



OFFENDER
MANAGEMENT
INSPECTION
INSPECTION

A report on Offender Management in
Kent Probation Area

An inspection led by
HM Inspectorate of Probation

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FOREWORD

Kent Probation Area had approached the implementation of offender management against a backdrop of active involvement alongside prisons in the county over many years. The two organisations had worked productively together to model joint work at the Sheppey prison cluster, much of which was pioneering. The size and geography of the area brought particular challenges in relating to local authorities and associated partner agencies, but the probation area had worked hard to foster positive working arrangements despite these complexities.

Greater attention was needed to strengthen some core pillars of practice if offender management was to operate successfully. Although offender managers were diligent in managing attendance and compliance issues, sentence planning lacked quality from beginning to end and failed to produce desired outcomes in many cases. Risk of Harm work required greater attention to detail. Improved supervision of staff could help to address such issues. There also needed to be more evaluation of success factors and more heed taken of service users, including sentencers.

To their credit the area was handling some challenging offenders well at its approved premises, where a real contribution to public protection was seen. In some cases this took the form of prompt and appropriate recall of offenders whose Risk of Harm was seen to be escalating. We recognised the significance of the potential reoffending prevented by this careful work.

ANDREW BRIDGES

HM Chief Inspector of Probation

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LIST OF ABBREVIATIONS/ACRONYMS

CCTV	Closed circuit television
CDAP	Community Domestic Abuse Programme
CDRP	Crime and Disorder Reduction Partnership
CJSSS	Simple, Speedy, Summary Justice
CJS	Criminal Justice System
CO	Chief Officer
DAT	Drug Action Team
ESF	European social fund
ESI	Effective Supervision Inspection
ETE	Employment, Training and Education
FDR	Fast delivery report
HMI Probation	Her Majesty's Inspectorate of Probation
HMPS	Her Majesty's Prison Service
HR	Human Resources
IDAP	Integrated Domestic Abuse Programme
LAA	Local Area Agreement
LCJB	Local Criminal Justice Board
LoR	Likelihood of reoffending
KPI	Key performance indicator
MAPPA	Multi-Agency Public Protection Arrangements
MBA	Master of Business Administration
NAPO	National Association of Probation Officers
NOMS	National Offender Management Service
NPD	National Probation Directorate
NVQ	National Vocational Qualification
OASys/eOASys	Offender Assessment System/electronic OASys
OGRS2	Offender Group Reconviction Score2
OLASS	Offender learning and skills service
OMI	Offender management inspection
OMU	Offender Management Unit
OSAP	Offender Substance Abuse Programme
PDA	Practice development assessors
PO	Probation officer
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
SDR	Standard delivery report
SFO	Serious further offence
SLA	Service level agreement
SMB	Strategic Management Board
SMT	Senior management team
TPO	Trainee probation officer
VLO	Victim liaison officer

SUMMARY

Assessment and Sentence Planning

Work in relation to preparing for sentence was a strong feature for the area. Court reports were well received by sentencers, although there were issues with the timeliness of fast delivery reports. An assessment of criminogenic need had been completed comprehensively in most cases but was not always timely. Key workers commented positively on the opportunity they had to contribute to assessments at the pre-sentence stage. In three-quarters of cases a skills for life screening had taken place, and diversity issues had been actively assessed in most cases. The overall quality of sentence planning was disappointing. It was not seen as central to offender management and many plans contained general, rather than specific, objectives related to offender need and Risk of Harm. In a small number of cases, no plan had been completed and in a third of cases the plan had not been completed within national time frames. There was little evidence that the sentence planning process was made meaningful for offenders. Evidence from cases files showed hardly any contribution by offenders in the overall sentence planning process.

Where a skills for life screening had indicated the need for a full assessment this was undertaken in just over a third of cases. Lack of provision and offender managers' confidence in the services available were affecting offenders' access to appropriate services. Case tiering was inaccurate in a small number of cases. We were concerned to find inconsistent management oversight of the tiering process.

Implementation of Interventions

Most offenders were prepared well for interventions, although the sequencing of interventions was far less satisfactory. While we saw some examples of good communication, especially between programme tutors, approved premises key workers and offender managers, this was a variable picture. The quality of contact between prisons and offender managers to prepare offenders for release was insufficient. There were examples of constructive liaison with victims by the victim liaison officer, but there were a few cases where it was difficult to assess if contact had occurred due to poor recording. The amount and quality of work to raise offenders' victim awareness was absent in the vast majority of cases.

The delivery of constructive interventions to meet the 'help' and 'change' sentencing objectives was limited. In too many cases we could not confirm that offence-focused work had been undertaken, aside from accredited programmes. There were particular delays in the commencement of programmes and a lack of evening programmes and tutor resource compounded this further. Arrangements to provide skills for life interventions were poor.

Offender managers worked hard to secure compliance and used enforcement appropriately. Restrictive interventions were well monitored and the approved premises was used effectively to manage high Risk of Harm offenders in the community. Where diversity issues were identified they were in the main taken into account in the delivery of interventions.

Achievement and Monitoring of Outcomes

Overall resources were allocated according to the assessed likelihood of reoffending and Risk of Harm, although this was less prevalent for prolific and other priority offenders. Most offenders had not been cautioned or convicted of a further offence during their sentence. The 'punish' sentence objective had been well achieved in almost all cases,

followed by the 'control' sentence objective. There was less evidence that the 'help' and 'change' sentence objectives had been met and victim awareness had not improved in a significant number of cases. Lack of offender management continuity had impacted negatively on some cases. Active reviewing and rescoring of OASys was not regularly undertaken; as such there was limited evidence to demonstrate improvements in attitudes or behaviour.

Leadership and Strategic Management

There was a comprehensive business planning process that focused on national and local criminal justice priorities. A strong focus on performance, complemented by a rigorous reporting structure, was yielding positive results. The area was highly regarded by partners for its approach to partnership work. There was a range of interventions available or being considered and this enabled the area to contribute to a number of wider criminal justice and community safety strategies. There were strong links made at the Strategic Management Board for Multi-Agency Public Protection Arrangements, and the area had been praised for its openness to learning from other agencies. A sub-contracting plan had been approved at Board level to improve the area's role in commissioning.

Resource deployment and workforce planning had evolved with the offender management model. A transparent resource allocation model, using tiering data, was in place and was used to ensure equitable staff profiles according to workload demands. Although the area had a staff training plan and dedicated resource for probation service officer development, a significant minority of staff we spoke to felt unprepared for their role as offender managers. Some probation service officers we spoke to had been unable to undertake the National Vocational Qualification level 3 certificate. Despite the implementation of a new supervision policy, the frequency and quality of supervision was not sufficient in every case.

The use of coordinated qualitative information was underdeveloped as was the collation and evaluation of service user views to improve delivery across a range of work strands. There were significant gaps in education, alcohol and accommodation services.

Risk of Harm

The area had made a significant contribution to Multi-Agency Public Protection Arrangements. It was praised by partner agencies for its approach to continuous learning and development and this had helped to forge strong relationships at the Strategic Management Board level. Level 1 cases, however, were not always being processed through the formal Multi-Agency Public Protection Arrangements.

The area had made improvements in the timeliness of initial Risk of Harm assessments. We saw some excellent examples of risk and potential risk posed by offenders being well managed but this was not a consistent picture. In the majority of cases an initial screening had been completed, and in the main we agreed with the Risk of Harm classification. The offenders' Risk of Harm and Multi-Agency Public Protection Arrangements level had been well communicated to all staff involved in the case and the review of Risk of Harm was generally timely. The approved premises were seen as a high quality service in the contribution it made to public protection. Recall was used appropriately and in a timely way in the vast majority of cases.

In too many cases the quality of risk assessment and management was not good enough. Offender managers were not always verifying information or using the full range of information available to them from other organisations. Risk analyses often contained historical information that was not always relevant to the case. In some instances the quality of information was insufficient in providing a clear analysis of what

the harm was and its potential impact on others. Risk management plans did not follow the approved structure and were not comprehensive in a number of cases.

The involvement of management in high and very high Risk of Harm cases was not consistently evident and ongoing planning to minimise the Risk of Harm was absent in some cases. There was a lack of home visits to reduce public protection and safeguarding concerns.

