



OFFENDER
MANAGEMENT
INSPECTION
INSPECTION

A report on Offender Management in
Hampshire

An inspection led by
HM Inspectorate of Probation

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FOREWORD

The message of this inspection in relation to offender management in Hampshire is of the need to do things well more often – to strive for greater consistency, despite the challenge of constrained resources. Hampshire Probation Area exhibited a mixed picture of practice, with some shortcomings alongside pockets of good practice, which had not spread sufficiently.

Offender management was not yet consolidated in the area and better arrangements were needed to optimise the benefits of prison and probation working closely together. Risk of Harm work needed to be undertaken ever more diligently and offender managers needed to give more attention to sentence planning. Practice relating to victim safety and victim awareness fell short. Whilst the area was undertaking small pieces of evaluation work, a vision for offender management that was outcome focused was not yet systematised and embedded in strategy. Staff were being supervised regularly and to a high standard and this was an encouraging underpinning strength which left the area well-placed to improve its practice further.

Managers and Board alike gave due attention to the targets set for them and to general performance issues. We found them receptive to the need to overlay their work to date with a commitment to the pursuit of quality.

ANDREW BRIDGES

HM Chief Inspector of Probation

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LIST OF ABBREVIATIONS/ACRONYMS

ART	Aggression Replacement Training
ATR	Alcohol Treatment Requirement
CDRP	Crime and Disorder Reduction Partnership
CRI	Crime Reduction Initiative
DAT	Drug Action Team
DAAT	Drug and Alcohol Action Team
DRR	Drug rehabilitation requirement
EFQM	European Foundation for Quality Management
ESI	Effective Supervision Inspection
ESF	European Social Fund
ETE	Employment, training and education
ETS	Enhanced Thinking Skills
FDR	Fast delivery report
HMI Probation	Her Majesty's Inspectorate of Probation
HR	Human resources
IDAP	Integrated Domestic Abuse Programme
IiP	Investor in People
IPPF	Integrated Probation Performance Framework
LAA	Local Area Agreement
LCJB	Local Criminal Justice Board
LSC	Learning and Skills Council
MAPPA	Multi-Agency Public Protection Arrangements
NOMS	National Offender Management Service
OASys/eOASys	Offender Assessment System/electronic OASys
OGRS2	Offender Group Reconviction Score2
OLASS	Offender Learning and Skills Sector
OMI	Offender Management Inspection
OMU	Offender Management Unit
OSAP	Offender Substance Abuse Programme
PCT	Primary Care Trust
PPO	Prolific and other priority offender
PSO	Probation service officer
PSR	Pre-sentence report
REM	Race and ethnic monitoring
RoH	Risk of Harm
ROM	Regional offender manager
RoSH	Risk of Serious Harm
SDR	Standard delivery report
SFO	Serious Further Offence
SLA	Service Level Agreement
SOTP	Sex Offender Treatment Programme
SPO	Senior probation Officer
TPO	Trainee probation officer
ViSOR	Violent and Sexual Offender Register
YOT	Youth Offending Team

SUMMARY

Assessment and Sentence Planning

While court reports were of a sufficient quality overall, further attention was needed to include appropriate victim information and an outline plan. Likelihood of reoffending was being assessed on time and there was a good focus on the positive or protective factors in place for the offender. The quality of the likelihood of reoffending assessments needed improving as not all the offending related needs were being comprehensively explored. A further area for attention was in the evidencing of factors identified as linked to offending.

The assessment and planning for offender engagement were important in achieving positive outcomes and the area needed to improve consistency in this. Whilst some practitioners were identifying positive and protective factors alongside paying attention to diversity needs and the methods most likely to be effective there were other cases that lacked this attention.

The area had implemented the offender management model and almost all offenders had been allocated to the correct tier. However, sentence planning was an area in need of significant improvement. The quality of sentence plans was lacking in several respects and it was not given a high enough priority at the start of the sentence, including a lack of offender involvement in the process.

Implementation of Interventions

As with the initial sentence plan, reviews required urgent attention in terms of quality. Whilst three-quarters were reviewed on time, quality was lacking. A large number of reviews failed to set new objectives and milestones that built on progress since the initial plan and again the offenders' involvement in the review was not achieved. Plans and reviews were being undertaken as an administrative task rather than as a way of driving the work with the offender, setting realistic and achievable goals with timescales that the offender could have owned and aimed to achieve.

The area had a good focus on containment, compliance and enforcement. Offenders were offered a timely and full induction to their order, provided with a frequency of appointments that conformed to national standards and facilitated the requirements of the sentence and were given clear information about the penalties of a failure to attend. Attendance was closely monitored and judgements about reasons for absence were appropriate. Timely and clear enforcement action was taken by offender managers.

Further attention needed to be given to using constructive interventions during supervision requirements to ensure that the offender's behaviour was adequately challenged. There was a lack of structured and focused offending behaviour work by offender managers. The focus of supervision appeared to emphasise compliance and enforcement but to the detriment of offending behaviour work. The area's policy on working with offenders convicted of a domestic violence offence who were not accessing the accredited programme required urgent review to avoid a significant gap in risk management. Similarly the area required a strategic approach to managing those offenders no longer eligible for a general offending behaviour programme following a realignment of resources to the programmes targeting the high Risk of Harm offenders.

Achievement and Monitoring of Outcomes

In 82% of cases there had been no further convictions or cautions. For the vast majority there had been a demonstrable benefit to the community through the completion of unpaid work. However, there were missed opportunities for the recognition and accreditation of skills gained whilst undertaking such work. Allocation of resources followed the Risk of Harm and likelihood of reoffending levels.

Outcomes in terms of changes to risk and needs were difficult to evidence from the case files due to the poor attention given to the rescoring of assessments, evidence gathering and the quality of sentence plan reviews.

Leadership and Strategic Management

The Board and the senior management team maintained a priority focus on the achievement of targets and performance against these. The area continued to struggle to meet the end-to-end enforcement target but had made some progress towards achieving this for staff sickness absence. Whilst this was just one day below the national average, continued improvements were needed to achieve the target of nine days.

The inspection found some inconsistencies in terms of the quality of practice. Staff and managers reported pockets of high workloads that were having a negative impact on this. In addition, the probation area had a complex geography, covering a large number of local authorities and the Isle of Wight. This posed significant budgetary and human resources considerations for the area. Despite this, it had managed to achieve strong strategic links that were spoken about positively during the inspection. There was an impressive range of partnerships, some of which were at the forefront of developments, for example the contract to deliver alcohol treatment requirements and an innovative health project seeking to promote healthier lifestyles for offenders. Strategic contributions to public protection were evident in the functioning of the Multi-Agency Public Protection Arrangements and the joint working between the police and the probation area.

There were significant areas for improvement identified in terms of working arrangements between offender managers in the community and offender supervisors based in prison. The first steps in the implementation of phase three were just being taken, making it difficult to see how the area would achieve timely implementation.

Areas for improvement in terms of the middle managers' team were evident and the area had already commissioned work on this. Staff supervision and appraisal processes were firmly in place and managers were held in high regard by the majority of staff.

Review and evaluation of outcomes were being undertaken on some individual projects but the area lacked strategic direction on this. The area did not routinely utilise the Offender Assessment System to generate local reports on risk, need, interventions and importantly outcomes and effectiveness. Information being communicated to staff in teams tended to be against targets as opposed to outcomes. This lack of attention to outcome evaluation mirrored the practice found at an individual offender manager level.

Risk of Harm

Risk of Harm screening was embedded into the day-to-day practice of offender managers as the first step in public protection. It was being done on time and accurately in the vast majority of cases. Where indicated, a full Risk of Harm analysis was completed; however, the quality of these required urgent attention. The Risk of

Harm assessments needed to draw on other agencies' assessments and contain an analysis rather than purely a description of recent events.

The Risk of Harm classification was accurate in the majority of cases and where it was high or very high this was communicated to all staff involved in the case. Similarly, levels of Multi-Agency Public Protection Arrangements were clearly communicated.

Risk management plans, whilst being structured to the required format, were not comprehensive in the majority of cases. In addition, management oversight of the quality of the risk assessments and plans was not effective and required attention.

Reviews of the Risk of Harm posed by offenders in custody and the community were timely and where recall to prison had been undertaken this was done well and in line with national standards. However, the Risk of Harm assessment was not always reviewed when there was a significant change in circumstances or behaviours.

The quality of the work with victims was mixed and comments from victims interviewed during the course of the inspection demonstrated that whilst some found the service of immense value a couple had experienced further upset as a result.

As a basis for offending behaviour work, victim empathy and consequential thinking skills should have been at the core of all the work delivered to offenders. It was disappointing to find that in almost half of the cases this had not been delivered or achieved.

SUMMARY OF SCORES

Outlined overleaf in Chart 1 are percentage scores for each Offender Management Inspection Criterion and for each of the sections 1-3.

Chart 1: Scoring of sections 1-3:

Offender Management Inspection: Hampshire (November 2007)

