probation Area established an offender manager sub-group to widen the focus of Board work from pre-conviction processes to 'whole system' arrangements for managing offenders. The sub-group had commissioned work, using the NOMS framework, to develop a process map for the end to end arrangements of offender management. The map located the work in the context of the external environment and encompassed issues such as building public confidence and addressing media concerns.

The Board planned to use the map as a planning tool to identify whole system implications of new developments and to address inter-agency approaches to performance management. The map had enjoyed strong multi-agency support and its initial practical use had been in respect of identifying the implications of conditional cautioning and the speedy summary justice pilot.

## **NOMS Offender Management Model - North-West Pathfinder**

Since November 2004 the North-West had been a NOMS Pathfinder region with the purpose of putting into operation and testing the national offender management model in both the custodial and community settings. In its early stages the pathfinder had focused on selected offenders in two YOIs - Thorn Cross and Lancaster Farms, and those serving community sentences in Bolton and Stockport in Greater Manchester, the Wirral in Merseyside and in West Cumbria. Later stages of the pathfinder included offenders in Hindley Prison and high RoH offenders and PPOs in both Liverpool and Risley Prisons. A female institution, Styal, had also been included since early this year.

In operating the model the pathfinder had had an open agenda on the type of staff who would become offender supervisors and on the profile of OMUs. The pathfinder had been clear, however, about the role that offender supervisors should fulfil. It had been left to Governors as to how OMUs were set-up and whether seconded probation staff were included or whether they were put into delivering interventions. It was apparent that seconded probation staff were often being used in OMUs for their RoH knowledge and assessment skills, though some OMUs consisted entirely of prison staff.

In testing the model the pathfinder had conducted action research and a process evaluation, with plans to do an outcome evaluation next year when the pathfinder is scheduled to finish. Problems encountered and lessons learned so far had included:

population management - this had been found to be the single biggest element that can undermine the model. There needed to be a clear allocation matrix for OCA and closer liaison with offender management teams;

indeterminate sentence prisoners - these needed to be seen as a distinct group as they could be subject to a discontinuity in their offender management. As with other longer-term prisoners, indeterminate sentence prisoners seemed to be far more likely to be moved around the prison estate than those serving shorter sentences;

OASys - the quality of the assessment was critical, with poor initial assessments affecting subsequent assessments and sentence planning. There also remained issues around who was responsible for doing the assessment and offender manager ownership of the assessments;

eOASys connectivity - while there were challenges with the useability of eOASys, connectivity had been found to improve in exchanging information;

cultural changes - offender managers were being required to take on a new role with authority over cases that may be in custody as well as those in the community. It was recognised that new skills were required for this role and training provision was being considered.

There were also clear problems with implementing offender management in the private prison estate. They did not, as yet, have access to OASys in its full form and there were problems with what they were contracted to do, with 'notices of change' having to be negotiated.

## **OFFENDER MANAGEMENT IN CUMBRIA**

The area had made substantial progress in the implementation of the offender management model. Cumbria was a pathfinder for the YOI and the community work streams of the offender management model. The west division were instrumental in finding solutions to many issues associated with these developments. This included tiering, allocation and a team based approach to the work. Following the developmental work, the model was applied to the rest of the area. Staff were divided into offender management and interventions functions. The structure was determined by the SMT and delivered by the divisional management arrangements. This process was completed in August 2005.

Subsequently, staff in the offender management function had been grouped into OMUs and work had focused on developing and briefing staff in this context. The area had an offender management policy and set of practice instructions. These outlined the processes for the allocation of cases within the tiering structure. An SLA was drawn-up to help shape the interface issues between offender management and interventions. All cases in the area were tiered in September 2005 and this became fully bedded into the area's processes. The tiering arrangements addressed the issues of staff continuity. The practice guidelines also included detailed outlines of staff roles within the model.

Progress on staff job descriptions was linked to national developments on that agenda. In practice this had not caused undue difficulties in the area but both staff representatives and the area were keen for these issues to be addressed. At the time of the inspection the area had full offender management coverage of all cases.

The area had developed links with HMP Haverigg regarding the offender management model in prison and this was being addressed at the local and regional levels. OASys connectivity had been problematic and hindered the ability of the area to meet the targets for this work.

NOMIS was being progressed through joint work with the Lancashire Probation Area. A joint area project group linked to the North-West regional rollout of NOMIS.

## **OFFENDER MANAGEMENT IN HMYOI Lancaster Farms**

We visited HMYOI Lancaster Farms to hear of progress with the NOMS offender management model. While the custodial establishment we visit would normally be the main one that the probation area relates to, we do consider it important that both HMYOIs and female prisons are included in our inspections. It was noted, therefore, that while the courts direct all sentenced 18-20 year olds in Cumbria to this YOI, at the time of the inspection only 3% of the institution's population were from the Cumbria area.

Lancaster Farms had been part of the NOMS Pathfinder project for the last two years. The funding and staff approach meant that the establishment had made substantial progress in respect of the planned introduction of their OMU. The funding that the establishment had received for being part of this pilot had been well used and the foundation for further progress was evident.

The team consisted of a senior officer (manager of the OMU), four officers (supervisors), an executive officer (casework manager) and five administration officers (casework administrators). Also available to the team were a SPO, two probation officers and a PSO, all from the Lancashire Probation Area. It was encouraging to see that the staff had all been

interviewed to ensure they met the core competencies required to work in an OMU. All staff had job specifications and were clear about their own and each other's roles. The POA was involved in the desktop exercise to determine the workload of the unit and had no major concerns at this stage. Wing based residential staff appreciated working in partnership with the supervisors and the improved services offered to offenders. Training by the unit was given to 141 staff in the 'offender journey'. This was an interactive training session that gave staff an insight into how the OMU worked. Funding was available for further presentations and training.

On average young offenders were only spending 11 days in the establishment after conviction. Supervisors were carrying out initial interviews within 48 hours and casework files were being constructed in conjunction with the case administrators. Supervisors and wing staff were completing OASys. However the establishment had a backlog of assessments awaiting completion (approx 71).

The establishment had carried out a needs assessment in May 2006 and a large number of interventions were then made available to offenders. Young people on remand were having very little contact with the OMU, but there were plans to pilot a remand sentence plan in the near future. There were no specific interventions or assistance readily available to minority groups including foreign nationals. *Language line*, a telephone interpreter service was offered as assistance.

Interviewees expressed general concerns about some probation areas not seeming to be ready for the offender management model. Given the limited involvement of the Cumbria Probation Area in the work of Lancaster Farms, this issue was not focused on that organisation. Offender managers on occasions were not visiting the young person within two-weeks of reception. They gave examples of contacting offender managers who failed to return calls or seemed confused about their role. They also highlighted the concern that some probation staff were not trained in the use of the video link system, thus making this facility underused. Examples of good practice were also discussed, but it was not clear how these were fed back to probation areas.

Concerns were noted in respect of receiving young people with poor quality OASys documents or missing information. An example of this concerned a young person who was due for release and his MAPPA level had not been communicated to the establishment 48 hours prior to release. Offender supervisors were disappointed that they were not given the opportunity to contribute to the offender's plans after release. They felt they could offer a comprehensive insight into the offender's needs which could support post-release supervision.

Lancaster Farms had made great strides in its OMU and was poised to develop and expand the work further. Some of the issues they will address are: incorporation of OMU and OCA into the same group to ensure consistency in assessments and appropriate allocations; establishing a forum where practitioners have the opportunity to establish networks and discuss best practice; and developing information systems to report on successful outcomes from this work.

## SERVICE USERS' PERSPECTIVE

### Offenders

There were five focus groups undertaken with offenders in this inspection; two with unpaid work groups, two with accredited programme groups (SOTP and DIDs) and one at the approved premises in Carlisle. In total, 33 offenders were interviewed.