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: Kent (November 2007)

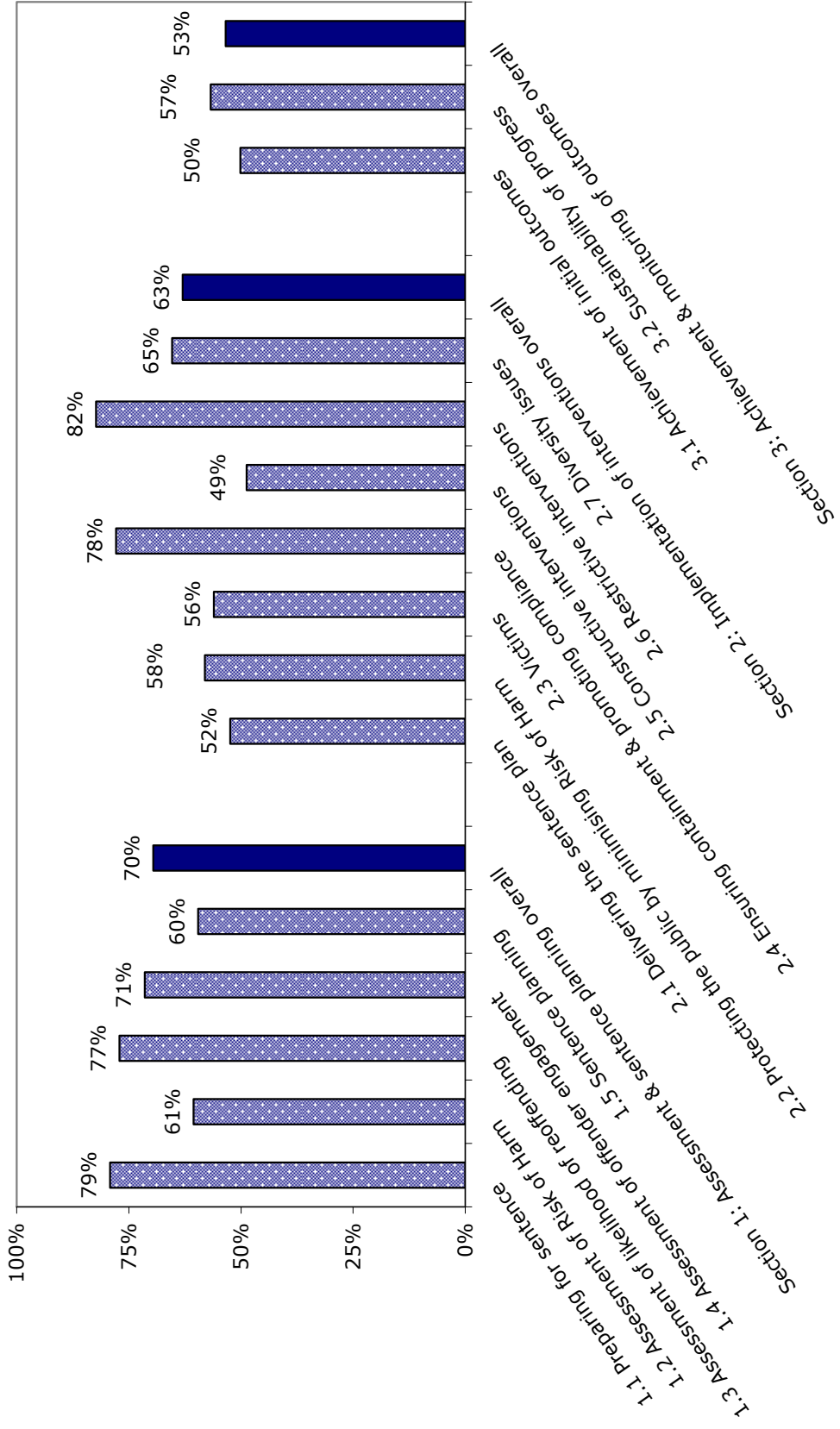


Table 1: Scoring of section 4:

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	Partly met
4.4	General Criterion: WORKFORCE PLANNING AND DEVELOPMENT	Partly met
4.5	General Criterion: REVIEW AND EVALUATION	Partly 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	67%
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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. accurate Risk of Harm screenings are undertaken in all cases. Risk assessments and risk management plans are completed to a sufficient quality in all cases where a need is identified
2. a higher profile is given to sentence planning. All sentence plans and reviews are completed on time and are sufficiently focused on outcome objectives
3. where statutory victim contact is required this is undertaken in a timely manner in all applicable cases. The amount of victim awareness work undertaken is increased in relevant cases
4. constructive interventions are delivered in all relevant cases to help offenders and to change their behaviour, and this is evidenced in case file records
5. prolific and other priority offenders are given an enhanced service
6. in conjunction with the Learning and Skills Council gaps in provision of education services and accommodation for offenders are met
7. the training needs of probation service officers are analysed and a comprehensive training plan is developed and implemented
8. all staff receive regular and high quality supervision leading to practice improvement.

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 Kent.

SHARING GOOD PRACTICE

Below are examples of good practice we found in Kent.

Motivating the offender

OMI Criterion: 2.1

Delivering the sentence plan

Jean was subject to a two-year suspended sentence order for theft from her employer. Jean had suffered from depression in the past and had twice attempted suicide. Jean had two children, both of whom had significant behavioural problems. Throughout the period of supervision the offender manager supported Jean to improve her perception of herself and encourage her to take more control in her life. Referrals were made for counselling and education support. The approach adopted by the offender manager encouraged Jean to accept more responsibility for her actions. This resulted in a letter of apology written by Jean to her former employer. Jean had since undertaken a computer course, funded by the probation area, and had applied for higher education. The skills learned during supervision and the support of the counselling service meant that Jean had better control over her finances and improved parenting of her children.

RoH management

OMI Criterion: 2.2

Protecting the public by minimising RoH

David was released on licence to an approved premises, having committed an offence of affray against a family member. There was a long history of domestic abuse and Children's Social Care Services were heavily involved with the family. The offender manager was proactive in the ongoing management of the risks posed by this case. Risk assessments were routinely updated when new information was received. MAPPAs were utilised effectively and action points from meetings were integrated into a comprehensive risk management plan. Details of all the staff involved in the case were clearly recorded. The offender manager had developed a strong positive relationship with Children's Social Care Services and there was regular communication. Following recall of the offender from the approved premises the offender manager ensured that risk information was shared with the establishment and retained good contact with the offender supervisor. When David was moved to open conditions, the offender manager, with support from MAPPAs, made representation to the prison service to reconsider their decision on the grounds of risk. This was successful and David was soon returned to closed conditions. The offender manager's alertness to potential risk triggers, regular communication with all agencies and the support of MAPPAs resulted in good risk management that protected potential victims.

Community Reintegration

OMI Criterion: 2.5 Constructive Interventions

Rodney was released to the approved premises following a ten-year sentence for numerous drug offences. On release the offender manager involved Rodney in identifying key problem areas and setting realistic sentence objectives. The approach taken by the offender manager enabled Rodney to take some ownership of his behaviour. During the course of supervision Rodney was referred to a drug counselling agency and additional counselling services. To ensure he was appropriately supported the offender manager had arranged for mentor support to assist Rodney in accessing his drug service. At the four month stage there had been considerable progress and Rodney had remained drug-free throughout that entire period.

Addressing Barriers

OMI Criterion: 2.7 Diversity.

Jane was convicted of driving with excess alcohol and sentenced to a 12 month suspended sentence order. Jane presented with a range of complex issues relating to severe mental health and chronic alcohol misuse. This impacted significantly on her ability to comply with the supervision requirement of her order. In engaging with Jane the offender manager arranged appointments early in the morning so that Jane could attend while still sober. In addition the offender manager contacted the community mental health team and undertook a joint home visit in order for a full assessment of her mental health needs to be undertaken.

SERVICE USERS' PERSPECTIVE

Offenders

We met with two groups of offenders who were undertaking programmes in Kent Probation Area: Think First, a general offending behaviour programme, and the IDAP. Twelve offenders were individually interviewed at unpaid work placements and at the approved premises in Maidstone. In total 20 offenders were seen either individually or in groups during the inspection week. There were no offender questionnaires returned from the 110 offenders in the sample.

All offenders across the different groups were positive regarding their contact with the probation area. Most recalled having had a timely induction to their sentence and all were clear regarding the rules governing their sentence and what action would be taken if they failed to attend. All the offenders on unpaid work could see the benefit of their work to the local community, but there were mixed views in relation to the opportunity to develop skills. One offender felt that she had developed new skills as a result of the work, and two offenders commented that they were utilising existing skills. Few offenders, however, were of the view that their skills had been matched to the work they were undertaking. Very few of the offenders had seen a sentence plan or recalled being involved in setting goals for their sentence. Offenders who were subject to a supervision requirement as well as unpaid work described regular contact with their offender managers. For those sentenced to a standalone unpaid work requirement, contact with offender managers was more limited. All the offenders commented positively on their relationship with the unpaid work supervisor and, where appropriate, individual needs had been responded to e.g. meeting childcare needs. There was little knowledge among the offenders about basic skills and most could not recall having a screening or being offered any additional services.

All eight offenders who were on an accredited programme spoke positively about the programme and their relationship with their offender manager. None of the offenders recalled seeing a sentence plan, but all were clear what their sentence entailed and what was expected from them. All offenders described regular contact while on the group programme, including at three-way meetings. There were concerns expressed amongst the group about the length of time it took to start the programme. One offender recalled having to wait 16 months before commencement. There were issues for some offenders on the location of IDAP. For some offenders this required journeys of up to 90 minutes each way. All offenders indicated that the programme had made them reflect on their behaviour, and think about how their actions impacted on others. Offenders on IDAP were particularly complimentary about the work offender managers had done in assisting them to access community resources. One offender stated that *"offender managers made the transition easy and minimised the risk of getting stressed out"*.

