



HM Inspectorate of Probation

# AUDIT OF ACCREDITED PROGRAMMES

Humberside & Yorkshire Region of  
the National Probation Service for  
England and Wales

*Level 2 Follow-up Report on:  
North Yorkshire Probation Area –  
Think First*

June 2003

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## Acknowledgements:

We are grateful for the cooperation of staff from the North Yorkshire Probation Area in completing this follow-up audit.

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## Glossary

CO	Chief officer
HMIP	HM Inspectorate of Probation
IQR	Implementation Quality Rating
N/A	Criteria not assessed
OGRS	Offender Group Reconviction Scale
PSR	Pre-sentence report
SPO	Senior probation officer

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## Scoring Approach:

The criteria for the delivery of accredited programmes have been divided into four sections. These sections, and the overall weighting assigned for each section, are as follows:

<b>Committed leadership and supportive management</b>	<b>20%</b>
<b>Programme management responsibilities</b>	<b>30%</b>
<b>Quality of programme delivery</b>	<b>30%</b>
<b>Case management responsibilities</b>	<b>20%</b>

Each criterion is scored as **Fully Met** (2 marks), **Largely Met** (1 mark) or **Not Met** (0 marks).

The scoring summary sheet at the end of this follow-up report shows the marks awarded for each criterion – for those criteria designated as Mandatory (see Performance Standards Manual) the mark given is doubled. This denotes the critical impact these criteria have on the effective delivery of programmes.

The marks awarded for each section are shown and then expressed as a % by dividing the total number of marks scored by the maximum available, and multiplying by 100. Section B has been divided into seven sub-sections for ease of scoring.

To determine an area's IQR, the scores for each section are multiplied by the appropriate factor to take account of the relevant weightings given above. The % totals for each section are then added together to give the IQR.

For this follow-up audit, those criteria that were fully met on the original audit have not been re-assessed. The marks awarded then have therefore been carried over. The only exception to this relates to those criteria that are informed by video monitoring scores (see C1.1-C1.3). Revised scores have been awarded for these criteria based on up-to-date video monitoring scores.

## Overview:

- The audit of North Yorkshire's delivery of Think First took place in January 2002. The area achieved an IQR of 60%, which resulted in a follow-up audit completed in February 2003.
- The follow-up audit comprised: an assessment of advance information; and a two-day site visit during which a case file read and interviews with staff were undertaken. The quality of delivery was assessed based on ten videotapes of Think First sessions.
- Only those criteria not fully met at the original audit have been assessed and new marks awarded. The bullet points under these criteria refer to the progress made since the original audit.
- Two audit criteria were not considered B4.3 and D1.8 as these were not assessed at the original audit.

## Findings:

An action plan had been drawn up following the original audit and most of the recommendations had been addressed, with considerable progress made in some respects. Managers remained committed to Think First and were active in promoting staff ownership and accurate targeting. A monitoring tool was in use on each site to aid staff in achieving accurate and consistent scoring.

Programme staff held quarterly area meetings, at which they made good use of the information produced to inform practice. A schedule of programmes had been produced. Evening sessions in York had helped to reduce some of the delays in commencement faced by offenders. Case managers had gained confidence in their understanding of programme content. Work, however, remained outstanding on exploring how case managers might proactively support offenders and reinforce their learning at all stages. There had been little progress in the use of post-programme reports to inform supervision review plans; this remained an area to be developed.

All potential tutors were required to meet with the effective practice manager to discuss the programme. The area also had clear selection/deselection policies which they had used on one occasion, with a positive outcome for all concerned.

The programme rota now consistently named three tutors for each programme and included preparation and debriefing times. Case managers and PSR writers had attended context setting events and had been furnished with a comprehensive document entitled *Case Manager Notes*.

A review of staff structures had been undertaken and the decision to develop further the role of the practice developer had been taken. This proposed change in the structure had resulted in delays to the drafting of job descriptions.

A supervision system had been established, with a clear line of communication feeding into the appraisal process. The main feature was that the individual tutor provided the evidence to be used in the appraisal process.

Arrangements were in place for annual meetings with judges, the first of which took place 29 January 2002. In addition to written information on the programme, there was a biannual newsletter produced that kept magistrates informed of new developments in accredited programmes.