The comments from the unpaid work groups showed that they felt the punishment aspect of the sentence had been delivered and many pointed to the challenges they encountered in completing this work. The groups reported being treated fairly and with respect by the probation area but were critical of the time allocated to them on occasions when it was not possible for them to complete the unpaid work hours because of staffing difficulties within the area. An additional concern was raised in respect of offenders having to travel to a central rally point only to find themselves working near to their home and similarly, at the end of the day, being returned to the central point for dismissal. Many were not aware of the sentence planning arrangements and did not consider that the sentence would have an impact on the likelihood of reoffending.

The offenders on accredited programmes were happy with the level of contact they had with their offender managers whilst they were on the programme. They were complimentary about the programme delivery staff and about the content and relevance of the material covered on the programmes. Several said they found the programme challenging and the material covered made them less likely to reoffend as a result of the learning they had acquired on the programmes.

Offenders' resident at the approved premises said that their contact with offender managers was good and they were clear about the requirements of their sentence. The consensus among the group was that work undertaken with probation staff would assist them to avoid further offending. They were complimentary about the quality of work undertaken by offender managers and there was agreement that staff "*bent over backwards*" to be of assistance, whilst holding them to the requirements of the sentence. Several residents voiced a note of concern in that the focus of work undertaken with them was geared towards helping them to settle in the local area, whilst they wished to settle elsewhere.

Out of 100 questionnaires sent to offenders in the inspection sample, 11 were returned. Most comments on most of the questions were positive. These included the comments on the impact of the work done whilst subject to supervision. 80% of responses showed that the offenders considered they were less likely to reoffend following the period of supervision and they had increased awareness of victim issues. 82% felt they had a good working relationship with their offender manager and that the requirements of the sentence had been fully explained to them. However, 64% of the responses showed that offenders were not clear about the plans for the work to be undertaken during supervision and they did not feel that the coordination of the work between various probation staff members was clear.

### Victims

Three people attended the focus group with victims. Comments from this event were generally positive. They commented on the way in which the contact with the probation

service staff had helped them to feel that their concerns were being listened to. They had been given information on the nature of the service available to them from the area and had opportunities to contribute to licence release conditions. However, there was a sense that the probation service could 'only do so much' and they were not sure that the criminal justice system would effectively protect them from further offending on the part of the perpetrators.

Of the 12 questionnaires sent out to victims only two were completed and returned. These were both positive about the service they had received in many respects. The initial contact by the probation area was handled well and the subsequent meeting with the probation staff member enabled them to understand the nature of the service on offer and to contribute to the offender management process appropriately. Information on the offender's progress through the criminal justice system was made available to the victims and they said they felt their concerns had been heard. However, one respondent felt unclear about who to contact in the event of having concerns about their safety and did not get a satisfactory response to this matter.

### **Courts**

Twelve of the 30 questionnaires sent to sentencers were returned. Overall these revealed high levels of satisfaction with the services offered to the courts by the probation area. All the respondents were happy with the liaison arrangements between the courts and the probation area and all were satisfied with the quality of the FDRs prepared by the area and the skills of the staff working in the court setting. 93% were happy with the quality of SDRs. All the respondents felt the arrangements for progressing breach matters worked well or in part. Similarly, all felt they had, either fully or in part, sufficient information about the procedures and policies of the probation area. One-third of respondents felt there were insufficient staff in the local courts. The same number reported that they did not have sufficient knowledge about the services offered by the local approved premises.

# 1. ASSESSMENT AND SENTENCE PLANNING

## 1.1 General Criterion: PREPARING FOR SENTENCE

*Activity in the phase leading up to sentence is timely, purposeful and effective.*

90%

### Strengths:

- (a) In 70% of the relevant cases (43 out of 61) a PSR had been prepared for the court. 97% of these reports took into account the level of seriousness of the offence(s) and all but one led to a proposal for a community sentence. The courts followed 90% of the proposals.
- (b) All reports were completed using the nationally agreed format and prepared within the required timescale. 88% were found to be concise and 86% balanced, verified and factually accurate.
- (c) 91% of the reports contained a clear proposal for sentence.
- (d) Two reports were prepared on PPO cases and these met the quality standards relating to that work.
- (e) In 86% of cases where a risk of self-harm to the offender was identified (18 out of 21), this was appropriately addressed within the report.
- (f) Feedback from sentencers indicated high levels of satisfaction with the quality of reports prepared by the area. All 14 of the respondents to the questionnaire said they were happy with the quality of FDR's and 13 of the 14 respondents said they were happy with the quality of standard reports.

### Areas for Improvement:

- (a) Some 49% of reports did not contain adequate victim information.
- (b) An outline sentence plan was found in only 51% of reports.

### Conclusion:

Performance against this criterion was good.

## 1.2 General Criterion: ASSESSMENT OF RISK OF HARM

*RoH is comprehensively and accurately assessed using OASys in each case and additional specialist assessment tools where relevant.*

74%

### Strengths:

- (a) 94% (77 out of 82) of assessments of the OASys RoH levels had the correct classification.
- (b) Most community sentences were screened for RoH at commencement of the sentence, although only 71% of these were carried out on time.

- (c) 92% (34 out of 37) of licence cases were screened for RoH on release from custody.
- (d) In 81 out of 90 cases (90%) where a RoH screening was done, it was considered to be accurate.
- (e) The majority of RoH screening decisions (64 out of 79) led to a full analysis of the RoH. Most of these were completed to a satisfactory standard.
- (f) RoH assessments adequately addressed risks to children (83%), risks to the public in general (86%), risks to specific adults (93%) and risks to staff (76%) in most cases.
- (g) In most cases, communication between staff on the levels of RoH posed, and on MAPPA levels was appropriate.
- (h) Risk management plans on those leaving custody to be supervised on licence were comprehensive in 77% of cases and structured according to the required format in 81% of cases.
- (i) All risk management plans on high and very high RoH cases on community orders were completed within the required timescales.
- (j) All referrals to approved premises were felt to have been appropriate (seven cases) and there were no cases where referrals should have been made but had not.

**Areas for Improvement:**

- (a) In 39% of relevant community order cases - a significant minority - risk management plans were not comprehensive and did not follow the required format.
- (b) In nine of the 13 relevant cases, where a full RoH analysis was not completed following screening, no clear explanation for this was recorded.
- (c) In 29% of cases there was insufficient management oversight of high/very high RoH issues at the assessment phase. There was insufficient management oversight in 38% of child safeguarding cases.
- (d) In 28% of applicable cases (16 out of 59) practitioners had not adequately drawn-on all available sources of information when assessing RoH.
- (e) Victim issues - such as victim profile information and potential future risks to victims - were not thoroughly addressed in 51% (40 out of 78) of RoH assessments.

**Conclusion:**

Performance against this criterion was good.

**1.3 General Criterion: ASSESSMENT OF LIKELIHOOD OF REOFFENDING**  
*Likelihood of reoffending is comprehensively and accurately assessed using OASys as applicable.*

**73%**

**Strengths:**

- (a) *In 88 out of 99 cases (89%) an OASys score was calculated at the start of sentence/release from custody. Of those not requiring an OASys assessment, seven of 11 (64%) had an OGRS2 score calculated.*
- (b) *The criminogenic factors applying to the cases had been identified in 84% of cases (83 out of 99) at the start of sentence/release from custody.*
- (c) *Positive factors were identified in 85% of cases.*
- (d) *The likelihood of reoffending assessment drew on all relevant material in 71% of cases.*

**Area for Improvement:**

- (a) *In over half of the relevant PPO cases (four from seven), the OASys assessment had not been completed within five working days. In three of seven cases the OASys assessment was considered not to be comprehensive.*

**Conclusion:**

Performance against this criterion was good.