Involvement in sentence planning was more positive among the approved premises offenders. Three out of the five offenders described seeing a sentence plan and being involved in setting objectives. Contact with offenders by the offender manager while they had been in custody was variable. Two offenders described ongoing contact with their offender managers while serving the custodial element of their sentence. The remaining three offenders received little or no contact at all. Contact had improved once the offenders were released and all offenders commented that they had been seen regularly by their offender manager and key worker. All five had received a timely

induction into hostel rules. There were positive comments about the relationship between offenders and their offender manager and key workers, and all offenders felt they were being supported. There was clear evidence of a focus on community reintegration issues with referrals to community agencies and good use of partnerships. This included work to access 'move on' accommodation. Most offenders felt more confident in accessing community resources and in three cases a mentor had been matched to an offender to support them in their 'move on' plans.

Victims

Seven of the 21 questionnaires that were sent out to victims of crime in the inspection case sample were returned. Overall there were positive views about contact with the probation area and the work of the VLOs. Of those five victims that had agreed to have contact with victim liaison staff all were satisfied with the services provided. All were clear about the victim liaison role and all indicated that the services they received took account of their individual needs. All but one felt that they had been provided with sufficient information about the offender and that good attention had been given to their safety.

There were three individual victim interviews that took place during the inspection week. A similarly high level of satisfaction was expressed. Two out of the three victims commented that contact with the VLO had been prompt after sentence. All felt the role had been clearly explained, understood they would receive regular updates on how the sentence was progressing and would be able to influence the outcome of licence conditions. The support and accessibility of the VLOs was another positive feature. All felt that having a VLO made a huge difference to how they dealt with the preparation for release of the offender and had greatly contributed to their ability to cope. Interestingly none of the victims was aware of MAPPA, but all understood what they could do if the offenders breached their licence condition and attempted to contact them. For all victims this had been the first time that their views on the victim liaison service had been sought.

Courts

There were 11 responses to the questionnaires sent out to sentencers. The vast majority were satisfied with the quality of court reports, both SDRs and FDRs. There was less satisfaction with the timeliness of reports, in particular FDRs. Some of the respondents attributed this to a lack of staff availability. Some respondents were not always clear what type of report to order.

There were mixed views regarding the effectiveness of arrangements to resolve breach of sentences. Five of the respondents indicated that arrangements worked well in part. A number of respondents felt that breach proceedings took too long to resolve. Similarly there were mixed views regarding the liaison arrangements between the probation area and the courts. Half the respondents felt that this was effective and just over half received information about current probation policy and practice. Concerns were also expressed regarding the level of staffing within courts with two respondents suggesting an increase was needed. The vast majority of respondents were satisfied with the skills and knowledge of court staff and were complimentary regarding the professional leadership shown by managers in the area. Of those respondents that

answered the relevant question, 67% thought the area engaged effectively with the LCJB.

None of the respondents were aware of any monitoring of report proposals and comparison of this with the successful completion of sentences.

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.

79%

Strengths:

- (a) Court reports were prepared for 61 out of the 69 cases in the community and custodial sample. Overall we found the quality of reports in preparing for sentence satisfactory in 86% of cases. Nearly all reports had taken account of the seriousness level indicated by the court.
- (b) Most reports were of the appropriate type – i.e. fast delivery or standard - and based on the relevant risk and needs assessments. In 85% of the 52 reports where it had been used, we judged that the quality had been enhanced by the e-OASys template. All reports had been prepared within the time frame specified by the court. Although satisfied with the quality of court reports sentencers expressed concern with the timeliness of reports, in particular FDRs.
- (c) In 90% of reports a clear proposal for sentence was made. There was a good concordance rate for community sentences. In 84% of the 50 court reports where a community proposal had been made it had been followed by the court. Two court reports had been written on PPOs and in both cases the seriousness of the offence was clearly outlined.

Areas for Improvement:

- (a) Appropriate victim information was included in just over half of the court reports written.
- (b) Just over a third of reports were not assessed as balanced, verified and factually accurate. In most cases this related to a lack of verification of information provided by the offender and other agencies.
- (c) In 64% of reports an outline plan was included. Where issues of self-harm had been identified, this was clearly recorded in 11 out of 16 reports.
- (d) In the two PSRs on PPOs, one author had outlined the LoR and avoided labelling the offender as a PPO, but in the other report these disciplines had not been observed.

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.

61%

Strengths:

- (a) A RoH screening had been completed in 90% of community sentence cases and 93% of licence cases. In most cases it had been completed at the start of sentence or on release from custody and was assessed as accurate in 89% of cases.
- (b) RoH analyses accurately reflected the RoH to the public in 87% of cases.
- (c) In those cases that had been classified as posing a high or very high RoH, this had been communicated to all relevant staff in 87% of cases. Similarly in those cases that were managed within MAPPA, the MAPPA level was communicated to all staff involved in 92% of cases.
- (d) In those cases that were referred to the approved premises, all were considered appropriate and nearly all were accepted. There was only one case where a referral to approved premises should have been made and had not been.

Areas for Improvement:

- (a) In seven cases no RoH screening had been completed and in 14 cases the RoH classification was not considered correct. In some instances the offender manager had overlooked risk factors such as previous convictions.
- (b) In those cases where a full RoH analysis was completed the overall quality of this was assessed as sufficient in 58% of cases. A theme noted by the inspection team was that the RoH analysis tended to describe events rather than analyse risk. While RoH analyses accurately reflected the risk to the public in most cases this was lower for RoH to children (79%), known adults (76%) and staff (78%). In less than half of cases (44%) the RoH assessment covered victim issues thoroughly. In 52% of cases the RoH screening and analysis drew on the full range of information available. Offender managers were not always proactive in following up information from other agencies e.g. Children's Social Care Services, to enable a holistic assessment of risk to be made. In 24 cases no RoH analysis was completed where the screening indicated one should have been done. In 14 cases there was no recorded acceptable explanation as to why an analysis had not been completed.
- (c) The inspection team found a number of issues relating to both the quality and timeliness of risk management plans, although in those community cases assessed as high/very high RoH all had been completed within the five day time limit. In the custodial and licence sample only a quarter of plans were considered comprehensive. This

was lower for the community case sample at just 22%. In some cases the plan did not follow the required format. A previous format developed by the area was being used that did not sufficiently identify the staff involved in the management of the case or how the risk posed would be managed. In too many cases the plans lacked detail and were insufficiently integrated with the sentence plan. In a small number of cases (two each) across both the community and licence case samples, a risk management plan had not been completed when it should have been.

- (d) There was insufficient evidence of effective middle or higher management involvement in cases where there were safeguarding issues (ten out of 16 cases). In five out of 14 cases there was no evidence of management involvement where the offender was assessed as high or very high RoH. The inspection team found a number of risk analyses and risk management plans that had been countersigned by management despite them being of insufficient quality.

Conclusion:

This criterion represents an **urgent priority** for improvement.

1.3 General Criterion: ASSESSMENT OF LIKELIHOOD OF REOFFENDING

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

77%

Strengths:

- (a) In 79% of cases an OASys was completed as required at the start of sentence. This was a similar figure in respect of PPO cases. In 91% of cases an OASys score was calculated at the start of sentence. In nearly all cases where an OASys assessment was not required an OGRS 2 score had been calculated.
- (b) The overall quality of the LoR assessments was assessed as sufficient in 75% of cases. Positive influences such as supportive and pro-social factors were identified in 90% of cases. In 82% of cases the assessments drew on other relevant information. Key workers employed both by the probation area and by other organisations commented on the opportunities they had to contribute to the assessment at both the pre- and post-sentence stage.

Areas for Improvement:

- (a) In 21 cases criminogenic factors were not assessed within the time frames prescribed by national standards and in eight cases no assessment of criminogenic need had been completed.
- (b) Of the nine PPO cases, only four OASys assessments were assessed as comprehensive.

Conclusion:

Performance against this criterion was good.

1.4 General Criterion: ASSESSMENT OF OFFENDER ENGAGEMENT
Potential obstacles or challenges to positive engagement are identified and plans made to minimise their possible impact.**71%****Strengths:**

- (a) Skills for life screening had been carried out at the start of sentence in 75% of cases. Our meetings with case administrators highlighted that screening for literacy and numeracy was well embedded in the court report production process. At the time of the inspection the area had recently moved to an arrangement whereby case administrators recorded the completion of a screening as a contact on the case recording system.
- (b) In 71% of cases full attention had been paid to the methods most likely to be effective with the offender. Key workers commented that communication between themselves and offender managers was of a high standard. This enabled any potential barriers to engagement to be identified at an early stage.
- (c) In all but one case the REM classification had been recorded.
- (d) Diversity and other individual needs had been actively assessed in 72% of cases. This was supported by some of our interviews with offenders who told us that the area was generally responsive to their childcare and employment commitments. For those offenders where potentially discriminatory factors had been identified (60 cases) plans had been put in place to address them in 74% of cases.