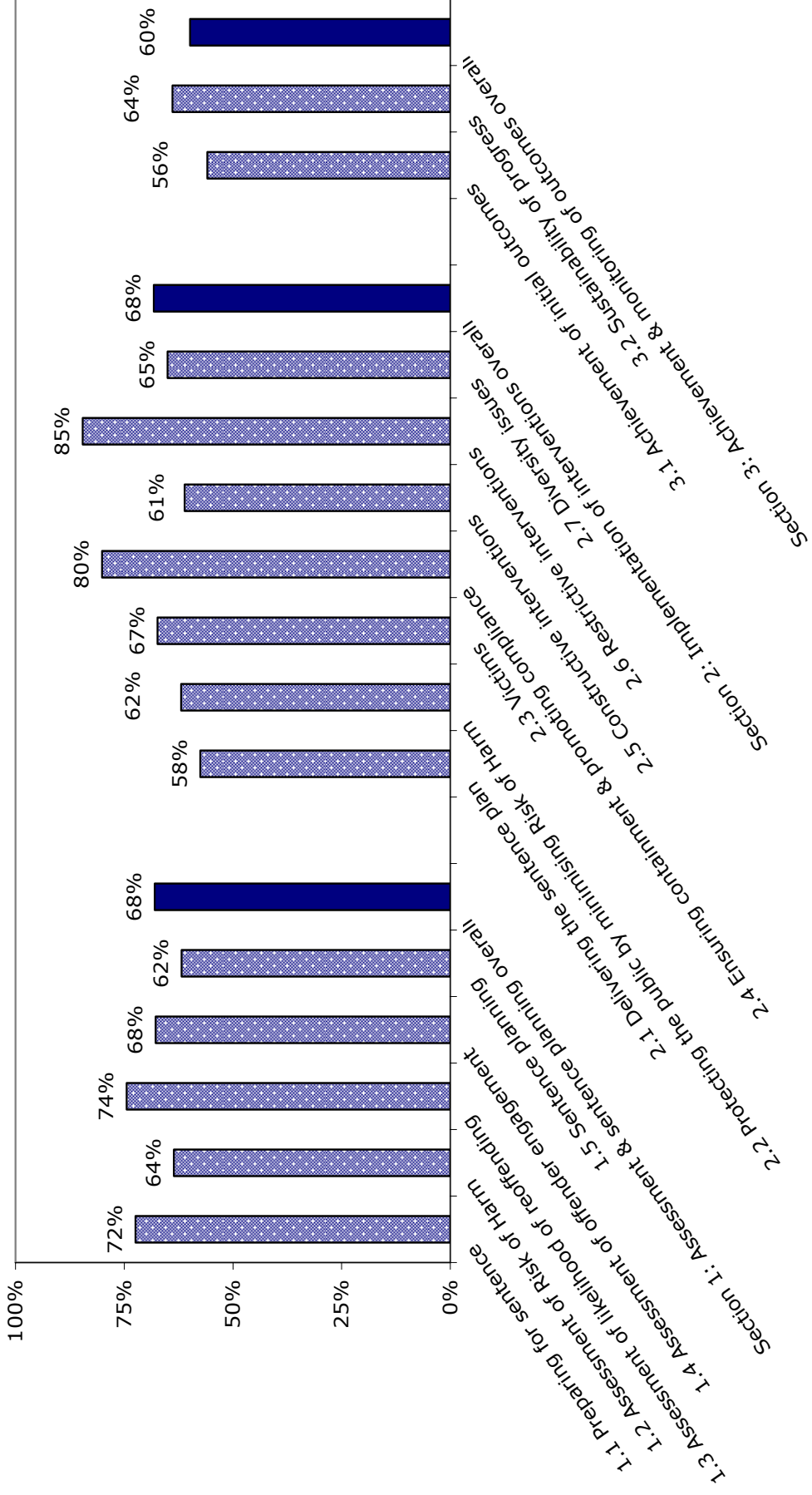


Table 1: Scoring of section 4:

Each of the criteria in the Leadership & Strategic Management section has been graded below, according to the four-point scale described in Appendix 3.

4.1	General Criterion: LEADERSHIP AND PLANNING	Satisfactorily met
4.2	General Criterion: PERFORMANCE AGAINST NATIONAL AND REGIONAL TARGETS	Satisfactorily met
4.3	General Criterion: RESOURCE DEPLOYMENT	Satisfactorily met
4.4	General Criterion: WORKFORCE PLANNING AND DEVELOPMENT	Satisfactorily met
4.5	General Criterion: REVIEW AND EVALUATION	Not met
4.6	General Criterion: COMMISSIONING OF SERVICES	Partly met

Table 2: Risk of Harm Thread

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.

Score for Risk of Harm Thread	69%
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Full details of our *Scoring Approach* are contained in Appendix 3.

We advise readers of reports against attempting to compare scores area by area. Such comparisons are not entirely valid as the sizes of samples vary slightly, as does the profile of cases included in each area's sample. We believe the scoring is best seen as a simple summary of what we have found in an individual probation area and needs to be seen alongside the full findings and recommendations of any particular report.

RECOMMENDATIONS FOR IMPROVEMENT

Improvements are necessary as follows:

1. comprehensive Risk of Harm analyses are completed and reviewed on all occasions where there has been a significant change
2. more consistent attention across the area is given to the assessment of and planning for the inclusion of diversity issues and offender engagement in sentence plans and reviews
3. sentence planning is given the priority it needs at the start of supervision, during reviews and in the evidencing of outcomes
4. risk management plans are comprehensive, reflected in sentence planning and adequately reviewed
5. work aimed at changing offending behaviour is delivered in all relevant cases and is evidenced in case records. A review of the local guidance relating to one-to-one work with domestic violence cases is undertaken and communicated effectively to all staff
6. the priority given to victim safety and promoting victim awareness should be increased
7. there is an increased focus on evaluation of outcomes, in order to achieve fully the sentence objectives, demonstrate change, effectiveness and value for money. This should be supported by the collection, collation and use of service user feedback
8. implementation of phases two and three of the offender management model is given a high priority to ensure the effective management of offenders in and out of custody.

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 Hampshire Probation Area.

SHARING GOOD PRACTICE

Below are examples of good practice we found in Hampshire

Responding to changes in Risk of Harm

OMI Criterion 2.2

Protecting the Public by Minimising Risk of Harm

Mary had a number of violence related convictions triggered by excessive alcohol use and emotional difficulties. She received an order with an ATR. Her attendance was good and she was making progress but four months into the order she experienced further emotional pressures, began drinking again and this spiralled into violent behaviour. Based on this the offender manager reviewed OASys, RoH and the sentence plan. Mary was returned to weekly reporting and the offender manager convened a three-way meeting with Mary and the alcohol treatment agency to identify additional supports. The offender manager's assessment of imminent risk was proved correct as Mary went on to commit a drink drive offence. However, the more frequent reporting and the additional support agreed with the alcohol treatment agency meant that Mary could quickly get herself back on track and within a couple of weeks her behaviour had improved, alcohol use reduced and the risks managed.

Promoting Healthy Lifestyles:

OMI Criterion: 2.5

Constructive Interventions

Hampshire Probation Area had an innovative project that focused on promoting healthy lifestyles for offenders. A small number of ex-offenders provided an extensive range of health related training to support offenders through their orders. Two of the four ex-offenders who had completed the training programme were working towards a formal qualification. The health trainers aimed to promote healthy living and improve the offender's well being. This included help to find doctors, dentists and gym facilities. The project had supported over 100 offenders.

Improving compliance :

OMI Criterion: 2.7

Diversity Issues

Matt was a 36 year old black male who had been made the subject of a community order with supervision, unpaid work and attendance on the ETS programme. He had a complex history including previously being a victim of a racially motivated offence. The offender manager completed the sentence plan with Matt and they explored the impact that the racially motivated offence and other experiences of racism had had on him. In planning for attendance on the offending behaviour programme the offender manager and the tutors worked closely together to ensure that Matt would not be subjected to further racism from other group members.

Shortly after starting the group, the tutors became aware of Matt using racist attitudes and comments against himself. The tutors and offender manager carefully planned how to challenge this behaviour. In addition, the offender manager maintained weekly contact with Matt to ensure that he could practise putting into place the new skills he was learning, in order to change his attitudes about himself and how he thought other people saw him.

Responding to individual needs:

OMI Criterion: 2.7

Diversity Issues

An offender reported that on the first day of attending for unpaid work he was impressed that the supervisor had information from his OASys assessment that indicated that he was a single parent of a child with a disability and had health problems of his own. The unpaid work staff put plans in place to manage these issues. He was allowed to leave his mobile phone on during unpaid work sessions so that he was easily contactable by the school and was provided with flexible working hours so that he could transport his child to and from school each day. Unpaid work supervisors were fully aware of the offender's own health issues and provided good support during each work session to accommodate these issues.

Relapse Prevention:

OMI Criterion: 2.7

Constructive Interventions

Hampshire Probation Area had secured national funding to deliver the Circles of Support and Accountability project that provided relapse prevention work to men who had sexually offended. This important aspect of the treatment of sex offenders was well developed and they had a sufficient number of volunteers working on the project. The project was further supported by having a SPO seconded as the project coordinator and providing the volunteers with access to counselling support to enable them to review their work and role.

Developing the skills of managers:

OMI Criterion: 4.4

Workforce Planning and Development

One of the area managers delivered supervision to the middle managers through a combination of group and individual sessions.

The content of the group sessions was a mix of training and problem solving and the topics were directly influenced by staff needs. Examples of the group sessions included: dealing with difficult behaviour; change management and leadership styles. In one session, the staff assessed their own leadership style and gave feedback to each other to promote a positive leadership culture.

Feedback had been positive and managers found that they learnt from each other even though they were in different disciplines.

SERVICE USERS' PERSPECTIVE

Offenders

A total of 23 offenders were interviewed during the inspection week. Seven of those were attending an accredited programme (IDAP). Unfortunately the planned interview with offenders on the ART programme was not possible due to the non-attendance by the offenders. We also interviewed 12 offenders who were undertaking unpaid work and four who were resident in an approved premises. In addition, 11 offenders returned completed questionnaires.

The majority of offenders undertaking unpaid work said they did not have meaningful involvement in their sentence planning process. Most said that whilst they had been asked about their skills and abilities this did not seem to have directly affected what type of work they were allocated to. However, one offender was a trained chef and he said that the unpaid work staff responded to this by finding him an individual placement as a chef with Age Concern.

The attention to the offenders' skill development during unpaid work was mixed. About half of the offenders said that the work undertaken had not taught them new skills while three felt that it had. One offender said that she had used her new skills to re-decorate parts of her mother's house to "say sorry for the hassle" she had caused by her offending.

The vast majority reported receiving an initial appointment from court and that the appointment was within a few days. All of those interviewed were clear about attendance, rules and what would happen should they fail to attend. The majority felt that enforcement practice was clear, firm and fair.

Some of the offenders said they were not aware that 20% of their hours could be used for ETE interventions.

One offender reported being 'stood down' twice and said the second occasion was frustrating as he had arrived for work only to be sent home as there were not enough places.

There were mixed views on outcomes. Approximately half could see some benefit including experiencing it as a deterrent. However, the other half did not report having experienced any benefits from doing the work.

Not all of the seven IDAP participants were present for the full hour so the following comments are based on the numbers who responded to each aspect of our questions. Three offenders were asked how long they had waited to start the group and they said that they had had quite a quick start, having waited between six and eight weeks. This may have represented recent improvements the probation area had made to waiting times for programmes.

Three commented on pre-programme work and could recall having done this with their offender manager. They had also had a three-way meeting prior to starting the group. None of the three could recall being involved in their sentence planning process. They reported monthly contact with their offender manager. However, they said that these sessions did not involve structured work but were more of a check on 'how things were going.'

All seven offenders said they had done victim awareness work whilst on IDAP. One reported that "it took a few modules for it to sink in but it was about understanding

how your actions affected others." Others said that the work on IDAP enabled them to think about approaching a situation before it arose and practising different ways to respond. All reported thinking differently and that the programme had made them realise the impact their behaviour had had on others. Those who were employed felt it was good to have an evening group alongside daytime and weekend groups as this gave participants an opportunity to accommodate work commitments.

The lack of involvement by offenders in sentence planning reported by those on unpaid work and IDAP was repeated by two of the four offenders in the approved premises. They also said that, other than in prison, victim awareness work had not been completed with them. They also were unable to identify any formal offending behaviour groups available in the approved premises. They all reported having an induction session on arrival or shortly after and that the rules and requirements were clearly explained. All four felt the rules were firmly and fairly enforced.

Of the 11 offenders who replied by questionnaire, 82% said the rules were fully explained. The most commonly reported areas of help were in relation to attitudes, alcohol/drug use and thinking skills. 73% of offenders said that the work had made them think about their offending and 80% said they were less likely to reoffend. Only 45% were clear that the work had made them think about victims of crime. This theme was supported by the case inspection data.