**1.4 General Criterion: ASSESSMENT OF OFFENDER ENGAGEMENT**  
*Potential obstacles or challenges to positive engagement are identified and plans made to minimise their possible impact.*

**71%**

**Strengths:**

- (a) *REM classifications were seen on almost all files (97 from 99 cases).*
- (b) *Diversity and other individual needs had been assessed in 80% of cases.*
- (c) *Potentially disadvantaging or discriminatory issues had been identified in 88% of relevant cases.*
- (d) *Plans had been put in place to address issues of diversity and disadvantage in 96% (52 out of 54) of relevant cases.*

**Areas for Improvement:**

- (a) *Basic skills screenings were not evident on the files in 81 out of 99 cases (82%). Of the 18 cases where screenings had been completed, 13 indicated the need for a full basic needs assessment; only ten of these cases had received such an assessment however.*

*The area had made arrangements for offenders to access basic skills services through their offender induction arrangements. We noted that this offered a prompt pick up of basic skills issues with the majority of offenders. However, this work was not being effectively communicated to offender managers and certainly the case records were not being updated to reflect this work.*

- (b) *Consideration of selecting the most effective methods in work with offenders was evident in only 53% of cases (52 from 98).*
- (c) *Evidence that the offenders' learning style and motivation for change had been addressed at the earliest opportunity was evident in only 67% of cases (66 from 99).*

**Conclusion:** Performance against this criterion was good.

### 1.5 General Criterion: SENTENCE PLANNING

*The offender manager plans interventions in custody and the community with a view to addressing criminogenic factors and managing any RoH to others. The initial sentence plan or unpaid work assessment is designed to describe a structured and coherent plan of work for each offender.*

**67%**

#### Strengths:

- (a) *In most cases the offender had been allocated promptly to an offender manager and to the correct tier within the offender management model.*
- (b) *In most cases (78%) the sentence plan reflected the sentencing purposes of **punish, help, change** and **control** appropriately. Planned contact levels were appropriate (92%) and it was clear which appointments were enforceable (73%).*
- (c) *In most cases the interventions planned were likely to address RoH issues (81%), promote community integration (62%) and address offending behaviour (75%).*
- (d) *Sentence planning documents reflected diversity and vulnerability issues in 71% of relevant cases (50 from 70).*
- (e) *Evidence was available that steps had been taken to ensure offenders understood the requirements of their sentences in 92% of cases, and the consequences for non-compliance, in 93% of cases.*

#### Areas for Improvement:

- (a) *51% of cases contained sentence plans that gave a clear shape to supervision. Only 65% set relevant goals for offenders.*
- (b) *ISPs were produced within national standards timescales in only 59% of cases.*
- (c) *The roles and responsibilities of all those involved in the work with the offender was not clear in 49% of cases (44 from 89).*
- (d) *The inspection found a number of shortcomings in specific aspects of ISPs. 51% of relevant plans could show that the timing of each of the requirements outlined in the plan were appropriate and 41% were not completed within the national standard timescale. 43% of the relevant cases did not sufficiently cross reference with the risk management plan and show how the RoH posed by the offender would be managed.*

- (e) *39% of ISPs on relevant community cases (12 from 31) could demonstrate they had drawn on all other relevant assessments.*
- (f) *Fifty-nine out of 98 cases (60%) demonstrated that the offender had been given an opportunity to actively participate in the planning process.*

**Conclusion:** This criterion represents a priority for improvement.

## 2. IMPLEMENTATION OF INTERVENTIONS

**2.1 General Criterion: DELIVERING THE SENTENCE PLAN**  
*The offender manager facilitates the structured delivery of all relevant elements of the sentence.*

**62%**

### Strengths:

- (a) *In 21 of the 25 relevant licence cases (84%), work carried out with the offender in the community built on work commenced in prison.*
- (b) *Most cases (73%) had evidence that the offender manager oversaw and coordinated the work of other staff involved in the intervention. Communication between the offender manager and other staff was generally good in 72% of cases.*
- (c) *In most cases (78%) there was evidence that the offender managers demonstrated commitment to their work with the offenders and helped to motivate and support them throughout the period of supervision (77%).*
- (d) *Sentence plans were reviewed at least every 16 weeks in 72% of cases.*
- (e) *In 78% of cases (77 from 99) all sentence requirements were fully implemented.*
- (f) *There were two high/very high RoH cases which had been transferred into Cumbria from another probation area. In both these cases a prompt review of the risk management plan was undertaken.*

### Areas for Improvement:

- (a) *Many cases (42%) did not show evidence that work with offenders flowed from the sentence plans or that the enactment of these plans gave a clear direction to supervision (59 %).*
- (b) *Insufficient attention had been given to ensuring that the skills acquired by offenders from the delivery of interventions was reinforced on an ongoing basis in 36% of cases (24 from 67).*
- (c) *In 39% of cases, sentence plan reviews did not integrate other plans appropriately.*
- (d) *In just 45% of cases was there clear evidence that continuing ownership of the sentence plan by the offender was sought and secured.*
- (e) *It was important that high quality work was undertaken in readiness for offenders being released from custody. However, there was evidence that work between prison based staff, offender managers and others was positive in just 42% of relevant cases, proactive in just 32% of cases and timely in only 37% of cases.*
- (f) *In three out of eight transferred-in cases, a first appointment was not made within five working days of notification that the offender was in Cumbria. In six out of the eight cases a home visit was not carried out within ten working days.*

**Conclusion:** This criterion represents a priority for improvement.

**2.2 General Criterion: PROTECTING THE PUBLIC BY MINIMISING RISK OF HARM**

*All reasonable actions have been taken to protect the public by keeping to a minimum the offender's RoH to others.*

**75%**

**Strengths:**

- (a) *Most RoH assessments were reviewed at the 16-week stage (81%), every 16 weeks thereafter (76%) and following significant changes in the case circumstances (86%). Reviews adequately addressed issues of RoH to children, to the public, and to specific adults in more than three-quarters of cases.*
- (b) *Staff contributed effectively to MAPPA in 91% of relevant cases (20 from 22) and MAPPA was used effectively in 83% of the cases.*
- (c) *In all six relevant cases, recall to prison was appropriately initiated to address RoH issues. Recall was a specific aspect of the risk management plan and the process was used effectively. All the offenders concerned were informed of the reasons for recall and efforts were made to re-engage them.*
- (d) *Where feasible, changes in the RoH posed by offenders were generally, anticipated by offender managers and acted upon appropriately.*
- (e) *Most cases, 73 from 99, had evidence that all reasonable actions had been taken to protect the public from harm.*

**Area for Improvement:**

- (a) *Insufficient attention had been given to conducting purposeful home visits in more than half of high risk cases and in five out of ten cases involving children's safeguarding issues.*

**Conclusion:** Performance against this criterion was good.

**2.3 General Criterion: VICTIMS**

*Consistent attention is given to issues concerning victims.*

**75%**

**Strengths:**

- (a) *Statutory victim contact arrangements were in place and operated satisfactorily in most of the relevant cases.*
- (b) *All statutory victim contact cases had evidenced that the victim was offered an opportunity to comment on the proposed licence conditions for the offender.*

- (c) *In seven out of the eight relevant statutory contact cases, the victim had been informed of the release conditions for the offender.*
- (d) *91% of relevant cases (ten from 11) could show that victims had been informed of the offender's release in a timely fashion.*

**Areas for Improvement:**

- (a) *Victim awareness work had not been undertaken with the offenders in 34% of relevant cases (24 from 70).*
- (b) *In only two out of the six relevant victim contact cases was there evidence that the victim had been given an opportunity to view the parole report.*
- (c) *In 25% of relevant cases there was insufficient evidence that the offender manager and other workers had given adequate priority to victim safety issues.*

**Conclusion:**

Performance against this criterion was good.