Area for Improvement:

- (a) Where the initial skills for life screening had taken place and indicated a need for a full assessment, this had taken place in only 38% of cases. Offender managers interviewed expressed their belief that the provision for skills for life was unsuitable for offenders. It mainly took place off probation premises in a 'classroom' environment. We were concerned, however, that the decision not to refer for a full assessment was based on the offender manager's view of that provision. We saw limited evidence of discussion with offenders by offender managers on the alternative options available that could support their attendance in that environment.

Conclusion:

Performance against this criterion was good.

1.5 General Criterion: SENTENCE PLANNING

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

60%

Strengths:

- (a) In 85% of cases the offender was allocated to the correct tier, and in 79% of cases the planning accurately reflected the tier. We were pleased to see evidence, on file, of a tiering matrix that demonstrated a structured approach in most cases.
- (b) In 93% of community cases the offender was allocated to the offender manager within the specified time limits. Discussions with case administrators and managers identified a range of processes in place to allocate cases at the earliest opportunity.
- (c) In 94% of cases there was evidence that the offender manager ensured the offender understood the requirements of the sentence and consequence of non-attendance. This was confirmed by the offenders we met who were overwhelmingly clear about the rules of supervision.
- (d) Planned contact levels were included in the sentence plan in 86% of cases and in 81% of cases all arranged contacts were enforceable.

Areas for Improvement:

- (a) While most cases were correctly tiered we found 16 cases that were not. In some cases where the LoR was low but the sentence had a number of requirements, such cases were being managed at Tier 2. In another case where the sentence requirements were less complicated and the LoR low, this was being managed at Tier 3. Although we found evidence of the use of a tiering matrix, the basis on which the offender manager overrode the emergent decision was not always clear. The inspection team was concerned to find that tiering decisions were mainly the responsibility of offender managers and processes for management oversight were inconsistent.
- (b) The overall quality of sentence planning was assessed as insufficient in 57% of cases. The inspection team found that the completion of sentence plans was seen by offender managers as an administrative process rather than an active tool to support the management of offenders. In six cases no sentence plan had been prepared and in 32% of relevant cases the plan had not been completed within the appropriate time frame. In a number of cases the sentence plan objectives were not outcome focused and tended to describe general areas of work rather than specific objectives related to the assessment of need. In just half of the cases were roles and responsibilities of all workers clearly defined. There were similar issues in relation to sentence planning for custodial cases. In only two of the relevant seven custodial cases did the sentence plan distinguish between those elements of work that would be delivered

in custody and those in the community. It was unsurprising that in only 46% of cases, the sentence plan gave a clear shape to supervision.

- (c) In only 32% of cases was there reference in the sentence plan to how any RoH posed by the offender would be managed. It was not always clear from planning documents whether objectives were sequenced according to RoH. In 57% of cases there was no evidence that appropriate consideration had been given to restrictive requirements.
- (d) In 32 out of 63 cases (51%) sentence plans were considered sensitive to diversity issues. Although identified, diversity issues were not always recorded.
- (e) There was limited evidence that the offender had had the opportunity to participate actively in the planning process. In some instances the inspection team came across sentence plans that were not signed by the offender and information in the case record did not always specifically identify that the plan had been discussed with them. In other cases the OASys Self-Assessment Questionnaire had not been completed.

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.

52%

Strengths:

- (a) In 83% of cases, arrangements had been put in place to prepare offenders thoroughly for interventions. We saw examples in case files of timely pre-group work being undertaken by offender managers.
- (b) There were some good examples of offender managers showing commitment to their work with offenders - this was supported by our findings in 72% of cases. We saw several examples of offender managers sign-posting offenders to community resources to meet practical 'help' issues. In some cases there was evidence of ongoing liaison between offender managers, programme tutors and approved premises key workers.
- (c) There were nine cases in the sample that had been transferred between areas; of these, two were assessed as high RoH. In seven cases an updated OASys assessment was received from the exporting area and in eight cases the first appointment to see the offender was made by Kent Probation Area within the prescribed time limits. In only one of the two high RoH cases was the risk management plan updated as required.

Areas for Improvement:

- (a) Overall we found that in only 52% of cases had the offender manager delivered all elements of the sentence in a planned way. In 40% of cases there was insufficient oversight and coordination of input of all workers by the offender manager. In a number of cases we found limited evidence that the sentence plan had been followed through in a consistent way and in 37% of cases the sentence requirements were not fully implemented.
- (b) In 39% of cases with more than one requirement in an order or licence we did not find sufficient sequencing of interventions according to RoH and LoR. Work in the community did not build sufficiently on activity in prison in 48% of cases. Whilst education and substance abuse input was identified here, typically other interventions such as offence-focused work were identified as the key issues requiring further work on release (12 of 15 relevant cases).
- (c) While sentence plans were reviewed in line with national standards in 74% of cases, the quality of content left room for improvement. In a number of cases the review of OASys was a duplicate of the initial assessment, having been 'pulled through' with little evidence

of the sentence plan being updated or a new plan developed. Evidence that the sentence plan was driving the work with offenders was lacking. In 54% of cases the work with offenders was assessed as flowing coherently, and in only 38% of cases did objectives and milestones give a clear direction to the sentence. There was a lack of attention to verifying additional information and in only 32% of cases the sentence plan review integrated other plans as appropriate.

- (d) The quality and frequency of communication in those cases where there was more than one worker was variable. In 65% of cases we assessed the communication between the offender manager and other workers as good. This was particularly evident with approved premises key workers and accredited programme tutors. The figure was lower (57%) for communication between all staff and the offender. In a number of unpaid work cases where there were other requirements, the contact between the offender manager and the unpaid work unit was limited, often leading to the requirements being managed separately. The area was aware of this and an instruction had recently been issued to improve the management of such cases.
- (e) We found preparation for release lacking in a number of cases. There was insufficient positive, proactive and timely work between prison staff and offender managers to manage the transition from custody into the community in two-thirds of cases. There was a lack of contact between the offender and the offender manager prior to release. In some cases the OASys, sentence plan and risk management plan were not updated on release. This resulted, in some cases, in insufficient attention being given to identified criminogenic needs and the inclusion of appropriate licence conditions.
- (f) Of the nine cases that were transferred between areas, a home visit had been made in only four cases (44%). All three Tier 4 cases that had been transferred between areas had a home visit within the timescales prescribed nationally.
- (g) The movement of offenders whilst in custody was not always communicated to offender managers. Of the six cases in the custody sample that had been moved, the move had been promptly communicated to the offender manager in four cases. In none of the cases was the 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.

58%

Strengths:

- (a) RoH was reviewed four months from the start of sentence in 78% of cases and at least every four months thereafter in 82% of cases. In the relevant custodial cases all had been reviewed no later than 12 months after sentence. In those cases managed at Tier 4 there was a higher rate of frequency in reviewing RoH.
- (b) There was evidence of recall being used effectively to promote public protection. In the 12 cases where recall action had take place in relation to RoH issues, all had been actioned appropriately. In nine cases this formed part of the risk management process – i.e. they were recalled because of concerns about the RoH they posed.
- (c) In 21 out of 25 MAPPA cases the offender manager and other workers were assessed as contributing effectively to MAPPA (81%). There was evidence in some of the cases we assessed of ongoing liaison between offender managers and other staff involved in the management of risk. In other cases where additional information required a reassessment of risk and referral to MAPPA this had been promptly actioned.

Areas for Improvement:

- (a) There was room for improvement in ongoing planning to address RoH issues and responsiveness to changing RoH. Planning to address RoH to the public, known adults and staff was not evident in 38%, 40% and 57% of cases respectively. We found that while RoH was being regularly revisited in most cases, this tended to be a duplicate of the initial RoH assessment, with limited evidence of active reviewing or planning of RoH issues. There were also cases where new offences had been committed or additional information was made available that did not always feature in the review of risk. This supported our finding that offender managers were not always proactive in the management of risk and in only 58% of cases were risk factors anticipated. Engagement in internal risk management processes in custody was not evident in seven out of the ten cases in the custody sample.
- (b) Home visits were not seen as a priority in making a holistic assessment of RoH. In high RoH cases, home visits were only carried out as required in 40% of cases (six) and appropriately at a later stage in one case. In eight cases no home visit had been conducted and there was limited evidence on the case record to indicate why this was the case. Where there were safeguarding concerns home visits took place in only six out of 16 cases. In a number of cases the offender manager did not verify with Children's Social Care Services whether there were any identified issues with children residing at a particular address.