Victims

Four victims were interviewed and five completed a questionnaire. The responses were extremely varied, ranging from one victim feeling that the probation victim liaison unit *"could not have done more,"* to two victims who were negative about the experience and questioned whether the services were effective.

Not all of the victims had been consulted about conditions of release and one had not been told the offender had been released early. None of the victims who were asked about MAPPA knew about it.

Two of those interviewed reported having to attend the probation office for their initial contact but the reason behind this was unclear. Three felt that the services did not adequately focus on their needs. One gave an example of not being signposted to community organisations that could have offered her more support and two others said that they were very upset following contacts with the service. On the reverse, one victim said that the victim liaison officer always responded promptly to her concerns and she was able to give concrete examples of this support.

Of those who had completed a questionnaire the majority felt the initial letter was easy to understand and the purpose of contact was clear. There were mixed opinions about the clarity of purpose in relation to the face to face meeting. Almost all felt they had been given enough information about the sentence and planned release of the offender. However, only two of four had had the opportunity to influence release conditions.

Courts

Seventeen sentencers returned completed questionnaires. Fifteen were satisfied with the quality of FDRs and fourteen were satisfied with the quality of SDRs. Almost half reported that court reports were not always made available within the required timescale; the majority reported that staff sickness was the most common cause. In addition, they reported that on occasions there had been a lack of staff in court to

complete a FDR. Five of the sentencers felt that there was not sufficient clarity about the type of report to request.

The majority of sentencers felt that the probation staff in court had sufficient knowledge and skills. One reported that *"all of the staff I have had contact with provided a professional service with excellent knowledge."* Almost all respondents who commented on the probation area in terms of leadership said that managers modelled positive and professional behaviour. 88% felt that the probation area engaged effectively with the LCJB.

Arrangements for enforcement required improvements from the point of view of seven of the sentencers. Furthermore, seven said that they were not aware of 'fast track' enforcement arrangements for high and very high RoH offenders.

Ten sentencers said that they did not receive enough information about current probation policy and practice. Only two of 14 replies said that they were aware of the probation area's monitoring of concordance and completion rates. The others said they were not aware of this happening, suggesting a lack of communication between the probation area and the sentencers on these important outcomes.

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.

72%

Strengths:

- (a) Within the sample of community orders, 83% had had a PSR prepared. In 94% of these the seriousness level indicated by the court was taken into account.
- (b) 86% of reports were of the appropriate type (i.e. SDR or FDR) and 95% of those were completed using the nationally approved format. In 93% of cases the report was prepared within the timescale set by the court.

Where the report had been completed using the eOASys template, 72% were judged to have been improved by its use.
- (c) Court reports were of sufficient quality in some important aspects; 81% were judged to be objective, impartial and free from discriminatory language or stereotype and 88% made a clear proposal for sentence. Of the reports that proposed a community order, the court followed this in 86%. However, there were some specific areas for improvement relating to report quality that are detailed below.
- (d) The four reports completed on PPOs clearly outlined the seriousness of the offence and outlined the likelihood of reoffending.

Areas for Improvement:

- (a) Certain factors relating to the quality of court reports required further improvement; 23% were not based on the appropriate risk and needs assessment, 35% were not balanced, verified and factually accurate and 42% were not concise. Less than half (48%) included appropriate victim information and 59% lacked an appropriate outline plan.
- (b) Two of the four PSRs prepared on PPOs contained a clear and proportionate proposal and only one avoided labelling the offender as a PPO.
- (c) The risk of self-harm was not clearly recorded in 29% of court reports where this was an issue. For offenders in custody the concerns about self-harm were immediately communicated to prison staff in 67% of cases.

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.

64%

Strengths:

- (a) In 97% of community and custodial cases there had been a RoH screening completed and in 85% of cases this was completed at the start of sentence. For licence cases, the RoH screening was completed on release in 95% of cases. The RoH screening was accurate in 87% of all cases.
- (b) A full RoH analysis was completed in 93% of cases that required one.
- (c) In 95% of cases the RoH classification was clear and in 88% of cases, accurate. Where there was a high or very high RoH classification this was communicated to all staff involved in 84% of cases.

Twenty-nine cases had been managed within MAPPA. In 90% of these the MAPPA level was clearly communicated to all staff involved in the case.

Strategic partners and keyworkers were very positive about the timeliness and quality of the communication in relation to the risks presented.
- (d) The risk management plan was structured according to the required format in 76% of community orders and in 89% of licence cases.
- (e) A referral had been made to approved premises in six cases and five of these were considered appropriate. Four of the referrals were accepted. In only two cases out of the remaining 97 was it assessed that a referral should have been made.

Areas for Improvement:

- (a) The quality of full RoH analysis was judged to be sufficient in only 45% of cases.

More attention to assessing the range of risks posed by the offender was needed as a significant minority of cases didn't fully assess all aspects, for example risks to staff and prisoners alongside risks to the public, known adults or children.
- (b) The RoH screening and full analysis drew adequately on MAPPA, other agencies' and previous probation/prison/YOT assessments in 58% of cases.

The assessments lacked an analysis of the range of offending behaviour, relying on reporting factual events of the current offence. The scope and features of previous behaviours that could have presented current or future risks were not fully included. In addition,

victim issues were sufficiently covered in only 45% of cases.

- (c) In 71% of high and very high RoH cases the risk management plan was completed within five working days, leaving a significant minority that did not meet the timeliness requirement.
- (d) Risk management plans were not comprehensive in 79% of community cases. For licence cases, 56% were not comprehensive and only 26% were completed prior to release.
- (e) The risk management plans for those cases sentenced to custody showed similar areas for improvement; four were judged to be comprehensive and five out of the ten were completed within the appropriate timescale.
- (f) Effective management involvement in cases with high or very high RoH or child safeguarding concerns was evident in 65% and 67% of cases respectively.

This lack of effective management oversight was evident in the number of insufficient RoH assessments that had been countersigned by SPOs. There were a number of possible reasons why this had happened including the focus on meeting the target for timely completion or perceived lack of time to undertake the role effectively.

Conclusion:

This criterion represents a priority for improvement

1.3 General Criterion: ASSESSMENT OF LIKELIHOOD OF REOFFENDING

Likelihood of reoffending is comprehensively and accurately assessed using OASys as applicable.

74%

Strengths:

- (a) There were 88 cases that had had an OASys score calculated. Of the remaining 21 cases, 18 had had an OGRS2 score. This left only three cases in which neither had been done.
- (b) The assessment of criminogenic factors was completed on time at the start of sentence in 87% of cases.
- (c) The attention given to identifying positive factors in the offender's life was good and was evident in 92% of the assessments. The inspection team saw the inclusion of positive and pro-social factors in the assessments and reviews, alongside the offending related needs.
- (d) The assessment of need was carried out on time for all of the PPO cases.

Areas for Improvement:

- (a) Criminogenic factors were comprehensively assessed in 64% of cases. Weaknesses included a lack of updating of factors or a lack of concrete evidence for the assessed level of need. Assessors did not pay full attention to evidencing all the scores clearly in the OASys text boxes.
- (b) The above shortcoming was replicated in the PPO cases, with only half of the assessments being judged as comprehensive.
- (c) The likelihood of reoffending assessment did not draw on other agencies' assessments or those previously carried out in 34% of cases.

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.**

68%

Strengths:

- (a) A skills for life screening was completed in 80% of cases.
- (b) In the majority of cases (95%) a REM classification had been recorded.

Areas for Improvement:

- (a) A full assessment of basic skills was completed in just 65% of those cases that needed one and it did not provide sufficient information. Providers continued to use the Basic Skills Agency initial assessment that only identified needs relating to low level skills. Most offenders were only offered the opportunity to complete an assessment of either literacy or numeracy; few offenders had the opportunity to identify areas for improvement in both skills.
- (b) More attention to the methods likely to be most effective with each offender was needed. In 38% of cases there was not adequate evidence of this. A similar picture was apparent in relation to assessing the offender's intellectual ability, learning style and capacity to change. This was not taken into account at the earliest opportunity in 36% of cases.
- (c) Diversity needs were actively assessed in 71% of cases, suggesting some room for improvement in relation to the attention given to identifying potentially discriminating or disadvantaging factors.

There were some good examples of planning to minimise the impact of diversity issues (such as more flexible working hours on unpaid work for offenders with childcare responsibilities). However, there was a lack of consistency in putting such plans in place to manage

diversity, in that 33% of cases lacked sufficient evidence of this. This is referred to again in criterion 2.7.

Conclusion:

This criterion represents a priority for improvement.

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.

62%

Strengths:

- (a) Almost all offenders (90%) were allocated to the correct tier within the offender management model and 96% were allocated to an offender manager within the required timescale.
- (b) Sentence planning reflected the sentencing purposes of punish, help, change or control in 81% of cases.
- (c) The vast majority (92%) of initial sentence plans for community orders outlined an appropriate level of contact for each requirement.
- (d) All of the initial sentence plans completed on Tier 3 and 4 cases identified an intervention that aimed to address offending behaviour and 78% of plans identified an intervention that would meet the punitive requirement of the sentence.
- (e) There was evidence in 89% of cases that steps had been taken to ensure the offender understood the requirements of the sentence and, in 90%, evidence that they fully understood the penalties of breach.

Areas for Improvement:

- (a) We would expect that the quality of sentence planning for Tier 4 cases would be consistently high. The inspection data showed that in 77% of such cases sentence planning was judged to be insufficient compared to 50% of planning for Tier 3 cases.
- (b) All cases had an initial sentence plan; however, it was not completed on time in 38% of cases, and in 51% the roles and liaison responsibilities of all involved in prison and the community were not adequately defined.
- (c) There needed to be greater consideration of the use of restrictive requirements, designed to minimise RoH. For community and licence cases, 35% of plans failed to include restrictive requirements, for example a curfew or prohibited activity.
- (d) Initial sentence planning was not given a high enough priority in managing the offender and the order. It gave a clear shape to

supervision in 56% of cases inspected, focused on achievable change in 56% and set relevant goals for the offender in 50%. It was of concern that in 13 cases the initial sentence plan was judged as failing to demonstrate any of these important features.

- (e) Sequencing and timing of requirements was not evident in sentence planning in 35% of cases. It was not clear in 48% of plans who would deliver the interventions. The RoH posed by the offender was outlined in 40%. With regard to the latter area for improvement, a recurring theme was the lack of cross-referencing to the risk management plan or MAPPA action plans. The initial plan failed to draw on other relevant plans in 54% of cases. Other plans that could have been included were the DRR care plan or the ATR plan.
- (f) In four out of the ten custody cases the plan failed to clearly state which elements would be delivered in custody and which in the community. This finding perhaps reflected the relatively late implementation of phase two of the offender management model.
- (g) Interventions to promote community reintegration were evident in 57% of plans and those aimed at reducing or containing the RoH were evident in 54%.
- (h) Plans were sensitive to diversity issues in 47% of cases. This mirrored the area for improvement in terms of actively assessing diversity issues covered by criterion 1.4d.
- (i) In line with Hampshire Probation Area's review of the implementation of the offender management model only 65% of cases showed that the offender had had the opportunity to be actively involved in the planning process. This finding was reinforced by the majority of offenders interviewed during the inspection week and those who replied to our questionnaire.