**2.4 General Criterion: ENSURING CONTAINMENT AND PROMOTING COMPLIANCE (Punish)**

*Contact with the offender and enforcement of the sentence is planned and implemented to meet the requirements of national standards and to encourage engagement with the sentence process.*

**80%**

**Strengths:**

- (a) *88% of offenders (87 from 99 cases) were offered a full and timely induction upon commencement of the sentence or release on licence.*
- (b) *Most offenders (83%) were offered appointments in accordance with national standards' expectations. In approximately three-quarters of cases reporting patterns facilitated the requirements of the sentence, met RoH considerations and supported the achievement of sentence plan objectives.*
- (c) *Offender managers monitored attendance across all the interventions in 95% of cases and effective action was taken when offenders failed to comply with their requirements. Most cases (91%) could show that the judgements made by offender managers, in respect of offender non-compliance, were accurate.*
- (d) *Breach action, where required, was instigated in accordance with the national standards time-scales in 33 out of the 39 relevant cases (85%).*
- (e) *Unpaid work sessions, in general, conformed to national standards work-rate requirements (71%) and facilitated the requirements of the sentence (79%).*
- (f) *Unpaid work placements were found to be suitably demanding and of benefit to the community in 86% of cases.*
- (g) *Case records were well organised (94%) and contained all the necessary documentation in 79% of cases. Recording of information was clear and was made promptly in 92% of cases. It was considered sufficient in 80% of cases.*

- (h) Overall, we found the quality of practice in respect of promoting offender compliance was satisfactory in 92% of cases (91 from 99).
- (i) In respect of enforcement of exclusion or curfew requirements, and the associated liaison with the electronic monitoring provider, the inspection found that these standards were met in all four of the relevant cases.

**Areas for Improvement:**

- (a) In half of the licence cases we found that insufficient contact had been maintained with the offenders during the period in custody and this had hindered effective post-release work.
- (b) Although the breach process was begun efficiently (see 'Strength (c)' above), breach was resolved within the required timescale in just 69% of applicable cases. Court representatives commented positively on the joint work that had been done between the probation area and local courts to streamline the processes for addressing breach issues.
- (c) There was evidence that unpaid work placements were matched to the offenders in only 46% of cases.
- (d) Enhanced levels of contact and a reporting pattern supportive of all sentence elements were evident in only two out of seven PPO cases inspected.

**Conclusion:**

Performance against this criterion was good.

**2.5 General Criterion: CONSTRUCTIVE INTERVENTIONS (Help and Change)**

*Interventions are delivered to identified ends and to meet the requirements of the sentence: help and change.*

**72%**

**Strengths:**

- (a) Constructive interventions challenged offenders to accept responsibility for their offending and its consequences in 71% of cases (56 from 79).
- (b) 84% of cases (66 from 99) had evidence that work and resources were directed at community reintegration issues.
- (c) 75% of cases were considered to have had interventions delivered that met the **help** and **change** requirements of the sentence.
- (d) The sample had one case that required the offender manager to prepare reports and attend DRR review hearings in accordance with national standards and court requirements. This was done in the case in question.

**Areas for Improvement:**

- (a) 52% of cases (11 from 21) did not have evidence that an appropriate intervention had been put in place where a basic skills need had been identified.

- (b) *Only 11 of the 27 relevant cases (41%) showed that the provision and timing of an accredited programme was consistent with the sentence plan. The reasons for deviating from the sentence plan were not clear in more than one-third of these cases.*
- (c) *Although there was some evidence of constructive interventions being delivered within approved premises, they rarely formed part of the sentence plan for these offenders.*

**Conclusion:** Performance against this criterion was good.

**2.6 General Criterion: RESTRICTIVE INTERVENTIONS (Control)**  
*Interventions are delivered to identified ends and to meet the requirements of the sentence: control.*

**82%**

**Strengths:**

- (a) *In 76% of the relevant cases (22 from 29), restrictive interventions were fully monitored.*
- (b) *Every reasonable action to minimise the RoH was taken in 77% of relevant cases (34 from 44).*
- (c) *Approved premises were being used effectively as a restrictive intervention in all four of the relevant cases.*
- (d) *Additional licence requirements, in general, were comprehensive, necessary and proportionate to both RoH and likelihood of reoffending.*
- (e) *In 85% of cases (39 from 40), we found that restrictive interventions were used to meet the **control** aspects of the cases.*

**Areas for Improvement:**

- (a) *Only 13 of the 19 relevant licence cases (65%) could show that additional licence conditions were proportionate to the protection of victims.*
- (b) *There were four licence PPO cases on offenders with drugs misuse concerns. Only two of these had an additional licence condition in respect of drugs issues.*

**Conclusion:** Performance against this criterion was good.

**2.7 General Criterion: DIVERSITY ISSUES**  
*Full and proper attention is paid to diversity issues.*

**70%**

**Strengths:**

- (a) *85% - 69 from 89) had evidence that the arrangements for interventions had taken account of diversity issues.*

- (b) *In all four cases involving approved premises residence, we found that the regime had addressed the diverse needs of the offenders.*
- (c) *Issues of disability were appropriately addressed in ten of the 12 relevant cases (83%).*
- (d) *85% of offenders had been informed that discriminatory behaviour would not be tolerated.*

**Areas for Improvement:**

- (a) *Only 59% of cases could show that issues of literacy and dyslexia needs had been appropriately addressed.*
- (b) *Of the two relevant cases, only one could evidence that the offender gave informed consent to a singleton placement and that other reasonable steps had been taken to assist offender engagement.*

**Conclusion:**

Performance against this criterion was good.

### 3. ACHIEVEMENT AND MONITORING OF OUTCOMES

#### 3.1 General Criterion: ACHIEVEMENT OF INITIAL OUTCOMES

*Planned objectives are efficiently achieved.*

60%

##### Strengths:

- (a) *In relevant cases, the area responded to changes in the offender's behaviour by increasing or decreasing, as appropriate, the use of restrictive interventions. The area also moved offenders between tiers when necessary; changes in MAPPA levels were also initiated by the area as a result of changes in the RoH profile of offenders.*
- (b) *73% of offenders (72 from 99 cases) complied with the requirements of the sentence.*
- (c) *86% of unpaid work sentences showed a demonstrable benefit to the community.*
- (d) *80% of OASys had been rescored. 47% of those cases showed an improvement over the initial score.*
- (e) *53% of cases (48 from 91) showed significant improvement or some improvement against the priority criminogenic factors identified in their cases. Only 5% of cases showed deterioration in the priority criminogenic factor. This pattern was similar for the second and third priority criminogenic factors.*
- (f) *The area recorded strong performance against meeting the objectives of **punish, help, and control**.*
- (g) *The resources used were consistent with the RoH and risk of reoffending in most cases.*

##### Areas for Improvement:

- (a) *Only 39% of relevant cases (27 from 69) showed increased victim awareness on the part of offenders.*
- (b) *29% of offenders in the sample were convicted of an offence, and one was cautioned, whilst subject to supervision. This needed further investigation by the area.*
- (c) *62% of cases (61 from 98) could not evidence that offender learning outcomes were applied in their daily lives.*
- (d) *Four of the seven PPO cases had not had sufficient resources allocated to the case.*
- (e) *36% of cases (36 from 99) could not show that planned objectives had been achieved at the time of the inspection. In 46% of cases there was insufficient evidence of positive change in attitudes and behaviour.*
- (f) *For Tier 3 and 4 cases, the objective of achieving **change** was adequately met in 38% of cases.*

**Conclusion:**

This criterion represents a priority for improvement.

**3.2 General Criterion: SUSTAINABILITY OF PROGRESS**

*Results are capable of being sustained between different phases of a sentence and beyond the end of supervision.*

**72%****Strengths:**

- (a) 80% of cases had had no more than two offender managers during the course of the sentence.
- (b) 82% of cases (65 from 79) showed that the offender had been made aware of community organisations that would help with their criminogenic needs.
- (c) Sixty-four of the 82 relevant cases (78%) had evidence to show that attention had been given to long-term community reintegration issues.
- (d) In 76% of cases (75 from 99) the inspection found evidence that everything reasonable had been done to sustain the progress of offenders.

**Areas for Improvement:**

- (a) In 35% of cases (34 from 98) structured sentence planning had not been given priority throughout the sentence.
- (b) 41% of cases (40 from 97) could not evidence that the offender manager ensured that sufficient action had been taken to consolidate longer-term offender learning and to reinforce new skills.