- (c) MAPPA were assessed as being used effectively in 17 out of 25 cases and we were pleased to find evidence of proactive joint working with the police public protection unit. However, there were eight cases where MAPPA were not used to their full potential. In some cases, MAPPA meetings were convened just prior to release from prison, leaving insufficient time for planning appropriately for release. In other cases there were few multi-agency structures to manage risk other than the offender manager working individually with the offender. MAPPA decisions were not always recorded and integrated with sentence planning documents.
- (d) In five recall cases, there was no evidence that clear explanations for the recall had been given to the offender and efforts made to re-engage them.

Conclusion:

This criterion represents an **urgent priority** for improvement.

2.3 General Criterion: VICTIMS

Consistent attention is given to issues concerning victims.

56%

Strength:

- (a) There were examples of constructive liaison with victims by the VLO, including one case where a 'non contact' condition had been applied to a licence despite the victim choosing not to have contact with the VLO. In those statutory victim contact cases where the victim had taken up the offer of contact with the VLO, 71% had had the opportunity to contribute to setting licence conditions. 83% of victims had been informed of release conditions and 82% were informed of the offender's release in a timely fashion. Victims that were interviewed as part of the inspection held the work of the VLO in high regard, with one victim stating that they felt "*better protected*".

Areas for Improvement:

- (a) Victim safety was given appropriate priority in 65% of cases (31 out of 48). There were examples of victim safety not being promoted from within the custodial setting - in only two out of four cases had this occurred. Potentially fertile prison sources of RoH information such as mail and visits' monitoring were not always considered by offender managers.
- (b) There was evidence that a timely written offer of face-to-face contact was made in only 12 out of 23 statutory victim contact cases and information about the criminal justice process provided in only 15 cases. Where victim contact occurred this was well managed and we saw cases where appropriate licence conditions to protect victims had been set. However, in a number of cases it was difficult to evidence whether victim contact had taken place due to the

quality of recording. In some cases the offender manager had not considered it their role to liaise with the VLO to confirm victim contact had taken place. In six cases there was no evidence that any victim liaison had taken place when it should have done. In other cases there was insufficient recording on the file.

- (c) We were disappointed to find that in 64% of cases there was no evidence that victim awareness work had taken place where it was required. In some cases this may have been due to a lack of recording, while in other cases victim work was not identified as a key objective in sentence planning and therefore not focused within the supervision process. In a small number of cases the offender manager did not see victim work as a high priority and did not sufficiently link work on victim awareness to the management of RoH.

Conclusion:

This criterion represents an **urgent 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.

78%

Strengths:

- (a) In all six custodial cases, satisfactory arrangements had been put in place to restrict the offenders' liberty during their sentence. There were no reported escapes or significant security threats in the custodial sample inspected.
- (b) Almost all offenders received a timely induction at the start of their community order or licence (92%). We found evidence of good attention to some elements of attendance management. Overall the frequency of contact conformed to national standards in 93% of community cases, facilitated the requirements of the sentence in 84% of cases and supported the achievement of sentence plan objectives in 84%. The frequency of unpaid work sessions was sufficient in 29 out of 38 cases and facilitated the requirements of the sentence in 31 cases.
- (c) Monitoring of attendance and enforcement practice was at a high standard. There was evidence of offender managers monitoring attendance in 92% of cases. Where there was an additional curfew or exclusion requirement this was effectively enforced in ten out of 11 cases.
- (d) Judgements about the acceptability of absences were consistent and appropriate in 92% of cases. Where breach action had been deemed necessary effective action had been undertaken in 87% of cases and

resolved in 79% of cases. The timely instigation and resolution of enforcement for the 13 relevant cases managed at Tier 4 was 100%.

- (e) Case files were judged as well organised in 83% of cases, the recording of information was clear in 86% of cases and timely in 85% of cases.
- (f) In nearly three-quarters of unpaid work cases, placements were judged to be suitably demanding and of benefit to the community. In the five cases managed at Tier 4, four had been assessed as suitably demanding and matched to the offenders' needs. Key workers commented that some high RoH cases and all sex offenders had restricted placements that were always supervised.

Areas for Improvement:

- (a) In 59% of relevant custody and licence cases there was insufficient contact between the offender manager and the offender prior to release. In some instances offender managers attributed this to the newness of the implementation of phase two of the offender management model.
- (b) Of the nine PPO cases, there were five cases where the level of reporting was not enhanced and had not supported all elements of the sentence. In two cases the sentence was a standalone unpaid work requirement, where minimum weekly reporting was required. In our discussions with offender managers we were advised of a police officer vacancy in one of the PPO teams, and that this impacted on the availability of additional surveillance and information.
- (c) Recording of information was judged to be sufficient in only 49% of cases. While information recorded was assessed as clear and timely it was not always sufficiently detailed. In discussions with offender managers it was clear that thought had been given to how the case would be managed but in a number of cases the recording of this was sparse and often did not reflect the work undertaken during an individual contact.
- (d) As indicated by comments from the offenders interviewed, the matching of offenders to unpaid work placements was evident in 68% of cases. Interviews with key workers indicated particular problems in recruiting weekend supervisors to resource sufficiently a number of placements.

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.

49%

Strengths:

- (a) Sufficient work and resources were directed at community reintegration issues in 72% of cases. There was evidence of offender managers liaising with both partner agencies and community based services to meet offender needs.
- (b) For offenders in custody there was evidence that immediate action was taken to preserve employment, accommodation and family ties in four out of the five relevant cases, and positive community links and resources in five out of the relevant seven cases.
- (c) There was good access to initial ETE advice and employment interventions. ETE surgery sessions provided detailed information, advice and guidance relevant to the offenders' needs. There was a strong focus on offender specific issues such as making disclosure of past offences in job and training applications. Offenders also benefited from the ALPS project, which provided short training opportunities and careers advice. The *Transit to Work* programme was considered effective at developing offenders' potential to obtain and sustain employment.
- (d) There was evidence that residents at the approved premises in Maidstone could access specialist interventions such as drug treatment. We saw examples of motivational interviewing and pro-social modelling taking place, although these interventions were not always featured in the sentence plan. All the offenders we met at the approved premises commented positively on their increased confidence in accessing community resources.

Areas for Improvement:

- (a) Constructive interventions were considered to meet the 'help' and 'change' sentencing objectives in 58% of cases. In 56% of cases constructive interventions were assessed as sufficient in challenging the offender to accept responsibility for their offending behaviour and its consequences. This was partly compounded by the lack of recording to evidence that offence focused work had been undertaken. While we were pleased to see evidence of offence focused worksheets in some cases, these were not consistently used where needed. In a small number of cases there was no evidence of offence focused work, while in others work tended to be directed towards practical issues rather than the factors that contributed to the offending behaviour.
- (b) In ten out of 24 cases (42%) where there was an accredited programme requirement, its provision and timing were not consistent with the sentence plan. Clear and acceptable reasons for this were not recorded in nine of those ten cases. We found improved practice in timing and provision of programmes for those

cases managed at Tier 4. There were considerable delays in the commencement of programmes, which was disappointing given that this issue had been identified in a previous ESI and a recommendation made to reflect this. There were difficulties with sufficient programme availability in the evening for employed offenders and this was particularly relevant for the OSAP programme. Programme tutors confirmed lengthy waiting lists for programmes, and a lack of programme tutors.

- (c) For those cases where the need for a skills for life intervention was identified, arrangements had been put in place to deliver this in only 36% of cases. There was limited skills for life provision offered on probation premises, with most taking place off site in colleges and other educational establishments. In addition, provision across the county was inconsistent with some parts of the area having no provision at all. The lack of appropriate skills for life provision was having an impact on overall service delivery and the achievement of targets.
- (d) There were no skills for life provision or accredited programmes that took place within the approved premises.

Conclusion:

This criterion represents an **urgent 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.

82%

Strengths:

- (a) Restrictive interventions were fully monitored in 94% of cases and in 74% of cases every reasonable action had been taken to minimise RoH.
- (b) In all three cases the approved premises were being used effectively as a restrictive intervention. There was evidence of timely liaison between offender managers and approved premises key workers, although attendance at three-way meetings was inconsistent. An information exchange protocol and SLA between interventions and offender management for the approved premises had been established. Both documents set out clear expectations for practice in RoH management in the community. Approved premises staff were clear regarding their contribution to public protection and the offenders we met there were also clear about what action would be taken if they failed to comply with their sentence and the approved premises rules.
- (c) In all cases licence requirements were assessed as necessary and, in the vast majority of cases, proportionate to the RoH and LoR. We saw evidence of prompt action in two cases released on licence at

short notice to apply for licence conditions that protected the public and victim.

Area for Improvement:

- (a) Of eight released PPO cases where drug misuse was identified as a need only two had an additional licence condition to address that need.