Conclusion:

This criterion represents an urgent 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.

58%

Strengths:

- (a) Work in the community, for example, employment or substance misuse, built on work started in custody in 79% of cases.
- (b) Attention to the preparation of offenders for interventions was evident in 80% of cases. One example of this was the area policy of holding a three-way meeting between the offender, offender manager and programme tutor prior to a programme start. This had been implemented as a result of data analysis presented in the diversity report produced by the area. It aimed to reduce the anxieties or apprehensions of the offenders joining a group.
- (c) The offender manager demonstrated commitment to their work with the offender in 75% of cases and in 69% they had motivated and supported the offender throughout.
- (d) There was one report prepared on an offender while in custody. This was judged to be clear and thorough. In addition, it incorporated an accurate RoH assessment and contributed to decision-making processes within the required timescale.
- (e) 75% of community order cases had had a review of the sentence plan within 16 weeks of the start of the order as required.
- (f) At the time of the inspection, sentence requirements had been fully implemented in 71% of cases.
- (g) In three out of five cases transferred into the Hampshire Probation Area, there was a current and complete OASys provided by the previous area and the first appointment in Hampshire was made within five working days of notification.
- (h) Six offenders had been moved whilst in custody and in five of these cases this was communicated promptly to the offender manager.

Areas for Improvement:

- (a) The quality of sentence plan reviews required further attention as work with the offender flowed from it in only 59% of cases, new objectives and milestones gave a clear shape to the sentence in 47% and continuing ownership by the offender was sought in 39%.

Of concern were the 29 reviews that did not reflect any of the above characteristics. The duplicating of reviews without updating the objectives and milestones was a recurring theme.
- (b) Evidence of attention to sequencing the delivery of interventions according to RoH and likelihood of reoffending was sufficient in 69%

of cases.

- (c) Whilst attention was paid to preparing offenders for interventions, arrangements for reinforcing newly acquired skills after completion were less well developed. This was evident in 65% of cases.
- (d) Good communication between the offender manager and other workers was evidenced in 75% of cases. However, good communication between all staff and the offender was evident in 65% and evidence that the offender manager oversaw and coordinated the input of all workers was evident in 66%.

This supported the finding from meetings with staff that the offender management model needed further embedding; this particularly applied to the crucial role the offender manager played in driving the sentence plan by overseeing and coordinating the input of all workers.

- (e) Offender managers failed to reinforce positive behaviour in 55% of cases.
- (f) The reviews failed to incorporate other plans, for example, MAPPA action plans and risk management plans in 56% of cases. This replicated the weakness found at the initial sentence planning stage.
- (g) The work carried out between prison staff and offender managers in preparation for release required improvement. In only 38% of cases was it judged to be positive, 36% proactive and 52% timely. In 17 cases, work between prison and probation in preparation for release was not positive, proactive or timely.
- (h) In only one of the five cases transferred into the Hampshire Probation Area was a home visit undertaken within ten working days of notification.
- (i) For five out of six offenders in custody the move between establishments was not a planned move consistent with the sentence plan.

Conclusion:

This criterion represents an urgent 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.

62%

Strengths:

- (a) The RoH had been reviewed by the 16 week stage in 89% of cases and was completed on time for all cases that had reached four months after that. All seven custody cases that had served 12 months or more had had the RoH reviewed.
- (b) Ongoing planning to address the RoH to children was evident in

82% of relevant cases.

- (c) Contributions to MAPPA by offender managers and other relevant staff were effective in 85% of cases. Offender managers reported good involvement in MAAPA meetings.
- (d) Three offenders had been recalled following release due to RoH issues. For each case this formed an appropriate part of the risk management process and recall was actioned properly.

In two out of the three cases, there was evidence of a clear explanation given to the offender for their reimprisonment and efforts made to re-engage them.

- (e) Changes in risk and other acute factors were identified swiftly in 85% of cases.
- (f) For custody cases, three out of four had been reviewed following a significant change and three out of four in preparation for release.

Areas for Improvement:

- (a) A third of RoH assessments on community and licence cases had not been reviewed following a significant change. This meant that the RoH assessment was not a live document that accurately captured the current and imminent risks.
- (b) In 32% of cases there was a lack of planning to address the RoH to the public, or RoH to a known adult in 39%. An ongoing plan to manage the RoH to staff was evident in only two of nine relevant cases.
- (c) For custody cases, the practice in terms of the offender manager and offender supervisor engaging with internal risk management processes was mixed, with five providing adequate evidence and five not.
- (d) In 11 out of 29 MAPPA cases there were concerns that the arrangements had not been used effectively. This may have been caused by the lack of a robust referral process. One area for improvement reported during the inspection week was the need for a centralised process to oversee the appropriateness and quality of referrals. The lack of this may have resulted in some inappropriate referrals.
- (e) Changes in RoH factors were not anticipated in 30% of applicable cases and they were not acted upon appropriately in 41%.
- (f) Staff reported that they were not actively encouraged to use home visits as a means of managing RoH to others. This was supported by the finding that (in relation to high and very high RoH cases) a home visit was carried out within ten working days in six out of the 13 cases (46%).

A home visit was carried out appropriately at a later stage in three of the cases and repeated as necessary in two. There were five high or very high RoH offenders for whom no home visit was undertaken. Home visits being used to effectively monitor child safeguarding

concerns were evident in only seven out of eighteen cases.

Conclusion: This criterion represents a priority for improvement.

2.3 General Criterion: VICTIMS
Consistent attention is given to issues concerning victims.

67%

Strengths:

- (a) There was evidence that a written offer of face-to-face contact had been made within 40 working days in 16 out of 18 statutory victim contact cases. Fourteen out of the 18 had been offered information about the criminal justice process.
- (b) Where statutory victim contact had proceeded, the victim had had an opportunity to express views on the licence conditions in 13 out of 14 relevant cases. The victim was informed of release conditions in seven out of eight relevant cases and informed of release information in a timely manner in seven out of nine cases.
- (c) It was pleasing to see that the area had designed offending behaviour materials aimed at increasing the level of victim awareness. The Victim Empathy Module had been adopted by some of the other probation areas in the south-east region.

Areas for Improvement:

- (a) Victim safety (including child victims) was an issue in 59 cases. This was given a high priority in 58% of cases, leaving 25 cases in which the actual or potential victims had not had sufficient attention paid to their safety.
- (b) The prison-based offender supervisors' attention to promoting victim safety in relevant cases was mixed in that this was evident in four out of eight cases.
- (c) There was evidence that victim awareness work had been undertaken with the offender in 51% of cases.

This finding may have been affected by the lack of offending behaviour work targeting offenders convicted of domestic violence offences who were not suitable for IDAP.

It was disappointing to find relatively little evidence of the consistent and area-wide use of the victim empathy module. It was not being used by all offender managers and in a few cases we inspected there was evidence of it being started but not finished.
- (d) In two of four statutory victim contact cases where there had been a parole report the victim had had an opportunity to see it.
- (e) The obstacle reported by the area relating to victim contact work was the late notification of victim contact details by the police witness and victim care units. The victim contact unit had most

difficulty communicating with police witness and victim care units when these were spread over two sites as was the case in Southampton and in the north of the area.

Conclusion:

This criterion represents a priority for improvement.

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) All of the custody cases inspected demonstrated satisfactory arrangements for the offender to be contained in the custodial setting in accordance with the requirements for the restriction of liberty.
- (b) There was evidence of a full and timely induction in custody being offered to the offender in seven out of ten cases. For offenders on licence or sentenced to a community order there was evidence of this in 91% of cases.
- (c) The frequency of appointments offered conformed to national standards in 90% of cases and to the requirements of the sentence in 89%.

The frequency of appointments met the RoH considerations in 76% and supported the achievement of sentence plan objectives in 77% of cases.
- (d) The frequency of unpaid work sessions offered conformed to national standards and the requirements of the sentence in 86% of cases.
- (e) Unpaid work placements, in 82% of cases, were of benefit to the community. They were demanding in 79% and matched to the offender in 75%. The majority of offenders interviewed did not recall attention being paid to matching their skills to the type of work offered; however, there were a couple of good examples of this. This would suggest inconsistent attention to this important issue.

The area had a diverse range of unpaid work placements that it was using or had previously used. The Carnegie Library project, completed in early 2007, had involved offenders creating a sensory garden for members of the public who had visual and/or mobility problems.

The Vedic Society Hindu Temple project was a current project, where offenders had completed over 800 hours of work to clear the ground in preparation for the installation of a peace garden.

- (f) PPOs were offered a reporting pattern that supported all elements of the sentence in eight out of 12 cases.
- (g) The offender manager monitored attendance across all interventions in 95% of licence and community cases and took effective action to ensure compliance in 90%. Offender managers made consistent and appropriate judgements about absences in 88%.
- (h) The exclusion or curfew requirement was appropriately enforced with effective liaison with the electronic monitoring provider in 80% of cases.
- (i) Breach action was instigated within the required timescale in 90% of relevant cases and resolved within the required timescale in 76%. Issues around the timely resolution of breach continued to be an area for discussion between the probation area and the courts. Not all sentencers were aware of the arrangements for 'fast track' enforcement.
- (j) The quality of the case record was good. 93% of files were well organised, with clear REM details in 86% and they contained all relevant documentation in 77%. Recording of information was clear and timely in 90% of cases.

Areas for Improvement:

- (a) For licence cases, the contact and liaison undertaken pre-release was not sufficient in 58% (25) of cases. This was felt to hinder effective offender management in the community in all but one of those cases.
- (b) Five of the 12 PPOs did not receive an enhanced level of contact. It was assessed that for three PPOs there was neither an enhanced level of contact nor a reporting pattern that supported all elements of the sentence.
- (c) Case recording was not detailed and comprehensive enough in 32% of cases. The main area for improvement was the recording of all the work undertaken, outcomes of the interventions provided and progress made by the offender as a result of this.

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.

61%

Strengths:

- (a) Sufficient work and resources had been directed at community reintegration issues in 77% of cases. This could have been improved by increasing the attendance rates of offenders accessing ETE provision. Data at the time of the inspection showed that half of

offenders invited to pre-work placement sessions and induction actually attended and attendance in classes visited by the inspection team was low.

- (b) The offender manager prepared reports and attended DRR review hearings in line with the national standard and court requirements in five out of seven cases.
- (c) The four offenders who had been resident in one of the approved premises for over six weeks experienced a satisfactory range of constructive interventions. For example, the Grange had good opportunities to develop confidence and motivation through programmes aimed at literacy, numeracy and vocational skills in addition to a return to work programme.