**Conclusion:**

Performance against this criterion was good.

## 4. LEADERSHIP AND STRATEGIC MANAGEMENT

### 4.1 General Criterion: LEADERSHIP AND PLANNING

*There is active leadership in the implementation of national policies via local policies and procedures which are regularly monitored and reviewed, through proactive planning with other key agencies, and by promoting the diversity agenda.*

**Well met**

#### Strengths:

- (a) *The Cumbria Probation Board was actively and effectively involved in planning and performance issues. The annual business plan built upon the national template by integrating local priorities and included a critical self-appraisal identifying 'strengths' and 'areas for improvement'. The latter were assessed against organisational priorities and set within a clear project plan approach that included progress reporting arrangements. The model for leading the organisation at the time of the inspection was encapsulated in the concepts 'celebration and ambition'; celebration of the progress made in recent years and ambition to improve further. The achievements of the Cumbria Probation Area, both in respect of performance against national targets and improvements in the quality of service delivery, suggested that this approach accurately reflected the organisation's health at the time of the inspection.*
- (b) *An additional tier of planning overlaid the year on year business planning cycle and provided a longer-term direction of travel for the area. The Excellence Plan 2006/2008 followed on from the initial Excellence Plan of 2004/2006. This document helped the organisation to look beyond the narrow scope of annual target driven performance through the notion of 'taking responsibly for our future'.*
- (c) *We found a culture of openness to external scrutiny at all levels of the organisation. The Board and SMT stated that assessment by external bodies helped them to understand their own internal view of 'strengths' and 'areas for improvement'. Examples of the improvement work that had been undertaken within the area as a consequence of the HMI Probation ESI and follow-up inspections, demonstrated the ability of the area to bring about corporate change in aspects of performance or service delivery.*
- (d) *Regional work was a key aspect of the planning and performance agenda for Cumbria. The area viewed itself as a relatively small organisation in the regional context and recognised the benefits it would accrue through effective collaborative work. Comments from the NPD regional manager confirmed the full and active part played by the Cumbria area in the North-West regional collaborative work. For example, the Cumbria CO oversaw the regional probation representatives at the Regional Government Office and on regional initiatives on networks and alliances. Other Cumbria Board and staff members also made specific contributions to regional work.*

- (e) *The area ran a risk register in relation to key business risks. This process reported to the area Board and helped to ensure that activity was prioritised within the organisation, identifying and addressing potential concerns before they became problematic.*
- (f) *Arrangements were in place to ensure that staff more generally were aware of the planning issues for the organisation and their impact at local level. All the key planning documents were available in the 'purple book'. This set of documents was regularly reviewed and located in each office so they were readily available to all staff. The CO visited all the divisions on a quarterly basis for face to face discussion with operational staff. Additional communication arrangements were in place in the organisation, e.g. use of e-mail and newsletters. Most operational staff interviewed in the course of the inspection identified a range of methods used in the organisation to keep them informed of developments. 95% of the staff (42 from 44) interviewed during the case sample exercise reported that they felt they were well-informed about the policies and procedures that applied in the area.*
- (g) *During the inspection, a group of representatives of key partner agencies with whom the area worked had the opportunity to comment on their perceptions of the area's partnership work. Many positive comments were made about the profile of the area in partnership work and about the approach of the organisation to its work alongside others. The area was seen as 'punching above its weight' in terms of its influence on local criminal justice and community safety developments. Partnership working had a high profile for Cumbria and was reflected in a number of joint plans at local, county and regional levels. Examples would include; the North-West Regional Business Plan; the North-West Prison/Probation Joint Delivery Plan; the North-West Reducing Reoffending Action Plan; the Cumbria Sub-Regional Strategy - Sustaining Cumbria and the NOMS Civil Renewal Strategy. Partnership work was supported by SLAs and information exchange protocols where relevant.*
- (h) *Sentencer liaison and services to courts were well-developed in Cumbria. The area enjoyed close working relationships with local courts and feedback from sentencer and court representatives indicated that the strategic and operational aspects of services to courts were well regarded.*
- (i) *The area had put considerable work into developing its internal and external MAPPA work. A Cumbria ACO chaired the local MAPPA SMB. Local policies and practice instructions had been issued to staff and processes for ensuring appropriate management oversight of work in relevant high RoH cases were evident.*

(j) *The MAPPA SMB had played a full part in developing public protection in Cumbria on behalf of the agencies and within the agencies represented. The SMB linked with the LCJB, Learning Skills Council Board and the Domestic Violence Senior Management Board. It undertook joint planning in public protection work and on the implementation of the new SFOs criteria. The MAPPA SMB worked in partnership with others on joint communication on public protection matters. This was then delivered to the communities of Cumbria.*

*Some additional initiatives included:*

- an agreement with the Stronger and Safer Communities Board to integrate and fund public protection into the local area agreements from 2007 i.e. domestic violence*
- plans to do SMB training in November 2006 on the new public protection research*
- the approved premises Communication Strategy was managed through the MAPPA SMB and police public relations team as well as through the ACO Interventions*
- all SFOs were notified to the MAPPA SMB*
- the MAPPA registrar funded by the police and the SPO funded by NPS*
- all MAPPA meetings were chaired by the Public Protection SPO or MAPPA registrar and the SPO Offender Management was in attendance for first MAPPA meetings and other key meetings.*

(k) *Diversity issues featured in the area business plan and the area also contributed to the regional diversity network. Partner organisations commented on the positive contribution of the area to a range of diversity initiatives in the county. It was noted that the area took a broad view of diversity to encompass a wide span of possible sources of disadvantage to offenders and staff. The area caseload had a lower than average percentage of black and minority ethnic offenders, compared with the national picture. However, there was a relatively high profile of rurality issues to be addressed and the organisation took steps to be responsive to the needs of offenders and staff in this respect.*

(l) *Significant progress had been made by the area in establishing and operating the offender management model. Building on their pathfinder experience the area was able to launch its revised policies, staff structures and practice instructions to underpin these developments quickly. The model was in place by August 2005 and the area had a full year to test the arrangements in practice.*

(m) *Most of the staff interviewed (77%) reported that they felt their managers demonstrated professional management approaches in their work and a similar number commented that managers modelled positive leadership behaviour.*

(n) *The area undertook significant consultation work with sentencers and court staff on the roll-out of new developments, e.g. offender management, the Criminal Justice Act, end to end enforcement processes, court services and interventions.*

*The operational ACOs met with a sentencer sub group of the Board and with the Sentencing Council, Bench Chairs, the clerk to the justices, and District and Crown Court Judges. Local SPOs met with their Bench Chair and court officials to plan the local implementation of the Criminal Justice Act. Local benches met with local teams for divisional training and briefings as agreed.*

*Other developments included significant work in conjunction with the LCJB on the confidence target, including consultation surveys with minority communities. The probation area worked in partnership with others, e.g. DAAT, Supporting People and the Learning Skills Council to understand the views of service users concerning the planning and delivery of services. The area worked with the Children and Young Persons' Board on accessing children's views on service delivery.*

*The area had recently developed and implemented an interactive website as part of its approach to consultation with service users.*

**Area for Improvement:**

(a) *The divisional management arrangements in place for some time had proved to be an effective means of delivering a range of benefits to the area. However, the advent of the offender management model, and the increased impact of a functional split of responsibilities for operational staff and local managers, had raised some questions for the area as to the suitability of the existing divisional management arrangements. This was identified as a concern in the area business plan and the work to address this issue was timely.*

## 4.2 General Criterion: PERFORMANCE AGAINST NATIONAL AND REGIONAL TARGETS

*Key performance targets are consistently met, with careful attention to diversity issues throughout.*