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) Arrangements for interventions took account of the offenders' diversity issues in 74% of cases. We saw examples of reporting being scheduled to support offenders' employment and childcare commitments. In other cases there was recorded justifiable decision-making leading to the exclusion of some offenders from group work programmes based on health and in one case age barriers. Overall we were pleased to find a staff group that were in the main alert to diversity issues; however, consideration given to how an offender's case would be managed to meet diversity needs was not always fully recorded in planning documents.
- (b) In the two approved premises cases where diversity needs were identified, both needs were met by the approved premises regime. Key workers gave a range of examples from contacting other cultural organisations to gain further insight into offenders' culture and religion, to attempts made to meet offenders' cultural dietary needs. In addition, approved premises rules had been translated into different languages.
- (c) In 96% of the sample, offenders had been clearly informed that discriminatory behaviour would not be tolerated. In a small number of cases we saw evidence of offender managers who were confident enough to challenge discriminatory remarks made by offenders.

Area for Improvement:

- (a) Of the four minority offenders who were singleton placements on a programme, only two had given their consent to such a placement. Additionally, the composition of staff and arrangements to support a single minority offender in a mixed setting had been actively considered in only a third of such cases.

Conclusion:

Performance against this criterion was good.

3. ACHIEVEMENT AND MONITORING OF OUTCOMES

3.1 General Criterion: ACHIEVEMENT OF INITIAL OUTCOMES *Planned objectives are efficiently achieved.*

50%

Strengths:

- (a) The management of offenders' RoH within the approved premises was seen as a clear strength. There was a range of restrictive measures that met the 'control' sentence objective in place, including alcohol/drug testing and monitoring and CCTV. Fast track enforcement arrangements were in place in the event of failure to comply and we saw a number of cases where recall was promptly implemented.
- (b) There was evidence of some responsiveness to changes in RoH issues. In 18 cases there had been an increase in restrictive interventions and a decrease in three cases. In three cases there was an increase in the MAPPA level and a decrease in five cases.
- (c) In 72% of cases (79) the offender had not been cautioned or convicted of a further offence.
- (d) The resources allocated to the case were consistent with the offenders' RoH in 77% of cases and LoR in 80% of cases. Overall resources were used efficiently to achieve the outcomes planned for the offender in 74% of cases.
- (e) The 'punish' sentencing objective was achieved in 85% of all cases, and in 92% of all Tier 4 cases.
- (f) There was evidence of community payback schemes being of benefit to the local community. Two schemes were entered for awards in 2007, of which one won the Howard League for Penal Reform's Community Programmes award. The award was made in recognition of the reparative work benefiting the public and the skills given to offenders. The other (Thanet) was a runner-up at the national Justice Awards 2007 for its outstanding contribution to engaging communities.
- (g) Attainment and retention of employment was good. In the first six months of 2007/2008, 292 offenders entered sustained employment compared to a period target of 173, representing a performance over target of 141%. Generally there was good attainment by those offenders on *Transit to Work* programmes with high rates of retention and achievement: 93% retention, and 100% pass rate for those completing. Offenders exhibited good development of personal and social skills and improved awareness of employers' requirements, such as punctuality and responsibility.

Areas for Improvement:

- (a) There was limited evidence that the offender had demonstrated increased victim awareness; in only 15% of relevant cases was this

judged to have occurred. In only 20 cases (19%) was there evidence of a reduced threat to victims and potential victims.

- (b) It was concerning that in nine of the 23 cases where there was evidence of domestic violence it was not known whether the offender manager had contacted the police domestic violence unit to enquire about call out reports to addresses linked to the offender. It was therefore unclear how RoH issues were being addressed and managed in these particular cases.
- (c) OASys had been rescored in 69% of cases. In a number of cases the basis of the rescoring was unclear. There was limited recorded evidence to substantiate the scores and in a number of assessments historical and irrelevant information had been 'pulled through' the assessment making it difficult to judge where progress had been made and how. The most recent OASys score showed an improvement over the initial score in only 32% of cases. Progress against criminogenic needs had largely remained unchanged or had deteriorated across the top three priority factors. There was no demonstrable positive change in attitudes and behaviour in 55% of cases. Learning outcomes and skills had improved in only 37% of cases.
- (d) In six out of nine PPO cases, there was no evidence that the offenders' PPO status was matched to increased resources.
- (e) It was surprising that in only 65% of cases had the 'control' objective been met, despite the attention given by offender managers to compliance and enforcement. Across Tiers 2, 3 and 4 the 'help' objective had been achieved in only 44% of cases and the 'change' objective across Tiers 3 and 4 in 29% of cases.
- (f) There was limited evidence of benefits to the community as a result of the sentence aside from unpaid work undertaken - but this was only in 58% of cases. Only 56% of offenders had complied with the requirements of the sentence. This was in part due to the lack of offender motivation. In other cases there was evidence that requirements had not been fully implemented, an example of this was the long waiting lists for some accredited programmes. The reduction of seriousness of offending and the frequency of offending was evident in only 14 and 24 cases respectively.

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.

57%

Strength:

- (a) In 81% of cases offenders were made aware by their offender manager of community organisations which might assist them in the longer term.

Areas for Improvement:

- (a) There had been a single offender manager in only 20% of cases. 25% of the sample had had three or more offender managers and we judged that these changes had had a detrimental effect in over half of these cases. In a number of cases there was a lack of continuity of work; assessments were not always sufficiently reviewed, leading to poor initial decisions being carried throughout the sentence.
- (b) There was a lack of structured sentence planning in 60% of cases. The inspection found that offender managers were not actively using the tools available to them to provide a structured approach to the management of the sentence. In particular the review and reassessment of work overall was not a high priority and appeared to focus on meeting timescales within processes as opposed to focusing on the more qualitative aspects of offender management.
- (c) Consolidation of offender learning to reinforce new skills was evident in only 49% of cases.
- (d) Full attention had been paid to long-term community integration issues in 67% of cases. Offender managers reported difficulties in accessing appropriate accommodation generally and specifically for high RoH 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 Area Business Plan 2007/2008 was modelled on the four priority areas identified by NOMS as reflecting both national and regional criminal justice priorities. A consultative planning framework had been established. The draft Business Plan was shared with the LCJB and other relevant boards e.g. Children's Safeguarding Board. The Plan was also shared with middle managers. There were clear stated links to the SLA with the ROM and a number of improvement objectives in key strands of work such as managing people and working with partners. The area had taken the national priority of building confidence in the CJS and translated it into a local target. A specific local action plan was in place with a clear focus on improving engagement with those people from black and minority ethnic communities. There was an expressed link to the area's organisational risk process, which focused on external, performance and reputation risks. A description of the impact on the business, plus controls in place for managing the risk and an owner for each risk were clearly outlined. A process of performance scrutiny had been implemented by the area. Review against the Business Plan was done monthly by the SMT, quarterly by the board audit committee and annually by the Board.
- (b) The Board and the SMT placed a high priority on providing performance information at all levels of the organisation. This included using electronic media and team briefings. Board members were also involved in attending team meetings to share information and take back to Board meetings staff concerns. We interviewed 87 individual offender managers, 70% of whom felt well informed about policies and procedures in their area. A process of communication to raise ownership of performance was in place. Business Plan objectives were allocated to a Director and translated into district plans, each with its share of the area targets. Individual performance objectives were set annually, linked to the Area Business Plan and monitored through the appraisal process.
- (c) The area was well engaged with the LCJB, which was chaired by the area's CO. While there had been inconsistent relationships with sentencers in the past, formal arrangements for liaison were now in place. The CO met with bench chairs three times a year and on occasions with Crown Court judges. The area also had a dedicated

area manager with responsibility for court relationships and providing information on performance in courts. Formal liaison at bench level was the responsibility of middle managers. The area had engaged well in the implementation of the CJSSS and feedback from strategic partners supported this. As a result a joint protocol had been agreed to improve the provision of FDRs.

- (d) There was a strong demonstrable focus on partnership work by the CO, Board and SMT. The area worked across 13 districts and two local authorities: a county council and a unitary authority. Despite the complexity of the local arrangements, work had been undertaken to ensure there was appropriate representation at the range of different boards. Strategic partners commented positively on the attendance of staff, although there were some concerns expressed that the seniority of staff representation was not always sufficient to progress issues quickly. Partners valued the efforts made by the area to provide a more strategic joined up approach to the management of offenders and their needs. The area contributed to the LAA, safer stronger communities block through two strands of work; managing drug misusing offenders and the PPO scheme.
- (e) Strategic partners and key workers commented favourably on the area's commitment to partnership work and its engagement with them. There was a strong sense that the area was willing to learn from other bodies and there was a continued focus on improving its performance. A range of partnerships to provide services for offenders were in place including a counselling service and a children and family service. There had been successful collaboration with the county council in respect of Addaction; this provided alcohol services for offenders following an OASys needs analysis in part of the county.
- (f) The number of prisons across the county presented a particular challenge for the area. The area had responded well to this at a strategic level and was highly regarded by prison representatives for their proactive leadership in implementing offender management, particularly in the Sheppey cluster. There was a nominated prison offender management lead who described close working relationships with their counterpart in the area. A multi-agency offender management committee had been established and was jointly chaired by the area and HMPS. The committee met quarterly to review the effectiveness of offender management implementation across the two organisations. Outcomes from the committee included a process for escalating cases where there was no allocated offender manager and the development of video conferencing to facilitate sentence planning. There had been joint offender management training in the prisons and probation area. A specific KPI had been developed in the Sheppey cluster to improve prison service attendance at MAPPA meetings and further work was being discussed to improve the quality of written information provided at these meetings. The area was described by the prison representative as *"one of the best areas, as they know how Kent prisons work"*.
- (g) There was a high degree of commitment to public protection by the area at a strategic level as was evidenced in the MAPPA Strategic

Management Business Plan. Partners commented favourably on the integrated approach taken to working towards the common goal of risk management. Examples were given where the area had used the findings from other boards with a public protection remit to improve the way in which the MAPPA SMB worked. Both the area and police had agreed to provide additional support to the chairs of boards through appropriate training. The development of CDAP was seen as a further example of the area's partnership approach to public protection. This joint programme worked voluntarily with perpetrators of domestic abuse and was supported by the police and a women's safety worker. Supporting People was a key member of the MAPPA SMB and plans were in place to agree a protocol to improve high RoH offenders' access to housing advice and 'move on' accommodation. The approved premises were seen as a key plank in the area's contribution to public protection and were highly valued by partners.