Areas for Improvement:

- (a) In 46% of cases offenders were not encouraged to accept responsibility for their offending and its consequences through the use of constructive interventions. For community cases with a supervision requirement and those on licence, there was a lack of evidence that offender managers delivered, or ensured the delivery of, a structured and meaningful package of offending behaviour work.
- (b) Despite a good range of basic skills provision, arrangements to deliver such an intervention to offenders with an identified need was in place in only 56% of relevant cases.
- (c) For nine out of 16 accredited programme cases the nature and timing of the programme work was consistent with the sentence plan objectives. This left seven cases in which access to the groupwork element was not sufficiently timely.

Whilst the area provided evidence of some improvement in the length of time offenders waited to start a group this remained an area for further improvement recognised by the keyworkers interviewed during the inspection week.

- (d) Action, following reception into custody, to preserve employment, accommodation and family ties was evident in three out of eight applicable cases. Supporting and protective factors were evident in four out of nine cases. Evidence that the offender was able to preserve positive community links and resources was provided in three out of seven cases.
- (e) Whilst offenders in approved premises were accessing a range of interventions these did not always form part of the wider sentence plan overseen by the offender manager.

Conclusion:

This criterion represents a priority for improvement.

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

85%

Strengths:

- (a) Restrictive interventions had been monitored fully in 91% of cases. The approved premises were being used effectively as a restrictive intervention in the four relevant cases.
- (b) Licence requirements were comprehensive in 88% of cases and judged to be necessary in all cases. The licence requirements were proportionate to the RoH in 92%, to the likelihood of reoffending in 88% and to the protection of victims in 77% of cases.
- (c) Of the six PPOs with drug related needs there was an additional licence condition made in five of these.

Area for Improvement:

- (a) Whilst all reasonable actions were taken to minimise RoH in 76% of cases, that did leave ten cases where more could have been done.

Conclusion:

Performance against this criterion was good.

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

65%

Strengths:

- (a) The approved premises met the diverse needs of the four residents in the sample.
- (b) Offenders had been clearly informed in 91% of cases that discriminatory behaviour would not be tolerated.

Areas for Improvement:

- (a) In 69% of cases, arrangements for interventions took into account the offender's diversity issues. This finding reflected a lack of consistency in diversity practice across the probation area. Whilst in some cases attention was given to the arrangements, in others there needed to be a better focus on such important issues.

For example, one offender manager had been very proactive in managing an offender with a learning disability (set out a clear visual timetable, kept to the same appointment days and times each week and avoided sending letters unless supported by a telephone call). Yet in another case, arrangements for an interpreter had not been made despite concerns about the offender's ability to understand fully what was being said.
- (b) Issues of disability had been appropriately addressed in 69% of cases. Issues of literacy and dyslexia had been appropriately

addressed in 60% of cases. This supported the evidence of inconsistencies in practice.

- (c) Informed consent to being a singleton placement in a mixed setting was evidenced in four out of seven applicable cases.

In 3 cases where a minority offender was placed in a mixed setting there was a lack of evidence of attention to staff composition or other arrangements to support offender engagement.

Conclusion:

This criterion represents a priority for improvement.

3. ACHIEVEMENT AND MONITORING OF OUTCOMES

3.1 General Criterion: ACHIEVEMENT OF INITIAL OUTCOMES

Planned objectives are efficiently achieved.

56%

Strengths:

- (a) There was some evidence of responsiveness by staff where a change in RoH had been identified. In 12 cases this had resulted in an increase in restrictive interventions and a decrease in seven.

Four cases had been increased to a higher level of MAPPA and seven cases were decreased.

One child had been placed on the Child Protection Register as a result of the behaviour of the offender in the case.
- (b) In 19 of the 25 cases that involved domestic violence the offender manager had contacted the police domestic violence unit to confirm if there had been any call outs. However, this left six cases in which this had not been done.
- (c) For 82% of offenders there had been no further cautions or convictions at the time of the inspection.
- (d) 72% of offenders had complied with the requirements of the sentence.
- (e) There had been demonstrable benefits to the community through the offenders undertaking unpaid work in 82% of cases.
- (f) The sentencing purpose of punishment was evidenced in 86% of cases.
- (g) The resources allocated to 82% of the cases were consistent with the offender's RoH and in 86% of cases with the likelihood of reoffending.

Resources were found to be used efficiently in achieving planned objectives in 78% of cases.

Areas for Improvement:

- (a) In 69% of relevant cases there was no clear evidence of an increase in victim awareness on the part of the offender.
- (b) Other than the offenders undertaking unpaid work the range of demonstrable benefits was less well evidenced: 9% had evidence of a reduction in the seriousness of offending; 21% had a reduction in frequency of offending; and 21% showed a reduced threat to victims.

An urgent area for improvement was the attention offender managers gave to collecting evidence of change and incorporating this into OASys and other records. In the inspection sample 40% lacked evidence of any demonstrable benefit. There were missed

opportunities for the area to begin demonstrating value for money and effectiveness.

- (c) In 31% of cases the OASys assessment had not been rescored. Of the 75 that had been rescored, 49% showed no reduction in criminogenic needs.

In respect of the factor linked to offending identified as the highest priority in each case, there was found to be some progress in 40% of cases and no change in 49%.

Thinking and behaviour was the first priority in 34 cases, followed by drug misuse (16 cases), alcohol (13 cases) and relationships (six cases).

- (d) There was evidence of learning and skills having been applied in only 31% of cases.
- (e) There was positive and demonstrable change in attitudes in only 34% and in behaviour in 38% of cases.
- (f) Not all sentencing objectives were evidenced as clearly as the 'punish' objective above. 'Help' was achieved in 68% of the Tier 2, 3 and 4 cases and 'control' achieved in 65% of the Tier 4 cases. Most disappointingly, for Tier 3 and 4 cases the objective of 'change' had been achieved in only 25% of cases.
- (g) Resources allocated were consistent with the offender's PPO status in 67% of cases.

Conclusion:

This criterion represents an urgent 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.

64%

Strengths:

- (a) 85% of cases had had two offender managers or less, reflecting a good level of continuity. Some changes were unavoidable between the pre-sentence and post-sentence stages due to the area's court report writing being allocated solely to probation officers.

Where the offenders had experienced three or more offender managers this had had a detrimental effect in sustaining progress in six of the 16 cases.

- (b) There was evidence that the offender was aware of organisations that could help address criminogenic need in 80% of cases. Attention was given to the longer term community reintegration issues in 70% of cases.

Areas for Improvement:

- (a) Given the previous areas for improvement under sections 1.5 and 2.1, it was not surprising to find that sentence planning had not been given a high priority throughout the sentence in 52% of cases.
- (b) Sufficient action was taken regarding consolidating offender learning and the acquisition of new skills in 62% of cases.

Conclusion:

This criterion represents a priority for improvement.

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.

Satisfactorily met

Strengths:

- (a) The Hampshire Area Business Plan clearly set out the targets from NOMS and incorporated the requirements of the ROM. It included improvements identified in the EFQM and diversity reports as well as workload and sentencing trends and functional business plans.

The Business Plan was cascaded to the wider organisation through the development of team plans using an area-wide template and then communicated onward to staff through appraisal objectives. The link between team plans and appraisal objectives was directed by management in 2007 in order to achieve consistency across the area. The majority of staff (73%) felt well informed about policies and procedures and said that they were communicated in a number of ways, including team meetings and supervision.
- (b) The Service Progress Plan in relation to the SLAs between Hampshire Probation Area and the ROM was reviewed quarterly in order to track progress and take action where necessary.
- (c) There was an impressive range of partnerships with both voluntary and statutory agencies. The recently implemented contract with CRI to provide alcohol treatment was one example of this. There had been 356 requirements made in the first six months of this financial year.
- (d) Seven colleges had contracts with Hampshire LSC for the delivery of literacy and numeracy work. Joint OLASS and ESF funded projects enabled two providers and their subcontractors to deliver ETE training to both employed and unemployed offenders. A separate pathfinder project funded by the ROM supported the provision of information, advice and guidance and employability training for high RoH offenders.
- (e) The area had in place a range of strategies and policies to support effective offender management. There was evidence of some of these being reviewed. For example, the diversity strategy had been reviewed in 2006 and a further review was planned for 2009. However, a more systematic approach to the review of strategies would have further benefited the area.
- (f) There were adequate liaison arrangements with sentencers and 91% of sentencers who completed a questionnaire said that these arrangements were effective. This included regular attendance at the

strategic probation liaison forum and local sentencer liaison including quarterly newsletters and visits by newly-appointed magistrates to probation offices.

One example of communication involved the Chief Officer providing a briefing note for the resident Crown Court judge. This outlined issues facing Hampshire Probation Area, the impact on workloads and proposed potential ways forward. Another example was the ongoing discussions aimed at reducing the use of unpaid work requirements for low RoSH offenders or those for whom a different sentencing outcome would have been more appropriate.

- (g) The probation area had implemented an innovative project in partnership with some of the local PCTs, aimed at promoting healthier lifestyles for offenders. The Health Trainers project was an example of cooperative and productive working that engaged effectively with the local communities. The area was looking to expand this provision in 2008/2009.
- (h) There was evidence of appropriate linkages to local authority strategies, for example a shared PPO target in the LAA in Portsmouth and the recent addition of the Health Trainers project to the LAA in order to sustain this service.

The area was active in terms of implementing and monitoring the seven pathways of the Reducing Reoffending Action Plan.

There was senior or area manager level representation on Supporting People, the YOT Management Board, DAAT and the 14 CDRPs. The strategic partners interviewed during the inspection week spoke very positively of the linkages with Hampshire Probation Area and its managers, emphasising the good working relationship they had developed.

- (i) Further evidence of the probation area working cooperatively and productively with relevant organisations was found in the contract with Portsmouth City Council. For the last five years, a taskforce consisting of offenders serving unpaid work orders had been involved alongside the city council. The project aimed to tackle antisocial behaviour through the cleaning of paths and alleyways and the removal of graffiti. Offenders on unpaid work orders had been involved in several hundred crime and disorder projects amounting to thousands of hours being paid back to local communities.
- (j) Strategic contribution to public protection was a priority for the area. The MAPPA Strategic Management Board (a sub-group of the LCJB) was chaired by one of the probation area directors, the Chief Officer chaired the Offender Management Strategy Group for PPOs and the area was appropriately represented on the four Local Safeguarding Children Boards.

A recent inspection report published by HMI Constabulary found that the involvement of Hampshire Probation Area in MAPPA was good. The probation area had realigned its geographical structures in order to be co-terminous with the police. This meant that one SPO was able to link with each police team.

- (k) Gender, race and diversity equality schemes had been produced, and targets for delivery against these were embedded in the Area Business Plan to ensure that they were given a priority.


All new policies and procedures were assessed for their potential impact on diversity and equality issues.

A Director had lead responsibility for diversity and an advisor had been in post since 2003 to oversee the strategy and work with managers and teams to ensure implementation. The Diversity Forum that previously operated to advise and keep track of progress had been replaced by a Community Engagement Working Group under the new Board. The Disabilities Forum and a Black Staff Support Group met regularly and provided bottom-up information about the impact of the policy. The production of an annual diversity report, alongside other audits and data production, provided measurements of implementation and success of the approach.