## Next Steps

North Yorkshire Probation Area achieved a revised IQR of **81%**.

This audit follow-up report and the IQR will be received by the Correctional Services Accreditation Panel in Autumn 2003.

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## SECTION A: COMMITTED LEADERSHIP

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Recommendation(s) from the original audit which relate to this section.

*The CO should ensure that the area:*

- *draws up competency-based job descriptions which are programme specific and clarify roles and responsibilities of both managers and practitioners (A1.2);*
- *improves its written programme information for sentencers and liaison with judges in respect of Think First (A1.4).*

- ▶▶ **Not met:** Following the original audit a project team had been convened to discuss job descriptions. However, following discussions, senior management had decided that there was a need for further expansion and development of the role and structure of their middle management tier. The CO considered that this restructuring would play a large part in defining roles within the area, as a result programme related job descriptions had yet to be produced.
- ▶▶ **Fully met:** Managers had undertaken programme training events with judges and magistrates.

A1.1	<b>Committed leadership</b> <i>Criterion fully met at original audit.</i>	2
A1.2	<b>Management structures</b> <ul style="list-style-type: none"> <li>• The effective strategy document showed a clear division of programme manager tasks.</li> <li>• Job descriptions lacked a programme focus and were not all competency based but were to be developed as part of a structural review across the organisation.</li> </ul>	1
A1.3	<b>Staff ownership of the accredited programme</b> <i>Criterion fully met at original audit.</i>	2
A1.4	<b>Effective communication with sentencers</b> <ul style="list-style-type: none"> <li>• Arrangements were in place for annual meetings with judges, the first of which took place 29 January 2002.</li> <li>• In conjunction with the West Yorkshire Probation Area, North Yorkshire had delivered presentations to barristers, covering the changes made to sentencing options by the provision of accredited programmes.</li> <li>• Since the original audit the area had continued to show a commitment to keeping magistrates informed, with training planned for 2003 and the publication of a biannual newsletter.</li> </ul>	2

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## SECTION B: PROGRAMME MANAGEMENT RESPONSIBILITIES

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Recommendation(s) from the original audit which relate to this section.

*The CO should ensure that the area:*

- *adopts a policy of delivering planned work to enhance programme-readiness amongst offenders who face delays to group work commencement (B2.4);*
- *improves the quality of its information for potential tutors, clarifies its procedures in relation to unsuccessful assessment centre candidates, and produces a tutor deselection policy (B3.1);*
- *provides required preparation and debriefing time for tutors (B3.3);*
- *gives additional input to case managers and PSR writers to further familiarise them with the model and content of the Think First programme (B4.4);*
- *effectively implements supervision and appraisal arrangements which include attention to the practice development of those involved in programmes (B5.1, B5.2);*
- *improves the accuracy and consistency of its targeting for Think First (B6.1);*
- *implements arrangements to commence evening and/or weekend programmes to make Think First accessible to employed offenders (B6.4);*
- *formulates a strategy for ongoing programme monitoring and evaluation (B7.1).*

- ▶▶ **Partly met:** Whilst the area had a schedule of programmes and case managers felt more confident about the content of the programme, pre-programme work had not been consistently undertaken.
- ▶▶ **Fully met:** All potential tutors had the opportunity to discuss the role and programme content with the effective practice manager. Selection/deselection policies had also improved the quality of information for potential tutors.
- ▶▶ **Fully met:** Tutors were routinely given the required preparation and debriefing time.
- ▶▶ **Fully met:** Case managers and PSR writers had been furnished with the *Case Manager Notes* to aid their knowledge of the content of Think First.
- ▶▶ **Largely met:** North Yorkshire had actively promoted the concept of tutors owning their own appraisal, in that they were responsible for providing their line manager with relevant evidence to feed in to the process.
- ▶▶ **Largely met:** Targeting of offenders had substantially improved and each site had a monitoring tool in use.
- ▶▶ **Fully met:** A schedule of evening programmes ran in York; there were no plans to run weekend programmes due to lack of demand, however this continues to be monitored.
- ▶▶ **Fully met:** There was a strategy for ongoing monitoring and evaluation, with evidence that treatment managers and tutors had made good use of the information available.