- (h) A race equality scheme and action plan for 2005-2008 had been published. The action plan had identified key priority areas that cut across national, regional, local and area priorities. There was also a stated aim to increase consultation with black and minority ethnic communities. The key aims of the scheme had been translated into a 'user friendly' leaflet for all staff. Updates in this key area of work were supported by the area's Diversity Action Group, which had responsibility for consulting upon and reviewing the diversity action plan. Key workers were aware of the work of the Diversity Action Group and this had contributed to the revision of some processes to include diversity as a standard item. The decision to work with non-UK residents in custody, the development of a women's group and focus on hate crime were all examples of the area's approach to managing diversity issues. The area's disability equality and gender equality schemes had also been published. All schemes were reviewed annually by the Board.
- (i) There was evidence that the area took seriously action by NOMS to support its performance. Following concerns expressed by NOMS the area had developed targeted action plans that contained projected milestones for performance improvement. Improvement work was reported to and overseen by the board audit committee. Following this intervention the area had moved from a one star to a two star rating under the NOMS performance management framework. Relationships with the ROM were described as positive. There was an acknowledgement that as the area moved towards a greater level of commissioning, there would be improved clarity of the relationship between the area and the ROM's office.
- (j) The area actively welcomed the findings of other outside bodies. Examples included the Investor In People Award, which the area successfully gained in 2007.

Areas for Improvement:

- (a) Whilst the area had made use of user surveys for unpaid work in the recent past, there was limited evidence that service user views were

used to inform strategic planning in a broader and routine way.

- (b) Despite the arrangements in place to liaise with sentencers only 55% of sentencers that responded to our survey felt satisfied with current liaison arrangements. Only four out of 11 sentencers had received the information they needed about current probation practice and policy. There was general support among sentencers about the need for more routine performance information on sentencing. Although there were many positive comments made by sentencers on the quality of court staff, there was an emerging concern that the provision of staff in courts was not sufficient in some parts of the county.
- (c) While the area made a significant contribution to MAPPAs, internal risk management procedures were lacking. The risk management policy was dated 2005 and had not been updated. It was unclear, in the absence of a comprehensive policy, what was expected from staff. The SMB had not developed a consistent approach to account for those offenders managed under MAPPAs Level 1, who were not registered sex offenders. There was also an acknowledgement amongst partners and the area that there were too many offenders managed at MAPPAs Level 2 and 3 by comparison with the national average. The area had commenced an audit, managed jointly by the area lead on MAPPAs and the police, of all Level 2 offenders and were due to report on this in the new year.
- (d) 67% of offender managers interviewed said that managers demonstrated a professional management approach, and 65% felt they modelled positive leadership behaviour. A significant minority felt that managers demonstrated neither. Offender managers were generally positive regarding their own line manager, but less so about senior management. There was a sense that the drive towards improved performance was at the expense of quality. Some staff felt that caseloads were too high. At the time of the inspection the area was engaging in a difficult staff direction process in order to balance resources to support offender management. Concerns were expressed by some staff interviewed regarding the way in which the area had managed the direction of staff from offender management to interventions and in these cases this was a contributory factor to their response. While the exercise had been undertaken with HR and union consultation, some staff members commented that communication on progress had not always been forthcoming, leaving them uncertain of where they would be placed.
- (e) There was some evidence that the area had given attention to diversity issues in its strategic planning through an ongoing objective to increase the profile and engagement with the local black and minority ethnic communities. The diversity impact assessment on offender management, interventions and HR, however, had only recently started as a pilot and did not appear to be a focal part of policy development.

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 Kent from the NOMS Integrated Probation Performance Framework (IPPF): April-September 2007

IPPF domain	
Public Protection	Outstanding Performance
Offender Management	Passable Performance
Interventions	Passable Performance
Operational Capability, Resource Use and Strategy	Poor Performance

Area score	Passable Performance
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Detailed results for each metric making up the above domains are at Appendix 1.

Strengths:

- (a) A focus on performance improvement was evidenced through the area's steady improvement against the NOMS weighted scorecard. In 2006/2007 Kent's performance had been ranked 17th out of 45 areas. In the first quarter of 2007/2008 Kent was judged by the new Integrated Probation Performance Framework as a 'one star' and the NOMS Performance Improvement Unit undertook targeted improvement action to examine elements of underperformance. Performance improvement was taken seriously by the area and improvements in the timeliness target for OASys assessments had been driven by a detailed analysis of underperformance and the sharing of best practice in those districts that were meeting the target. Since the above, there had been a positive improvement in public protection and in the most recent quarter the area had been awarded two stars.
- (b) A performance and standards manager had been on long-term sick leave. At the time of the inspection a manager had been appointed on an acting-up basis. The area had an established monthly performance reporting structure that was applied throughout organisational structures. This was complemented by a range of meetings established to review performance. These included monthly district meetings between middle and district managers, county group meetings and middle manager 'action learning sets' that involved a manager focusing on key areas with a view to developing ideas on how to improve and spread best practice. Middle managers were aware of their role in the performance improvement agenda and there were individual examples of ownership of improved performance at a team level.
- (c) The CO was positive about the area's approach to regional work in several areas of service delivery. A regional contract had been agreed to provide unsociable hours cover across the south east region. There were regular meetings with regional COs and chairs of boards. Kent was involved at a regional level in a number of work streams, including best value reviews on unpaid work and approved premises to identify which areas were providing the best value across services. The area had also engaged in regional OASys benchmarking exercises.

Areas for Improvement:

- (a) The area had struggled to meet the target in relation to skills for life, despite previous good performance and programme completions. There was evidence that the area was beginning to address underperformance in skills for life, with the development of an action plan. The operational group to review performance in relation to this target had been established but the strategic group, where executive decisions would be made, had yet to be set up.
- (b) Despite some evidence of analysis of race and gender data, there did not appear to be a routine process to establish and address

inequalities. It was not clear how the analysis of diversity data was used to support the achievement of targets. Not all staff were aware of the Diversity Action Group and the work it was undertaking.

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.

Partly met

Strengths:

- (a) The area had followed the national model for the implementation of offender management, by creating OMUs and an interventions directorate. Workforce planning was based on a transparent resource allocation process to deploy staff and maintain the balance of POs/PSOs in offices according to the demands of the work. The area had undertaken the difficult task of taking corrective action to re-distribute staff to those areas with the highest demands in work and ensure that there were adequate resources in the delivery of interventions.
- (b) Resources were focused on those offenders presenting a high RoH. The tiering system was utilised so that all offenders in Tier 4 were managed by POs and all SDRs were written by POs. PSO grade staff managed 50% of Tier 3 offenders, all Tier 2 and 1 offenders and wrote 50% of FDRs. A specialist sex offender consultancy resource was made available county-wide to provide advice on court reports and interventions for high RoH sex offenders. Forensic psychologists were also part of the consultancy team and were available to provide support and advice to offender managers.
- (c) There was a transparent process for prioritising and allocating work. The area had fully implemented the national workload management tool. The tool was supplemented by additional information from the tiering structure to respond to local needs. Nominal maximum workloads had been identified in each of the ten offices across the county.
- (d) There was some evidence that the area had sought to maximise the resources it received. The area had been successful in attracting additional ESF funding to provide interventions for offender management. The Exodus project was an example of this. This 2 year pilot project provided PPOs with additional supervision and access to interventions. At the time of the inspection it was being evaluated by the University of Kent at Canterbury. The SMT had acknowledged the need to consider mainstreaming provision when planning to seek additional funding. They expressed concerns at the impact short-term funding could have on staffing and provision.