- (l) Managers were held in high regard; 86% of staff interviewed reported professional management approaches and 80% said they modelled positive leadership behaviour.
- (m) Hampshire Probation Area had shown itself to be receptive to the findings of regulatory bodies by acting on the findings of the ESI (2004) to seek to improve its performance in relation to the assessment and management of RoH posed by offenders under its supervision. The probation area, in conjunction with Hampshire Police, invited HMI Probation to undertake a review of a SFO committed by Anthony Rice and had developed an action plan in response to the findings contained in the 2006 review report.

Areas for Improvement:

- (a) Both the IiP review and a recent analysis undertaken by external consultants provided evidence of the need for the senior management team in Hampshire Probation Area to be 'more visible' to the wider workforce.
- (b) There was a lack of a formal strategy to manage those offenders no longer suitable for an ETS group following the realignment of programme resources to the higher RoH offenders. Changes to the criteria meant that offenders who would have been suitable under the previous criteria were no longer offered a place despite having the relevant type and level of criminogenic needs. The lack of intensity and varied quality of offending behaviour work provided to these cases presented a gap in the area's approach to offender management.
- (c) Despite liaison arrangements being in place and some improvement evident, the area continued to experience a significant use of multiple requirements by the courts. In 2006/2007, the national average number of requirements for community orders was 1.7 compared to 3.2 in Hampshire. Although this had reduced slightly in the first half of 2007/2008 it still stood at 2.8. This was placing additional demands on the area's limited resources.

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- (d) Strategic partners reported that, to date, the probation area had failed to engage in the 'safeguarding vulnerable adults' agenda.
 - (e) The senior management team acknowledged the lack of an area-wide strategy for gathering service user feedback and the use of this information to inform planning. Whilst there were a few examples of small scale surveys this was not consistently undertaken or fed into the business planning and development process.

In addition, the area did not routinely gather the views of sentencers or victims. The latter was an area requiring attention given some of the comments made during the inspection week and via questionnaires.

4.2 General Criterion: PERFORMANCE AGAINST NATIONAL AND REGIONAL TARGETS
Key performance targets are consistently met, with careful attention to diversity issues throughout.

Satisfactorily met

Summary of results for Hampshire from the NOMS Integrated Probation Performance Framework (IPPF): April-September 2007

IPPF domain	
Public Protection	<i>Passable</i>
Offender Management	<i>Passable</i>
Interventions	<i>Passable</i>
Operational Capability, Resource Use and Strategy	<i>Passable</i>

Area score	<i>Passable</i>
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Detailed results for each metric making up the above domains are at Appendix 1.

Strengths:

- (a) The Board and Chief Officer held the achievement of national targets as a high priority. The Chief Officer had recently restructured the senior management team and taken personal responsibility for performance.

Resources had been allocated in order to meet targets despite a challenging financial context. The Chief Officer and the Board provided evidence of the challenges they faced in that the resources in Hampshire had not kept pace with workload and changes in sentencing: caseloads were 13% higher than in 2005 and there had been a 42% rise in unpaid work hours ordered since 2004 with over 36% more hours being completed.

- (b) In 2006/2007, the area achieved nine out of 13 key targets. Performance in relation to the NOMS weighted scorecard placed the area between 32nd and 34th out of 45 for the third successive year

The IPPF data on the first two quarters of 2007 placed Hampshire's performance across the four domains as 'passable'. Although some of the targets were not being achieved there were indications of improvements. For example, staff sickness absence had reduced from 14.2 days at the end of 2006/2007 to 11 days at the end of September 2007.

This reflected the focus and attention the probation area had given to the implementation of the staff sickness absence policy and the work they had undertaken with middle managers and other staff to bed in the new processes.

- (c) Performance against targets was monitored closely by the Board and senior management team. A monthly performance report was published and made available to all staff and managers via the 'Performance & Quality' database. This reported on the new targets that had been set in the IPPF for 2007/2008. The area also provided details of the cases that had negatively affected performance so that middle managers could hold individual practitioners to account.
- (d) The area provided evidence of attention to diversity, whilst maintaining a focus on targets, for example: the monitoring of completions by race and gender, the analysis of this in the area's annual diversity report and the identification of actions needed to promote equality of access.
- (e) A joint prison and probation assessment of the quality of OASys assessments and RoH analyses had been completed in February 2007. This showed that areas for improvement for probation assessment were risk management and sentence planning.
- (f) Where performance was a concern, 'Improvement Plans' had been established. Leadership on these was allocated to senior managers and progress kept under review through line management and performance reporting.

One example of this was the process review of victim contact. The

recent IPPF report on the first two quarters of 2007 showed an improvement against this target compared to the previous year.

Areas for Improvement:

- (a) The area undertook audits that sampled the quality of OASys and risk management plans. In addition the 'What Makes A Good OASys' checklist was used to check on the quality and timeliness of assessments completed by (probation officer grade) offender managers. However, the inspection found that the day-to-day system of SPOs countersigning assessments was not effective in assuring quality.

The inspection team saw a number of examples of assessments and plans having been countersigned by a manager that were below the quality expected by HMI Probation.

- (b) The area was on track to exceed targets relating to LSC referrals and sustained employment. However, success rates in literacy and numeracy were very low. For example, monitoring data relating to literacy and numeracy provision in one part of the area for 2006/2007 indicated that only 39% of offenders successfully achieved an accredited qualification. The area had not developed plans to improve this.
- (c) Some of the national targets were not achieved in 2006/2007 and this continued to remain an issue. The key challenges were around compliance, end-to-end enforcement and staff sickness absence.

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) Resources were deployed appropriately and there were examples of them being used well to support effective offender management. These included the two jointly funded MAPPA posts and the plans to site probation ViSOR staff within the police unit.
- (b) In line with national guidance the area had undertaken a realignment of the accredited programme resources to target the higher RoSH offenders. This meant that resources followed risk with more resources being allocated to the higher RoSH offenders. The realignment had increased the number of places available on IDAP and SOTP for 2007/2008 and this was set to continue in 2008/2009.
- (c) There was some evidence of resources being used mindfully to support diversity initiatives. There had been an increase in the number of offenders for whom English was not their first language. The strategic management team responded to this by contracting with 'Lingland' for the delivery of area-wide interpreter services. This

contract also included a pilot project for the delivery of English classes in one part of the area. The contract was being monitored and had the potential to be further expanded to provide other supporting interventions.

- (d) The allocation of resources to pre-sentence work was sufficient and the use of stand-down reports had been increased to make more effective use of the existing resources. Small dedicated teams had been allocated to court work in order to support the production of FDRs. Some sentencers reported recent improvements in the availability of FDRs but that staff sickness absence still contributed to ongoing issues.
- (e) The area had in place a workload measurement tool that enabled middle managers to allocate, manage and prioritise workloads. There had been a recent review of the tool in order to further enhance its usefulness. The new model that incorporated phase two of offender management, unpaid work and MAPPA was being piloted in Southampton at the time of the inspection.
- (f) The area was active in securing additional resources from external organisations. Examples of this included the DAT funding to support the delivery of OSAP. The Isle of Wight DAT was also part-funding the ATR worker. The area had also attracted funding from some of the PCTs to develop the Health Trainers project. National funds were being used to deliver the Circles of Support and Accountability project, providing relapse prevention support to high RoH sex offenders. The total income generated from external sources in 2006/2007 was just over £560,000.

Areas for Improvement:

- (a) Further improvements in the timely access to offending behaviour programmes were required to support effective offender management. Whilst improvements had been evidenced, some offenders waited unacceptably long times to start a group. It was of concern that in 2006/2007 some sex offender orders expired prior to the offender being offered a place on a group and that in the north of the area, offenders were waiting, on average, eight months to start the Drink Impaired Drivers' programme.
- (b) The local policy on working with domestic violence cases that were not suitable for IDAP represented a misinterpretation of the national guidance and provided inadequate management of RoH and likelihood of reoffending. The guidance directed offender managers not to deliver one-to-one work aimed at challenging the domestic violence attitudes and behaviour. Whilst the guidance promoted the use of supervision as a restrictive element and encouraged other needs such as alcohol use to be addressed, the lack of direct offending behaviour work in these cases was of serious concern.

The inspection team also found examples of unpaid work being used as a sentencing disposal rather than supervision.

The Domestic Abuse Strategy issued by the probation area in

October 2007 failed to make reference to how the risks and needs of those offenders who were not suitable for IDAP would be managed.

- (c) The area had delayed the implementation of phase two of the offender management model due to the needs of staff to be trained in a number of aspects, for example, chairing sentence plan meetings. There was also a slow start in the implementation of phase three due to the delay in receiving the training materials from NOMS. The first awareness-raising event for managers was not scheduled until December 2007 (with a national start date of early January 2008). The area had further work to do to achieve fully the aims of phase two and the timely implementation of phase three.
- (d) The unpaid work self-assessment identified that a low number of offenders were attending essential skills appointments, as part of their unpaid work hours, or gaining qualifications. The area had not fully utilised the deployment of resources in this respect.
- (e) During periods of peak demand the ETE provision was insufficient. At the time of inspection, ETE staff were supporting less than half of the offenders who were unemployed, and few of the employed offenders with low skills.

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) OMUs had been in place for some time prior to the inspection and the split between offender management and interventions was clear to those involved. Those interviewed did not see the split as a barrier to effective offender management and relationships between the two were positive.

The structure was reported on positively by most; for example, case administrators felt they had closer links with the work of offender managers. However, they identified further work to be done to ensure the smooth and effective running of the offender management model.

All but three offender managers interviewed during the inspection week said they were clear about their proposed role within the offender management model.
- (b) The area had appointed a Director and an advisor in order to improve the strategic leadership of HR issues. The investment had enabled the area to tighten up on some of the processes and take forward the priorities. There had been the development of a three year HR strategy instead of the previous year-on-year approach.
- (c) Information from the appraisal process informed the training plan and the Director of Offender Management met with the training

manager to agree the priorities. There was a detailed and costed training plan for the current financial year.

Appropriate learning opportunities and support were reported by six out of the seven staff who were either TPOs or recently qualified staff.