**Well Met**

NPS Performance Data	Target	2005 - 2006	
		Cumbria	England and Wales
Enforcement – breach taken where required within ten working days: all orders/licences	90%	97%*	91%*
Offender compliance including orders allowed to continue	85%	86%*	81%
Appointments arranged in accordance with national standards	90%	87%*	85%
Appointments attended in accordance with national standards	65%	66%*	64%
Accredited programme completions: % performance in relation to target	100%	88%	114%
Unpaid work completions: % performance in relation to target	100%	136%*	102%*
DTTO/DRR starts: % performance in relation to target	100%	57%	88%
DTTO/DRR completions: % performance in relation to target	100%	124%*	99%*
Basic skills: % performance in relation to starts	100%	103%*	112%*
Basic skills: % performance in relation to awards	100%	213%*	149%*
Sickness absence: average days absence	9 days	12.9	12.3
Proportion of magistrates' court PSRs prepared to court's timescale	90%	98%*	97%*
Accurate and timely ethnicity data	95%	98%*	97%*
Home Secretary's Race Equality Employment Target for 2009	(North-West Region) 5.4%	6.8%*	
Proportion of victims of serious sexual/violent offences (where offender sentenced to custody of 12+ months) offered contact within eight weeks	85%	90%*	93%*
RoH assessments and plans for high RoH cases completed within five working days of start/release	90%	63%	81%
RoH assessments and plans for PPO cases completed within five working days of start/release	90%	68%	82%

\* Asterisk indicates area has met target or is 'near miss'.

Joint 'end-to-end' targets on enforcement for Local Criminal Justice Board	Target	Rolling quarter January-March 2006	
		Cumbria	England and Wales
Average time to resolve community penalty breach proceedings from relevant unacceptable failure	No more than 35 working days	30 days*	43 days
Proportion of all breach proceedings resolved within 25 working days of relevant unacceptable failure to comply	50%	62%*	43%

**Strengths:**

- (a) *The area's approach was to locate the accountability and responsibility at the right level within the organisation in order that effective performance management could take place. Performance information was reported to the Board, SMT and DMTs. On a bi-monthly basis, a performance report was sent to the divisional managers and the SMT for comment. Underperformance issues were identified and action plans for correcting performance produced. The report contained information on the targets, the weighted scorecard, national standards and eOASys. Feedback was provided directly to the CO and all comments were then assimilated into an area management performance report. This was circulated to all managers and DMTs, who in turn discussed the report with their teams. The report was also timetabled for the monthly SMT performance meeting.*

*There was a separate performance report to the Board concentrating on the performance measures that are cash linked. The CO gave an overview with detailed exception reports and action plans from the relevant ACO. The action plans were monitored on a monthly basis by the Board Audit Committee.*

*The Chair of the Audit Committee and the CO reported to the full Board on a quarterly basis. The CO also held accountability meetings with the relevant ACO and other managers for delivery on performance.*

- (b) *Revisions to the area structures not only addressed new service delivery challenges, e.g. implementation of the offender management model, but also encompassed area performance issues. Accountability arrangements for local performance were included as part of the structural development of the organisation and this was thought to have contributed to the steady increase in performance achieved by the area.*
- (c) *Our meeting with strategic partner representatives confirmed that the Cumbria Probation Area, in part, addressed some aspect of its internal performance requirements through collaborative work with others, e.g. court arrangements for enforcement issues. Similarly the area assisted partner agencies in their performance issues. Examples of joint work on mutual targets were provided, e.g. joint work on speeding up court processes and case transfer arrangements between the probation area and the local YOT.*
- (d) *The area was in the process of reviewing the information it collected, to ensure that performance reporting reflected current and future expectations*
- (e) *Quality assurance was under development in the area. The quality assurance arrangements in the area addressed national standards, OASys work and management oversight of work plans. Countersigning was done by SPOs and ACOs and provided for direct feedback to staff.*

*The area had three quality assurance managers in unpaid work and four senior practitioners. They were responsible for area improvement activities and responses to inspections/audits. Cumbria recently resourced a senior practitioner to be released full-time to develop and quality assure the OASys PSR template. Regional quality assurance activity included OASys work, and national standards validation.*

(f) *Diversity awareness training was provided for all staff and Board members and managers undertook 'managing diversity' training. Staff benefitted from a range of learning and development opportunities, e.g. Gypsy and Traveller conference, and participated in regional events which focused on service delivery. Following a regional conference, 'From Diversity into Practice' staff produced a local action plan. Both the offender management and interventions function had contributed action plans to the Diversity and Race Equality Scheme.*

*A diversity champion had been identified for offender management and interventions and a Diversity Reference Group scrutinised operational issues on policies and practice instructions. Racially motivated offenders were identified on CRAMS and there was a specific instruction on working with racially motivated offenders.*

(g) *A Disability Discrimination Act Compliance Plan was submitted to the NPD and the area was working with NPD Estates to make buildings compliant or to provide 'managed solutions'. The area had the 'Two-Ticks' (Positive about Disabled People) award for its support for employees and potential employees. The area planned to provide disability awareness training for all staff during 2006/2007.*

**Area for Improvement:**

(a) *Despite considerable effort on the part of the area to address the staff sickness rate, it remained an aspect of performance that was still outside of national requirements, as did the completion rate for accredited programmes.*

**4.3 General Criterion: RESOURCE DEPLOYMENT**

*There is a strategic approach to deploying resources to deliver effective performance and support diversity initiatives and there are positive indications in relation to value for money.*

**Satisfactorily met**

**Strengths:**

(a) *The area had in place a reporting facility to track expenditure by cost centre. However, it was acknowledged that this was not sufficient to meet the contemporary requirements of management information in respect of resource issues. In common with other probation areas, Cumbria struggled with these issues in the absence of a national resources management model and was seeking to address this at a regional level with partner organisations.*

(b) *The area had been assessed through the Annual Internal Audit and Assurance and the organisational systems had for the previous four years been assessed as "well controlled". The external auditors gave an 'unqualified opinion' regarding value for money.*

- (c) *Budget management was a major concern for the area and they had faced several years of difficult budget settlements. The area attempted to keep staff informed of budget issues and to take decisions across as long a time-scale as possible. The Board and management team as a whole sought to highlight efficiency savings to address forecast budget shortfalls. Vacancy management also featured as part of the area's response to budget concerns.*
- (d) *The area had a specific court practice document outlining the service delivery to the courts. There was a protocol between HM Court Services and the area following the implementation of the Criminal Justice Act implementation. The area had had feedback from Board sentencers that the perception was that they provided high quality services to Courts.*
- (e) *The geography of the area, including topography, distances between town centres and transport infrastructure links, all created particular operational challenges for the Cumbria area. These impacted at many levels but specifically in problems of deploying staff in response to local workload issues and in service users accessing the full range of services offered by the organisation. The area had found ways of responding to these challenges in a considered and balanced way, such as support for childcare to enable offenders to travel to venues to access services and support with travel costs.*
- (f) *The area had a Diversity Reference Group chaired by the Board Chair. This was attended by a Board member, the CO, the ACO (HR) and had cross-grade representatives from the divisions. The area was also part of the North-West Regional Diversity Group. Locally, it played an active part in the County Equality and Diversity Partnership. The area was supporting a research project by two staff on racially motivated offending.*  
*Direct funding had been provided for a jointly funded black and minority ethnic consultation exercise in the county. Externally facilitated diversity excellence model assessor training had been provided for a group of staff earlier in 2006, with a view to completing a whole organisation assessment by the end of this year.*
- (g) *The budget for the offender management function was clearly defined and PPO work was one of the key areas of operation funded through the offender management budget for 2006/2007. The area prioritised PPO's in a number of ways. There was a specific practice instruction for offender managers and link staff carried PPO cases in each division. The area worked with the Stronger Safer Communities Board to obtain a specific resource to review and develop PPOs in Cumbria. The area had an improvement plan, and an identified champion to work with the police and YOT.*
- (h) *The Cumbria Probation Area by virtue of its size, resources, and strategic alliances relied heavily on regional collaboration and work with other agencies to provide and supplement services and resources for offenders. An example was a PPO resource provided by the Stronger and Safer Communities Board.*