### B1.1 Resources and facilities

2

*Criterion fully met at original audit.*

<b>B1.2</b>	<b>Provision of information leaflets about the programme</b>	<b>1</b>
	<ul style="list-style-type: none"> <li>• There was a set of information leaflets, incorporating the complaints procedure, aimed at participants, sentencers, PSR writers, case managers and tutors.</li> <li>• Leaflets did not explicitly address cultural or wider diversity issues. This had been an active decision by senior management based on the demographic make-up of the local offender population.</li> <li>• <i>Case Manager Notes</i> had been produced, which included a section on accredited programmes.</li> </ul>	
<b>B2.1</b>	<b>Managing attendance</b>	<b>2</b>
	<ul style="list-style-type: none"> <li>• Management of attendance continued to be given a high priority with good results and North Yorkshire had progressed well against their nationally set targets.</li> <li>• Catch-up sessions had been monitored with adherence to relevant policy.</li> <li>• The practice of offering more than two catch-up sessions had been discontinued.</li> </ul>	
<b>B2.2</b>	<b>Avoidance of cancellation or disruption to sessions</b>	<b>2</b>
	<i>Criterion fully met at original audit.</i>	
<b>B2.3</b>	<b>Catch-up sessions/Attendance</b>	<b>2</b>
	<i>Criterion fully met at original audit.</i>	
<b>B2.4</b>	<b>Timeliness</b>	<b>1</b>
	<ul style="list-style-type: none"> <li>• A programme schedule had been published a year in advance.</li> <li>• An evening programme was run in York; offenders from outside the city were offered transport when appropriate.</li> <li>• The case file showed that 17 of 30 cases (57%) had not had timely commencements.</li> </ul>	
<b>B3.1</b>	<b>Staff selection</b>	<b>2</b>
	<ul style="list-style-type: none"> <li>• Potential tutors received written information about the assessment centre process and follow-up procedures, and attended a pre-assessment briefing with the effective practice manager. In addition, all staff had been provided with a copy of the <i>Case Manager Notes</i> which contained specific programme information.</li> <li>• Clear documentation about follow-up procedures for candidates not selected to be tutors at the assessment centre had been produced.</li> <li>• There was a clear selection/deselection policy.</li> </ul>	

<b>B3.2</b>	<b>Staff roles and competencies</b>	1
	<ul style="list-style-type: none"><li>• Job descriptions were not consistently competency based or sufficiently related to the programme role. It was, however, a strategic decision that new job descriptions would not be produced until after the planned staffing restructure.</li><li>• Semi-specialist staff were clear about defining and separating their core tasks in relation to Think First.</li><li>• Two helpful documents had been produced: the <i>Case Manager Notes</i> and the effective practice strategy; both contributed to defining roles of semi-specialist staff.</li></ul>	
<b>B3.3</b>	<b>Preparation and debriefing time for tutors</b>	2
	<ul style="list-style-type: none"><li>• Tutors were allocated the required time for preparation and debriefing.</li></ul>	
<b>B3.4</b>	<b>Staff continuity</b>	2
	<ul style="list-style-type: none"><li>• At all the sites three named tutors were routinely scheduled when a programme was planned.</li><li>• Harrogate was a split site and this caused staff some difficulties when there was an unexpected staff absence, as not all three tutors were based at the same office.</li></ul>	
<b>B4.1</b>	<b>Training arrangements for new staff</b>	2
	<i>Criterion fully met at original audit.</i>	
<b>B4.2</b>	<b>New staff paired with an experienced colleague when running their first programme</b>	2
	<i>Criterion fully met at original audit.</i>	
<b>B4.3</b>	<b>Training arrangements for experienced staff</b>	N/A
	<i>Criterion not assessed at original audit.</i>	
<b>B4.4</b>	<b>Staff knowledge of the concepts and methods used in the programme</b>	2
	<ul style="list-style-type: none"><li>• All staff had been issued with copies of the effective practice strategy, <i>Case Manager Notes</i> and HMIP's <i>Cognitive-Behavioural Approaches</i> report.</li><li>• Case managers and PSR writers were confident in their knowledge of the programme and felt well supported by programme staff.</li></ul>	
<b>B4.5</b>	<b>Staff knowledge of the theoretical and evidential basis of the programme</b>	2
	<i>Criterion fully met at original audit.</i>	
<b>B4.6</b>	<b>Supporting skills necessary to run programmes</b>	1
	<ul style="list-style-type: none"><li>• An annual training plan had been produced which included motivational interviewing, group work, pro-social modelling, presentation and cognitive-behavioural skills.</li><li>• Most tutors had attended this training and considered it benefited their practice.</li></ul>	