- (d) Training had taken place for the chairs and minute-takers at MAPPA meetings. The aim was to support the Chair of the meeting and introduce all involved to a new agenda template and database. It also aimed to ensure consistency of MAPPA meetings across Hampshire and gave delegates the opportunity to explore expectations of each other's roles. Attendance by police colleagues brought 'added value' and a total of 120 people had undertaken this training in 2007/2008.
- (e) The area had been subject to a review in relation to the IiP award. The report identified some areas of good practice. This included the appointment of a Director of Human Resources, the review of the management structures and the plans to invest further to raise the effectiveness of middle managers within the area.
- (f) 75% of staff reported that they had formal supervision at least monthly. 87% said that the quality of this was either sufficient or excellent. An example of a creative and positive approach to staff supervision is included earlier in this report as a good practice example.
- (g) The area had waited for the national guidance on the management of staff sickness. The local policy was relatively new and had only been in place since May 2007. The HR manager was proactive in visiting teams to explain the new policy and there had also been presentations at managers' meetings. The new focus was on the management of short-term sickness and the proactive approach needed by middle managers to this. There had been a reduction in staff sickness absence levels in the first quarter of 2007. 97% of staff interviewed said that they were clear about the processes in place to manage staff sickness absence.
- (h) The area had a constructive working dynamic with the unions and the development and implementation of the revised staff sickness policy was an example of this. Negotiation and consultation was undertaken with the unions post-implementation in order to manage the issue of discretion on the part of the manager and this promoted a shared understanding of the approach.
- (i) 97% of those interviewed said they had had an appraisal in the last twelve months and 97% said it was linked to the Area Business Plan.
- (j) 81% of staff interviewed said they had completed a REM form in the last 12 months.

The area had introduced a Disability Equality Scheme to meet statutory duties under the Disability Discrimination Acts of 1995 and 2005 and associated regulations.

All policies underwent an equalities impact assessment to prevent discrimination.

Areas for Improvement

- (a) The IiP review concluded that there was a need to further define role boundaries and competencies of the middle management team. There were some sets of capabilities and competencies already in place but these needed consolidating into one set which could be clearly communicated and understood by the whole workforce.
- (b) The skills of the middle management team in managing performance and quality were recognised as an area for improvement. The area had commissioned a range of training and support to take this forward. Areas for improvement had been identified as pre-management training, a better understanding of the performance framework, 'how to make a difference' and also process improvement.
- (c) It was also clear that the recent training on sentence and risk management planning had only catered for a small number of offender managers to date and this had omitted the PSO grade offender manager. Given the areas for improvement identified in this inspection report surrounding sentence and risk management planning, this training for all offender managers was essential.

40% of offender managers felt that their training and developmental needs were not sufficiently met.
- (d) There was a lack of a system to ensure that those who most needed a specific training event actually attended or ensured that courses were not under-subscribed. There was also a lack of a methodology to ensure application of learning, and a lack of a reporting system to evaluate the effectiveness of the training programmes.

Whilst training events for offending behaviour programmes were well attended the area did not keep accurate records of how many staff still required these.

4.5 General Criterion: REVIEW AND EVALUATION
Outcomes of interventions are assessed and reviewed using available data.

Not met

Strengths:

- (a) The strategic management team had committed resources to a programme of audits throughout 2007/2008 aimed at sampling the quality of practice across key service delivery areas.

The area had undertaken small scale audits of MAPPA cases. Members of the MAPPA Strategic Management Board reviewed cases and interviewed the offender managers in relation to the practice. The audits revealed that some offenders were inappropriately placed at MAPPA Level 2 and further awareness raising events had been delivered to try to rectify this situation.

- (b) The area had undertaken a research project to investigate reasons for attendance, completion and drop-out on the ETS, ART and OSAP programmes. This involved interviewing 120 offenders and yielded useful information that influenced the subsequent targeting strategy for these programmes.

The area led on an evaluation of the Portsmouth Prolific Offender Scheme and this showed positive results with reduced reconviction rates.

- (c) The area had undertaken a Best Value review of unpaid work and this had identified some useful areas for improvement that it had begun to focus on.
- (d) The area had developed and implemented a process for spreading the learning from SFOs. This identified the positives, areas for improvements and how the latter were taken forward. However, less evidence was available in terms of how the area shared learning from complaints from service users.
- (e) The annual diversity report, analysed aspects of service delivery by race and ethnicity and there was evidence of it being used to inform improvements to practice. For example, the differences in the number of completions of women (compared to men) in relation to some of the offending behaviour programmes had led the area to begin developing a strategy for the delivery of services to women offenders.

Areas for Improvement:

- (a) Whilst generating performance management information was a priority for the area, there was little evidence of the same level of priority being given to outcome information that could be used to evidence effectiveness and further improve the quality of services.

The area did not routinely generate reports from its OASys database to profile need, identify priorities or demonstrate change following review. This organisational area for improvement mirrored the lack of attention offender managers had given to individual cases in terms of the quality of initial sentence planning, evidencing change and their reviews.

- (b) The area did not have an outcome focused evaluation strategy. The pockets of evaluation that had been undertaken were small scale, one-off projects that did not focus on the full extent of outcomes such as a change in attitudes following an intervention or changes in the need areas as evidenced by reviews of OASys and sentence plans.

Aggregate information was not widely used to inform practice, for example, the area did not provide evidence of in-house evaluation of reconviction rates, which reflected a wider national issue.

- (c) Whilst the area monitored concordance rates for proposals and sentences and could also report on completion rates there was no evidence of outcome focused data, for example, changes in risks

and needs, being shared with sentencers.

- (d) There was a lack of a strategic approach to the collection and use of offender feedback. For example, the use of the unpaid work exit questionnaire was sporadic and needed to become consistent practice across the county. Evidence of the collection of feedback from other service users and stakeholders and the use of this to improve service delivery was limited.
- (e) In order to manage the workloads of middle managers the area took the decision to stop using the 'What makes a good OASys' checklist with PSO grade offender managers. Whilst SPO countersigning was in place this did not offer sufficiently robust quality assurance and support.

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.

Partly met

Strengths:

- (a) The area had developed a commissioning strategy that built on the needs analysis completed in May 2007. This identified the level of need and the remaining gaps, for example, the availability of appropriate 'move on' accommodation for offenders.
- (b) Hampshire Probation Area had led on the procurement for double night waking cover in approved premises on behalf of the south-east region. The service had been contracted out since August 2007. The area had also commissioned services for high risk offenders in relation to ETE; the Creating Futures project was in place across the area.
- (c) The area was involved, through the Supporting People commissioning body, in the development of a rent bond scheme for offenders. This project aimed to provide offenders with the funds to pay a deposit on accommodation of a rent in advance. It also provided offenders with support in order to maintain a tenancy and live independently. Work had been undertaken for an open competitive tendering process to identify a provider.
- (d) Offenders had access to a range of ETE provision commissioned through OLASS and ESF projects. Courses ranged from two hour drop-in application writing sessions to 20 hour financial budgeting courses. Offenders were provided with information, advice and guidance. The two lead providers, Southampton City Council and Totton College worked well with the probation area to avoid duplication in the programmes they offered.

The quality of ETE provision was judged to be sufficient in 76% of relevant cases and excellent in 4%.
- (e) The partnership policy issued in August 2007 identified that partnership spending had grown from 2% to 6% since 2005. New services had been re-commissioned around alcohol/drugs, high risk

PPO offenders, ETE, an interpreter service and hostel residential cover. Established partnerships had been reviewed and contracts revised.

- (f) Of the small number (nine) of offenders receiving services aimed at promoting health and leisure the quality was judged to be sufficient and one deemed excellent. This latter example related to a case using the health trainers.
- (g) The area evidenced some aspects of responsivity to the needs of offenders in relation to travel, childcare and employment in order to promote access to existing services. The area had used a diverse range of unpaid work placements.

Areas for Improvement:

- (a) The area lacked a strategy for the effective management of those convicted of a domestic violence offence but who were unsuitable for IDAP. Whilst it was pleasing to see the provision of ATRs there remained a gap in service delivery for those offenders with low level alcohol problems.

- (b) The need analysis undertaken in 2007 noted some gaps in service provision. Despite some progress having been made through projects in the Isle of Wight and Portsmouth, 'move on' accommodation provision remained limited. There was also the need to develop effective liaison with local mental health services in order to promote access to available services.

There was a high level of unmet need in relation to finances and debt and the area noted the need to develop a pilot scheme for Tier 3 and 4 offenders.

- (c) The late implementation of phase two of the offender management model was evidenced though continued weaknesses in the relationships between offender managers in the community and offender supervisors in prison. There were cases in which the lack of liaison and planning for release had negatively impacted on the smooth transition of offenders.


Concerns about the working arrangements between offender supervisors in the prison and the offender manager in the community were evidenced in 39% of the custody and licence cases.

- (d) The quality of the drugs and alcohol services used with offenders was judged to be insufficient in 34% of cases.

Keyworkers reported a high demand for the ATR services delivered by CRI and that the current contract would not be able to meet future need.

- (e) Although the area had completed the Best Value reviews required by NOMS it had not completed 'value for money' reviews of the full range of interventions.

- (f) The area had exceeded the 2006/2007 target for offenders gaining and sustaining employment for four weeks (131%) and offenders



placed in employment (173%). However, strategic direction in sustaining learning and skills in the medium and long-term was not clear. Insufficient attention had been given to the needs of employers or the development of employer/voluntary and charitable alliances. Some recent strategies to engage employers had not been successful.

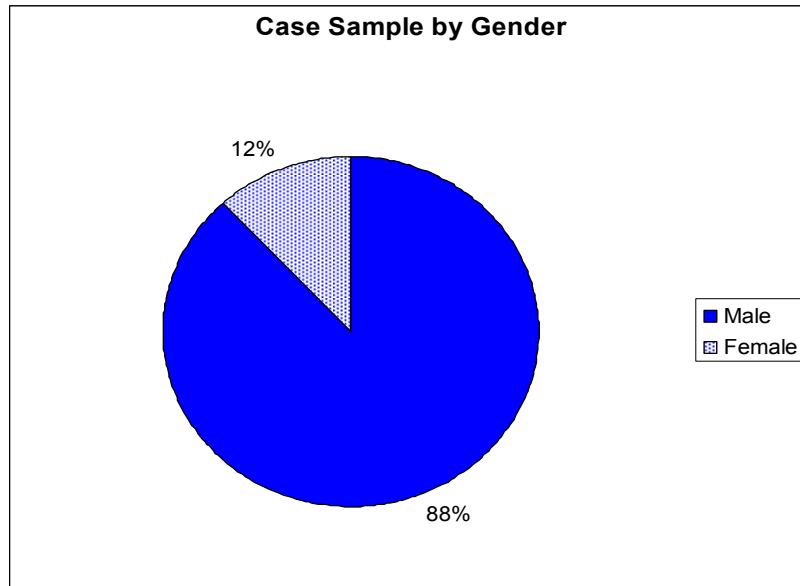
APPENDIX 1 Integrated Probation Performance Framework: April-September 2007