**Area for Improvement:**

- (a) *Whilst the area used the national workload prioritisation guidance it was acknowledged that this was insufficiently developed to provide a comprehensive facility for resource deployment purposes.*

**4.4 General Criterion: WORKFORCE PLANNING AND DEVELOPMENT**

*Workforce planning and development leads to a good match between staff profile and service delivery requirements. Relevant diversity legislation is observed in staff recruitment and deployment.*

**Satisfactorily met**

**Strengths:**

- (a) 

*The SMT felt they had a very positive relationship with both UNISON and NAPO at informal and formal levels. The unions were represented on area working groups and projects, e.g. Diversity Reference Group and the group dealing with the Workload Management Tool. The area and the unions worked together in addressing many complex issues, e.g. formal procedures over performance issues.*

*Both NAPO and UNISON were represented on the Joint National Consultative Committee which met quarterly. Monthly informal meetings were held between the NAPO Chair and Secretary and the CO and ACO (HR). These meetings were seen as a constructive mechanism to resolve issues before they became problematic. The SMT felt that constructive discussions also took place on key areas such as PO/PSO role boundaries. Informal meetings were held with UNISON regional officers. For example, UNISON had approached their national officers regarding workload measurement following discussions in Cumbria. There was a joint initiative on stress management underway. Both NAPO and UNISON had worked alongside operational managers and the HR team to complete the job evaluation matching and evaluation process. The area provided facility time for union officials to carry out representational work and to attend meetings, etc. Funding was allocated in the budget for this work.*
- (b) 

*The area had in place a Learning and Development Plan. This was based on the NPS, regional and area business plans and linked to issues identified through the staff appraisal process in use in the organisation. The plan had a wide ranging remit and helped the organisation to respond to developmental issues that were generated by external requirements; it addressed the developmental issues that arose from local planning and gave space for an individual staff perspective on developmental issues.*
- (c) 

*Many members of staff commented on the improvements in internal processes and communication since the advent of the offender management model in the area. They said they were clearer about their role under offender manager. Many welcomed the integration of a broader group of staff, e.g. case administrators and external and internal interventions providers, into work with offenders. The clarity of roles, as outlined in the offender management model framework, assisted with giving staff confidence to operate in the new environment. All staff interviewed during the case sample discussions said that they were clear about their role within the offender management model.*
- (d) 

*73% of staff (32 from 44) reported that their training and developmental needs had been met. All the trainee POs in the group reported their professional development needs had received sufficient attention in the organisation.*
- (e) 

*Most staff (78%) were satisfied with the quality of the supervision they received and most (88%) confirmed they had had an appraisal, which was linked to the area business plan, completed within the past 12 months.*

(f) *The area's absence procedure was in line with the national model and the SMT assessment was that it met most of the criteria set out in the recently published national audit office report. Sickness levels were reported to the Board or its sub-committees on a monthly basis. Senior managers received monthly reports and there was a standing item on SMT meeting agendas. Line managers received monthly information and action prompts on return to work interviews, etc. A range of absence data was monitored, including analysis by grade, division, function and reason. Long-term absences were actively case managed by the HR manager and the ACO (HR) and employment terminated where appropriate. Health and well-being screening was provided for all staff in 2006 and stress awareness and management training was planned to be provided during 2006/2007. Counselling services were in place and an employee assistance programme was under consideration. Flexible working was available for staff and the area operated within the guidelines of the nationally agreed policy on special leave, etc. The area's absence action plan was under review and was due to be submitted to the Board in September 2006. All but one member of staff interviewed confirmed they were clear about the area's procedures in respect of staff sickness matters.*

(g) *The area complied with the monitoring duty set out in the Race Relations (Amendment) Act 2000 employment requirements, with quarterly monitoring in respect of numbers of black and minority ethnic and disabled staff, gender, applications, interviews, appointments, access to training and grievance and discipline. The Race Equality Scheme had been revised and retitled the Diversity and Equality Scheme. Key priorities for 2006/2007 were; progressing work with racially motivated offenders, reviewing the scheme in light of the Disability Discrimination Act and establishing the impact assessment process. Progress on Diversity and Equality Scheme action plans was monitored by the Diversity Reference Group and from there to the Board.*

**Areas for Improvement:**

(a) *The inspection found inconsistencies in the approaches of operational managers in supervising practice and monitoring quality assurance issues. Several reasons were said to impact on the ability of local managers to undertake these tasks, not least of which was the large variation in the numbers of individual staff line managed by the various managers.*

(b) *63% of individual practitioners interviewed reported that the frequency of their supervision was quarterly or less.*

**Strengths:**

- (a) *Initiatives were normally done in conjunction with other bodies, e.g. LCJB work on consultation with local communities on practice agencies. The LCJB chaired by the CO, monitored press coverage for impact of the Criminal Justice Plan.*
- (b) *The SMT and area management team acknowledged that the area needed to develop an outcome approach to individual, OMU and organisational work. The area was planning to hold a seminar on this subject before the end of the current year.*
- (c) *Sentencing proposal/disposal and release data comparisons were under development. It was planned, during 2006/2007, to produce a digest of outcome information for courts and partners. At the time of the inspection all managers received weekly data on sentencing/proposals and this was followed up at SPO/ACO level as appropriate. The Divisions fed back to the Board on the issues arising from the monthly monitoring.*
- (d) *The area had in place a process for reviewing all SFOs according to the national policy and the findings of the reviews were circulated to all staff. The Board received a similar briefing on outcomes and collective intelligence on SFOs. The recent PC15/06 had been used to brief the Board, staff and managers on required changes to practice. The area will report to the regional manager on progress in these issues.*
- (e) *The Diversity Reference Group encouraged research on diversity and sponsored two staff through the Probation Research Education and Training Initiative to undertake research. This was a major piece of action research done by the area for NOMS. The pathfinder initiative was piloted in the area and subsequently implemented in Cumbria by the OMUs.*
- (f) *All SFOs, deaths under supervision and complaints were reported to the Board and SMT. The area was developing the processes for reviewing the learning from these areas. All SFO related practice changes were reported back to the functional teams*

**Areas for Improvement:**

- (a) *The processes for collecting and using data on the outcomes achieved by the work of the organisation were not well-developed and were acknowledged by the SMT as an area for improvement. The inspection found that staff were keen to understand the impact of their work on 'offender change' issues and to use this information in their work as an aid to offender motivation. The inspection did not find evidence that outcome data had been used at the corporate level to help improve service delivery or identify gaps in provision.*

- (b) *Some notable issues were identified in respect of the 30% of the case sample who were convicted or cautioned for an offence during the period of supervision (29 convicted and one cautioned). The inspection found no difference for this group compared with the non-convicted group (n=69) in relation to enforcement practice issues, e.g. effective action to ensure compliance and quality of practice in promoting compliance. However, the achievement of progress against criminogenic factors showed significant differences for the two groups. Those who were convicted or cautioned made, approximately, only half the level of progress of the non-convicted group. The non-convicted group achieved an average improvement of 54% against the three priority criminogenic factors. The score for the convicted group was 28%. The ability of the area to achieve outcomes across the board was limited by the dampening effect of those who were convicted of an offence during supervision. In addition to an internal understanding of these differences, this observation may point to implications for multi-agency work and, in particular, for work in relation to PPOs.*

#### 4.6

#### General Criterion: COMMISSIONING OF SERVICES

*There is efficient provision of effective services to support offender management outcomes and to ensure equal access to provision for offenders.*