- Without staff training profiles it was difficult to confirm that staff had received appropriate and timely access to training.

**B5.1 Staff supervision and quality of practice**

2

- All sites had treatment managers who undertook supervision with programme tutors at the required frequency and kept written records.
- Supervision was constructive, with videos forming a clear focus for the sessions.
- Area-wide tutor meetings took place on a quarterly basis and were used to inform practice.
- Unit SPOs had incorporated information from treatment management supervision records in tutors' annual appraisals.

**B5.2 Staff appraisal**

1

- Soon after the original audit a pattern of appraisal, underpinned by a system of regular supervision, had been established.
- North Yorkshire had actively promoted the concept of tutors owning their own appraisal process in that they were responsible for providing the relevant evidence. Although treatment managers fed back if there was a problem, this appeared to be an informal system.
- There was no systematic approach to developing a profile of the training needs of programme staff. Managers took the view that in such a small area there was no need, as each member of staff's training needs were known. However, monitoring would ensure that there were no gaps in the provision of training.

**B6.1 Offender selection and assessment**

1

- Of the cases examined 22 of 30 (73%) had OGRS 2 scores falling between the required 31-74%. Of the remaining files, seven of 30 (23%) had OGRS 2 scores above 74% and one of 30 (3%) had a score below 31%. There was no recorded explanation to justify allocation of those cases falling outside the targeting band.
- A manual monitoring system had been used to collate local information regarding referrals to the programme. An electronic version was being developed to facilitate the production of area-wide monitoring, improve the evaluation of data and inform changes to practice.

**B6.2 Offender knowledge and understanding of the programme requirements**

2

*Criterion fully met at original audit.*

**B6.3 Group size**

2

*Criterion fully met at original audit.*

**B6.4 Accessibility of group work programmes**

2

- Although weekend and evening programmes had been considered at all sites, due to small numbers it was not considered feasible to follow this course.
- Evening programmes had been run at the York site, with transport being offered to those offenders who lived outside this area.

**B7.1 Implementation of monitoring and evaluation design**

2

- Monitoring and evaluation data had been disseminated via team meetings, e-mails, the bulletin board, newsletters and staff conferences.
- As well as good knowledge of the area information systems, staff understood their role in collecting data.
- Treatment managers and tutors were aware of the need to feedback and use monitoring and evaluation information.

**B7.2 Practice is informed by monitoring and evaluation evidence**

1

- A forum had been established, as noted under B5.1, for tutors to discuss issues of relevance arising from data collected and to share information; however, the full benefit of this had yet to be felt across the area.

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## SECTION C: QUALITY OF PROGRAMME DELIVERY

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Recommendation(s) from the original audit which relate to this section.

*The CO should ensure that the area:*

- *improves the usage of end of programme reports by case managers supervising offenders, particularly their integration into supervision plan reviews (C1.6).*

► **Largely met:** Whilst all the files examined contained a post-programme report, in the majority of cases this had not been integrated into post-programme work.

### C1.1 Adherence to programme manual

2

- Tutors consistently set up exercises correctly and delivered the material without adding inappropriate extras.
- Exercises were being explained properly.
- Whilst there were good examples of tutors checking out learning, this was not being done consistently.

### C1.2 Adherence to treatment style

1

- Overall, tutors were listening to offenders and allowing them time to develop their answers.
- There was good use of summarising and reflecting back points made by the offender.
- Tutors consistently challenged offence supporting ideas.
- Links were not always made to learning points between and within sessions.
- Whilst there was good use made of open questioning, eliciting self-motivating statements was less consistent.