IPPF		IPPF Area Score						2						Hampshire													
Q2		IPPF Domain Score:						2						2													
Public Protection		Actual		Target / Milestone		National		Previous Year - Q2		IPPF Grade		Operational Capability, Resource Use & Strategy		Actual		Target / Milestone		National		Previous Year - Q2		IPPF Grade					
NS Public Protection		81%		90%		83%		68%		3		Sickness Absence		11.0		9.0		11.7		14.2		1					
Tier 4 OASys Assess		94%		90%		96%		n/a		3		Ethnic Monitoring		97%		95%		97%		97%		3					
PPO OASys Assess		96%		90%		96%		n/a		3		Budget Variance		11328		11925		414618		10864		2					
Victim Contact		82%		85%		93%		67%		1		Sub-Contracting		Data Availability Under Review													
Tier 1, 2 & 3 OASys Assess																											
OM Phase II OASys Assess																											
Approved Premises																											
Management Information		Actual		Predicted		Difference		Significant?		IPPF Grade		Outstanding Performance		Good Performance		Passable Performance		Poor Performance		4		3		2		1	
Reduce Re-offending		10.3%		9.2%		1.1%		Worse		1																	
Management Information		Actual		Target / Milestone		National		Previous Year - Q2		IPPF Grade		Interventions		Actual		Target / Milestone		National		Previous Year - Q2		IPPF Grade					
NS Interventions		56%		90%		64%		65%		1		Upaid Work Completions		1017		822		27306		1006		4					
Accredited Programme Completions		138		140		5834		220		3		Sex Offender Treatment Programme Completions		3		3		293		8		4					
Domestic Violence Programme Completions		29		27		900		31		4		DTTO/DRR Starts		207		229		8119		174		1					
Employment Sustained For 4 Weeks		247		193		7576		276		4		Employment Sustained For 4 Weeks		247		193		7576		276		4					
% UPW Days Lost Due To Stand-Downs		8.9%		5.0%		5.0%		7.3%		1		DRR Retention		88%		75%		85%		n/a		3					
Management Information		Actual		Target / Milestone		National		Previous Year - Q2		IPPF Grade		% Completions Of Unpaid Work		Actual		Target / Milestone		National		Previous Year - Q2		IPPF Grade					
% Completions Of Unpaid Work		69%		n/a		68%		78%		3		OBP Attrition		43%		n/a		39%		44%		2					
Employment Gained		383		n/a		10744		n/a		n/a		DTTO/DRR Completions		64		n/a		2970		46		n/a					
Alcohol Treatment Requirement Starts		347		n/a		2361		n/a		n/a		Alcohol Treatment Requirement Completions		25		n/a		701		n/a		n/a					
Average Acceptable Absences		2.8		n/a		2.6		2.1		2																	

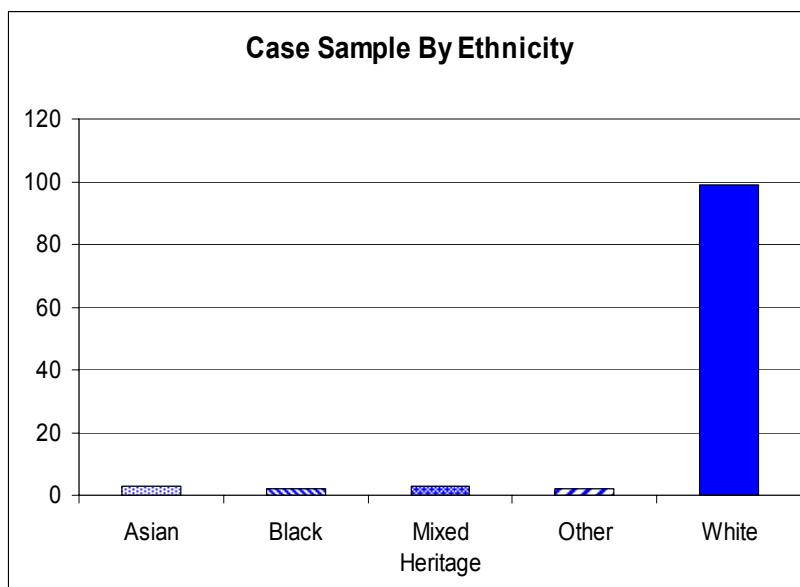
IPPF is the performance framework operated by NOMS. Under this, for each probation area, a score is assigned for each of four 'domains' as indicated, based on results for the metrics specified. Using these scores, an overall score for the probation area is also assigned.

APPENDIX 2 Contextual information

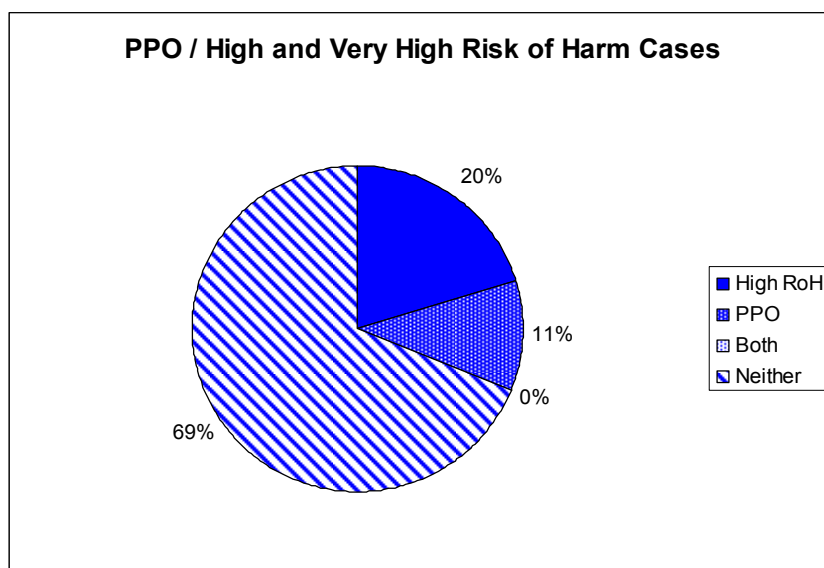
The chosen sample takes into consideration the number of female offenders in the area. A representative number is then included in the sample of cases.



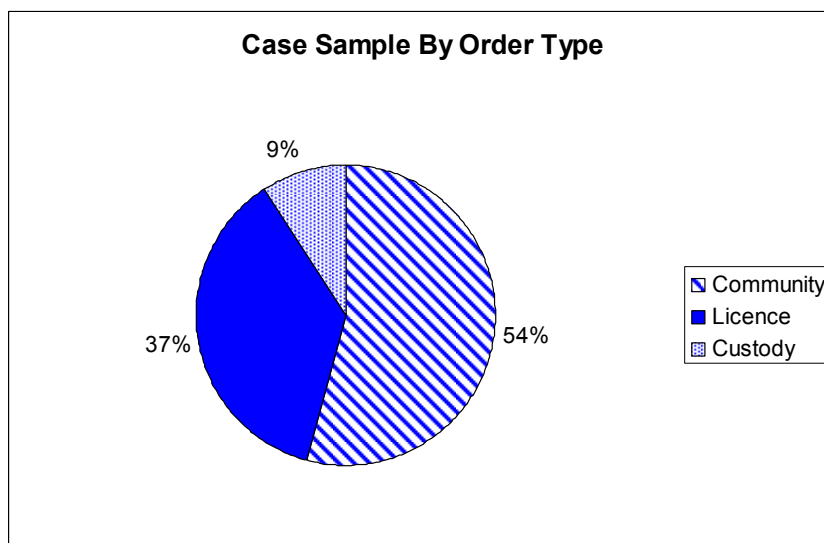
The chosen sample takes into consideration the number of black and minority ethnic offenders in the area. A representative number is then included in the sample of cases.



Each case sample contains a representative number of high risk and PPO cases.



Each sample is made up of 40 licence cases, 60 community order cases and 10 custody cases.



Hampshire PA Caseload at end of March 2007

Total caseload	5011 Orders & Licences
<i>% White</i>	93%
<i>% Minority ethnic*</i>	6%
<i>% Male</i>	87%
<i>% Female</i>	13%
Number of cases subject to MAPPA:	(%)
Level 1	575 12.2%
Level 2	918 19.5%
Level 3	46 1%
Number of PPO cases	188
* Excluding cases for which ethnicity information is not available.	

The local definition of a PPO case – on which the above figure is based – is: a registered PPO sentenced to supervision or custody.

Total revenue budget in 2006/2007: £ £23,057,000.

Total revenue budget in 2007/2008: £ 23,950,000.

Approved premises:

Dickson House - 18 places.

Southampton Languard Road - 22 places.

The Grange - 22 places.

APPENDIX 3

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 NOMS performance data. These are produced by NOMS which is responsible for their collection and quality assurance.
- Each inspection takes place over one week. The area is asked to identify a random sample of 110-120 offenders (more in the largest areas) who have been managed by a probation offender manager 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 community orders, licences, and those in custody.

Methodology

- During the inspection we examine the probation case file and carry out an in-depth interview with the offender manager. We also interview offenders, victims, keyworkers and case administrators. We send questionnaires to offenders and victims whose cases arise in the sample and to a selection of magistrates, judges, and legal advisers involved in sentencing.
- We interview senior and middle managers, Board members of the probation area, and partners.
- Inspection of about a third of the cases in the sample is carried out by area assessors, experienced staff/managers 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. A copy is sent to NOMS HQ and copies are also made available to the press and placed on our website.
- Reports on offender management in Wales are published in both Welsh and English.

APPENDIX 4

Scoring Approach

This describes the methodology for assigning the scores to each of the general criteria, to sections 1 to 3 and to the *RoH Thread*. A fuller detailed description is on HMI Probation's website at:

<http://www.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 risk of harm
- 1.3 Assessment of likelihood of reoffending
- 1.4 Assessment of offender engagement
- 1.5 Sentence planning

Section 2: Implementation of interventions

- 2.1 Delivering the sentence plan
- 2.2 Protecting the public by minimising risk of harm
- 2.3 Victims
- 2.4 Ensuring containment and promoting compliance (Punish)
- 2.5 Constructive interventions (Help and Change)
- 2.6 Restrictive interventions (Control)
- 2.7 Diversity issues

Section 3: Achievement and monitoring of outcomes

- 3.1 Achievement of initial 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 RoH Thread** is calculated as an average, over all the questions in the Offender Management Tool in sections 1 and 2 relating to RoH, 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 deployment
- 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 5

Role of HMI Probation

Statement of Purpose

HMI Probation is an independent Inspectorate, funded by the Ministry of Justice and reporting directly to the Secretary of State. Our purpose is to:

- report to the Secretary of State on the effectiveness of work with individual offenders, children and young people aimed at reducing reoffending and protecting the public, whoever undertakes this work under the auspices of the National Offender Management Service or the Youth Justice Board
- report on the effectiveness of the arrangements for this work, working with other Inspectorates as necessary
- contribute to improved performance by the organisations we inspect
- contribute to sound policy and effective service delivery, especially in public protection, by providing advice and disseminating good practice, based on inspection findings, to Ministers, officials, managers and practitioners
- promote actively race equality and wider diversity issues, especially in the organisations we inspect
- contribute to the overall effectiveness of the Criminal Justice System, particularly through joint work with other inspectorates.

Code of Practice

HMI Probation aims to achieve its purpose and to meet the Government's principles for inspection in the public sector by:

- working in an honest, professional, fair and polite way
- reporting and publishing inspection findings and recommendations for improvement in good time and to a good standard
- promoting race equality and wider attention to diversity in all aspects of its work, including within its own employment practices and organisational processes
- minimise the amount of extra work arising for Probation Areas or Youth Offending Teams [those inspected] as a result of the inspection process.

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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