**Satisfactorily Met**

#### Strengths:

- (a) *The area had a positive engagement with the ROM who was supportive of the area's approach to sub-commissioning, and of CROP in particular. An SLA with the ROM was in place and regular reporting existed for the SLA objectives. The future shape of the commissioning of service delivery was being considered jointly with the ROM and on a regional basis in the context of the North-West's federated approach. All work in this respect was assessed against a matrix of area specific, pan area or regional provision and this broad shape was discussed actively with the ROM at regional and local level.*
- (b) *The area had a strong presence in joint commissioning fora, in particular the DAAT, Learning Skills Council, and Supporting People. Some aspects of core delivery were being commissioned, e.g. the sex offender programme via the NSPCC, and a local charitable body provided unpaid work services. CROP was a highly active forum for voluntary and faith sector partners, run jointly with the prison and youth offending services. This forum had developed two projects for which funding was being sought. A number of other projects were also under discussion.*
- (c) *The inspection found positive use of specialist services in many cases and these were generally found to be effective in addressing issues such as: drugs/alcohol; education and training; employment; mental health and general health matters.*
- (d) *Partner agencies expressed the view that the probation area had a positive approach to contracting issues. The area was said to work in a collaborative way and there was clarity in the processes for reviewing performance against agreed targets.*

- (e) *The area was represented in the local CDRPs and other strategic bodies with criminal justice remits. Whilst it was not always possible to have the highest level representation by the probation area at every meeting, partner organisations understood the resource constraints impacting on the probation area. They were of the view that the level of priority given to these strategic relationships by the area was good.*
- (f) *Partner agencies gave examples of joint initiatives with the probation area in relation to service delivery, e.g. Rathbones placements of staff in probation premises. This flexibility was welcomed by partner agencies.*
- (g) *Cumbria Probation Area has been instrumental in commissioning services to support victims of domestic violence through a £1.5 million project from the Northern Rock foundation for rural Cumbria.*
- (h) *Feedback from partner agencies suggested that the area was robust when working with other commissioning bodies on the provision of services for offenders. The area was seen to have taken an effective stance in respect of defending offender accommodation provision in the Five Year Plan against elected members' issues. The area also had a specific focus on maintaining offender access to provision throughout the county on basic skills and drug treatment services.*

**Areas for Improvement:**

- (a) *In 41% of cases (39 from 96) a gap in service provision was identified. Difficulties in accessing appropriate housing services. The area acknowledged it needed to improve its information resources to assist with the development of its approach to commissioning services.*
- (b) *29% of cases (22 from 76) could not evidence that accessible services were provided to support offender management outcomes.*
- (c) *Although most cases showed no concerns in respect of the working arrangements between prisons and offender managers, the results from the inspection showed that there were aspects of joint work with prison in respect of offender management issues that needed to be addressed. In particular, the arrangements for ensuring the preparation for work with offenders due to move from prison to the community were timely, proactive and positive.*

## APPENDIX 1

### Contextual information

#### Caseload at end of September 2005

Total caseload	1,891
% <i>White</i>	98.8%
% <i>Minority ethnic*</i>	1.2%
% <i>Male</i>	86.0%
% <i>Female</i>	14.0%
Number of cases subject to MAPPA:	(%)
Level 1	5%
Level 2	2%
Level 3	0.1%
Number of PPO cases	4%
* Excluding cases for which ethnicity information is not available.	

The local definition of a PPO case – on which the above figure is based – is ‘the most prolific offenders, the most antisocial in their behaviour and those who pose the greatest threat to the safety and confidence of their local communities’.

**Total revenue budget in 2006-2007: £7.362m**

#### Approved premises:

Bowling Green – capacity 24

## **APPENDIX 2**

### **Inspection model, methodology and publication arrangements**

#### **Model**

- The OMI programme started in May 2006. All NOMS areas in England and Wales are being inspected over a three year cycle, region by region. We hope 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:
  - Assessment and sentence planning carried out on offenders
  - Implementation of interventions delivered to offenders
  - Achievement and monitoring of outcomes
  - Leadership and strategic management.Particular attention will be given to RoH issues – it is performance against these measures which will determine whether a re-inspection is carried out.
- 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 one week. The area is asked to identify a random sample of 100 offenders (more in the largest areas) who have been under supervision for approximately six months. We then ensure that there is a minimum number of the following types of cases: high/very high RoH; PPOs; approved premises residents; statutory victim contact; black and minority ethnic offenders. The cases are drawn from both community orders and licences.

#### **Methodology**

- During the inspection we examine the file and carry out an in-depth interview with the offender manager. We also hold focus groups with offenders, victims, keyworkers and case administrators. We send questionnaires to offenders and victims whose cases arise in the sample and to a selection of those involved in sentencing.
- We interview senior and middle managers, Board members of the probation area, strategic partners and managers in a custodial setting. For the prison meeting we are joined by a colleague inspector from HMI Prisons.
- Inspection of about a third of the cases in the sample is carried out by area assessors, 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.

#### **Publication arrangements**

- Summary verbal feedback is given to the area at the end of the inspection week. A draft report is sent to the area for comment four to six weeks later. Publication follows approximately 12 weeks after inspection.

## APPENDIX 3

### Scoring Approach

This describes the methodology for assigning the scores to each of the general criteria, to sections 1 to 3 and to the “Risk of Harm Thread”. A fuller detailed description is on HMI Probation’s website at <http://inspectorates.homeoffice.gov.uk/hmiprobation>

For each of the *general criteria in sections 1 to 3* – i.e. those sections based on the scrutiny of the case sample – that is:

#### Section 1: Assessment and sentence planning

- 1.1 Preparing for sentence
- 1.2 Assessment of RoH
- 1.3 Assessment of likelihood of reoffending
- 1.4 Assessment of offender engagement
- 1.5 Sentence Planning

#### Section 2: Implementation of interventions

- 2.1 Protecting the Public
- 2.2 Victims
- 2.3 Promoting compliance
- 2.4 Delivering interventions
- 2.5 Diversity needs

#### Section 3: Achievement and monitoring of outcomes

- 3.1 Interventions are delivered with the desired outcomes
- 3.2 Sustainability of progress

The score is based on an average, across each of the questions in the Offender Management Tool for that criterion, of the proportion of relevant cases in the sample where the work assessed by that question was judged sufficient (‘above the line’). (In the calculation, the results for the individual questions and for the summary question are weighted 80/20. Further details are given in the description on the website.)

The *score for each of sections 1 to 3* is then calculated as the average of the scores for the component general criteria.

The *score for the “Risk of Harm Thread”* is calculated as an average, over all the questions in the Offender Management Tool in sections 1 and 2 relating to Risk of Harm, of the proportion of relevant cases where work was judged ‘above the line’.

For *each of the general criteria in section 4*, that is:

#### Section 4: Leadership and strategic management

- 4.1 Leadership and planning
- 4.2 Performance against national and regional targets
- 4.3 Resource allocation
- 4.4 Workforce planning and development
- 4.5 Review and evaluation
- 4.6 Commissioning of services

a score of either **well met**, **satisfactorily met**, **partly met**, or **not met** is assigned on the basis of the performance across the specific criteria which make up that criterion. (Details are given in the description on the website.)

## **APPENDIX 4**

### **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 Objectives**

HMI Probation contributes primarily to the achievement of Home Office Objective II:

- more offenders are caught, punished and stop offending, and victims are better supported
- and to the requirement to ensure that custodial and community sentences are more effective at stopping offending. We also contribute to the achievement of Objective III through scrutiny of work to address drugs and other substance misuse, and to other relevant criminal justice system and children's services objectives.

#### **Role**

- Report to the Home Secretary on the work and performance of the National Probation Service and Youth Offending Teams, particularly on the effectiveness of work with individual offenders, children and young people aimed at reducing reoffending and protecting the public
- In this connection, and in association with HM Inspectorate of Prisons, to report on the effectiveness of offender management under the auspices of the National Offender Management Service as it develops
- Contribute to improved performance in the National Probation Service, the National Offender Management Service and Youth Offending Teams
- Contribute to sound policy and effective service delivery by providing advice and disseminating good practice, based on inspection findings, to Ministers, Home Office staff, the Youth Justice Board, probation boards/areas and Youth Offending Teams
- Promote actively race equality and wider diversity issues in the National Probation Service, the National Offender Management Service and Youth Offending Teams
- Contribute to the overall effectiveness of the criminal justice system, particularly through joint work with other criminal justice and Government inspectorates.

#### **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

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:

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