### C1.3 Group work skills

2

- Excellent use of praise ensured offenders felt recognised and encouraged in their participation.
- Apart from two occasions when one tutor was not familiar with the material, sessions were delivered in a knowledgeable manner that involved the whole group.
- There were some good examples of co-working; however, handovers were not consistently conducted in a clear manner and on two occasions tutors talked over and contradicted each other.
- Tutors spoke clearly and did not use jargon but there were several instances of inappropriate language in the form of swear words.

### C1.4 Programme delivered addressing race equality and diversity issues

2

*Criterion fully met at original audit.*

### C1.5 Programme integrity checklist

2

*Criterion fully met at original audit.*

**C1.6 End of programme summary reports**

2

- All 26 of the files examined contained a post-programme report.

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## SECTION D: CASE MANAGEMENT RESPONSIBILITIES

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Recommendation(s) from the original audit which relate to this section.

*The CO should ensure that the area:*

- *produces a case management policy in relation to the case manager role of ongoing support and reinforcement of offender learning (D1.3).*

► **Largely met:** Whilst a policy had been produced in relation to the case manager role they had not always adhered to this and insufficient work had been done to develop a culture of ongoing support for the offender.

**D1.1 Initial supervision plan sets relevant objectives for the offender**

2

*Criterion fully met at original audit.*

**D1.2 Effective liaison arrangements between the case manager and programme staff**

1

- There was a clear local policy of not allocating to a case manager who was also tutoring the group of which the offender was part.
- Staff no longer had the dual role of tutor/case manager during the programme. Case notes indicated that the tutor took the main responsibility for recording details of offenders' progress.
- Whilst there were examples of good practice in this regard, in only eight of 30 cases (27%) was the two-way liaison between case managers and tutors assessed as satisfactory.

**D1.3 Supporting the offender through all phases of the programme**

0

- The file read indicated that, in the majority of case, case managers had responded well if alerted by the tutor to offender crises.
- In 11 of 30 cases (37%) all reasonable steps had been taken to promote the attendance, engagement and compliance with Think First.
- A policy of minimum contact at sessions 14 and 22 had not been consistently adhered to.
- Apart from high-risk cases, case managers stated that they felt unable to offer support to offenders on the programme due to competing commitments. This was evidenced by just five of 28 eligible files (18%) demonstrating reinforcement of learning.
- Experienced staff were confident of their ability to undertake pre-/post-programme sessions; less experienced tutors expressed concerns about their ability to deliver these sessions.
- In eight of 30 of files (27%) there was no record of planned work being undertaken to prepare offenders' for Think First.

**D1.4 Understanding and knowledge of programme methods**

1

- Case managers demonstrated a clear understanding of the aims and objectives of the programme and were confident in their ability to undertake appropriate reinforcement or relapse prevention work. There were, however, concerns about the demands this put on the offender, and this was cited as the main reason for not undertaking this work.
- Whilst 21 of 28 of cases (75%) had some mention of follow-up work, however, explicit links to post-programme reports were not always evident.

**D1.5 Monitoring of attendance and enforcement**

2

- Documentary and practice evidence showed that the area had maintained its previous good practice in relation to enforcement.
- The enforcement manual had been updated to incorporate programme attendance and non-compliance.

**D1.6 Documentation**

2

- All applicable files contained post-programme reports.
- Evaluation and monitoring forms were found on 26 of 30 of files (87%).
- In 27 of 30 of files (90%) a statement of understanding was included.

**D1.7 End of programme review**

0

- Of the 30 files read, 10 (33%) had the post-programme report incorporated into the supervision plan review. Of the remaining files, nine of 30 (30%) made no reference to work linked to Think First, the order had expired in four cases (13%), and seven (23%) had been revoked following completion of Think First. In all instances of revocation the file reader noted that the post-programme report had identified future work to be undertaken.
- Evidence of attention being paid to community reintegration was evident in 18 of the 19 ongoing cases (95%); however, this was not consistently reflected in supervision plan reviews.

**D1.8 Reinforcement and relapse prevention work**

N/A

*Criterion not assessed at original audit.*