Areas for Improvement:

- (a) While some respondents to our sentencers' survey were impressed with the skills and knowledge of court staff a number remained dissatisfied with the level of staffing in court.
- (b) From case files and interviews with offender managers it was not always evident that PPOs received a premium service. In a number of cases the level of reporting was not enhanced above minimum levels.
- (c) We were pleased to see that the area had developed a range of equality schemes and action plans in response to their statutory duty. However, it was evident that the area had only recently begun impact assessments and as such translation into practice was not demonstrably evident. There were few identified diversity initiatives developed.

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.

Partly met

Strengths:

- (a) There was evidence that the SMT monitored and anticipated staff vacancies and this had been included in the budget report for 2007/2008. This information was used to inform workforce planning to ensure that the right staff profile was matched against service delivery requirements and the constraints of the budget. The area had implemented the 'cluster' working arrangement to support offender management and continuity of work. Staff interviewed commented positively on this approach to working, in particular case administrators felt more integrated and considered themselves more knowledgeable about specific offenders. The vast majority of offender managers (91%) were clear about their role within the offender management model. Although there was no operational offender management practice guidance, implementation guidance on phases one and two were posted on the area intranet.
- (b) The area's training plan was based on priority objectives that were linked to the achievement of the Business Plan. The Plan was costed and designed to address organisational needs as well as individual developmental needs. There was a commitment to professional development and all of the SMT had attended the NOMS/NPD Living Leadership Programme with the Directors supported through an MBA programme. The area had developed a learning and development programme for PSO offender managers. The programme was based on the central curriculum developed by NOMS and split into three modules to allow greater flexibility in matching gaps in learning to provision. Plans were in place to deliver two of the modules to all existing staff by March 2008.

- (c) Sufficient attention had been paid to the learning opportunities for TPOs. Since cohort six, the area had delivered a newly qualified first year officer programme. The group, facilitated by PDAs, provided a forum where key areas of practice could be discussed and new officers gain additional support.
- (d) A comprehensive supervision policy agreed with the unions was in place. The policy provided a consistent framework within which the area supported and held to account its staff. Some offender managers we interviewed commented that supervision had become more standardised and focused. Staff expectations were clearly laid out and additional guidance was provided to managers on what supervision should cover. The vast majority of staff (81%) had had an appraisal within the last 12 months and a similarly high figure (92%) confirmed that it was linked to the Area Business Plan.

Areas for Improvement:

- (a) Overall 61% of offender managers felt that their training and development needs had been met. The figure was considerably lower for PSO offender managers at 46%. A small number of PSO offender managers had not been able to access the NVQ level 3 training. A factor that compounded this was the lack of full-time training officers and a reliance on existing staff that had completed the programme to deliver it. A recurrent theme expressed by offender managers was the impact that high workloads and staff absenteeism through sickness was having on their ability to prioritise workloads and attend appropriate training. For some of the PSO offender managers there was a feeling that changes in offender management and tiering had led to them working with more complex cases, without sufficient training and support. A further contributory factor was the lack of middle managers in some teams across the county to provide appropriate support and management oversight of work.
- (b) Although staff sickness levels were marginally above the national target for the full year 2006/2007, this had increased to 12.7 days against the target of nine days according to the NOMS performance data. The SMT and the Board had invested significant resources into managing this. The HR directorate had taken responsibility for monitoring long-term and short-term sickness absence. Sickness absence procedures were in place and nearly all of the offender managers we interviewed were aware of these. Middle managers were complimentary regarding the support they received to manage sickness absence and all had had training in how to conduct back to work interviews appropriately.
- (c) Despite some positive comments made by staff in relation to improvements in supervision, only 46% of all offender managers received regular monthly supervision. We were concerned that 62% of PSO offender managers did not receive frequent supervision on a monthly basis. A significant minority of staff, 35%, described the overall quality of supervision as insufficient. A number of staff

commented that supervision was often cancelled and when it did take place, was overly focused on performance with limited opportunities for professional support on the development of quality practice.

- (d) Just over half of the offender managers interviewed (53%) recalled having completed an ethnic monitoring questionnaire.
- (e) There was evidence of tensions in the working relationship between the area and the union; indeed, NAPO remained in dispute with Kent Probation Area. While there was evidence of ongoing dialogue with unions, and evidence of efforts being made on both sides, there was less evidence of successful outcomes.

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

Partly met

Strengths:

- (a) There was good evidence that the area used monitoring information to inform and improve compliance with key standards. Staff commented on the regular publication of performance data, which showed at team and district level how well they were performing against a range of targets. There were a number of examples of this information leading to changes and subsequent improvement in performance. The area had taken seriously the number of SFOs committed in Kent during 2006/2007. A detailed review of learning points had been made and the SFO procedure for identification of potential SFOs was recognised by the NOMS Public Protection Unit. A systematic process for sharing information on an individual basis through middle managers and an area-wide basis was also in place. An example of this was the dissemination of learning points in team briefings. The review of key learning points was the responsibility of the Director of Interventions and following a report to the Board it was agreed that this would be reported on annually.
- (b) There was evidence of the use of aggregated OASys data to inform service delivery. Alcohol services had been commissioned and piloted in east Kent as a result of OASys analysis. There were also plans to develop specialised support services and interventions for offenders with learning disabilities who also presented sexually inappropriate behaviour.
- (c) There was evidence of some monitoring of service user feedback. The area had consistently captured the views of unpaid work beneficiaries. All beneficiaries were invited to provide feedback, which was analysed and summarised in a report. Resident feedback questionnaires had been routinely used in approved premises. Approved premises policies had been impact assessed for diversity issues leading to the introduction of Braille and signage services.

Areas for Improvement:

- (a) While there was some evidence of collating user feedback, this was not comprehensively applied across all service delivery strands. There was little evidence that stakeholder views were routinely collated, evaluated and used to improve the quality of provision.
- (b) The area did not make regular use of concordance data relating to proposals and sentence.
- (c) The area had recognised that the review and evaluation of service delivery was an area that required improvement. Partner agencies commented that they did not routinely receive information on outcomes. Similarly while the ETE officers routinely gathered a vast amount of data, this was only used in relation to the monitoring of targets. Information about the quality of provision and views of users was underdeveloped.

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) There was evidence that senior management held a positive view about commissioning. A contract/commissioning manager had been appointed to lead a commissioning unit. Partners commented that all contracts were governed by a SLA with clear performance indicators and quality standards. There was evidence of contracts being monitored and enforced. For example a contract with a provider of drugs services had been terminated as a result of underperformance. The area was represented on both the DAT and Supporting People commissioning board.
- (b) The area had developed a sub-contracting plan for 2007/2008 to strengthen its existing partnership arrangements and future commissioning arrangements. There was a commitment by the SMT to commission only those services that would yield best value results. The plan had identified a number of work strands where joint work would maximise the benefits for offenders. The area had been successful in contracting out antisocial hours cover for approved premises, providing counselling for IDAP facilitators and the provision for ETE mentor support in part of the county. There was a range of partnership arrangements in place to deliver offender services, including a contract with the court to undertake legal proceedings on behalf of the area. Partners were complimentary about the area's approach to using local services, both community and voluntary.
- (c) Offender managers generally rated services used as sufficient with employment a clear strength; 93% of offender managers asked were pleased with this provision.
- (d) The area had implemented a women's only Think First group and

Cognitive Skills Booster programme. The area had also planned to deliver OSAP for women. While a joint bid with the health service to provide services for sex offenders with learning needs had been made, at the time of the inspection this provision had not yet materialised.

Areas for Improvement:

- (a) There was no structured strategic process for collating and evaluating the user perspective to inform commissioning. Strategic partners also commented that this was an area that required further development.
- (b) Offender managers identified gaps in service provision in 37% of cases. This related mainly to alcohol, accommodation, education and training services. While resources had been put into providing alcohol services this was not yet consistent across the whole county. The area had expressed considerable concerns with the OLASS commissioned services. The present provision for skills for life support was insufficient and ineffective. OLASS funding for skills for life now placed emphasis on delivery to groups of learners through the Skills Plus Centres run throughout the county. Only at the OMUs at Tunbridge Wells, Ashford and Folkestone were sessions still delivered on site. Since the change to deliver skills for life externally the number of offenders with literacy and numeracy needs being referred for support had declined. At the time of inspection fewer than 50 offenders were attending skills for life classes, of which only five were attending Skills Plus Centres across Kent.
- (c) The provision for ETE services for high RoH offenders was inadequate. There were few opportunities for learning and skills for life to be delivered on approved premises and generally there were insufficient providers to whom high risk learners could be referred. Key workers at the approved premises made referrals of offenders for ETE through the offender managers. Offenders only met with ETE officers at the OMUs, and, owing to ETE officers' workloads, a delay of several weeks in getting an appointment was not uncommon.
- (d) While the area had engaged well with MAPPA and Supporting People, there was a lack of suitable 'move on' accommodation for those high RoH offenders at the end of a required period of residence. This was also noted as a key issue by some strategic partners. The area had acknowledged this and plans were in place to reshape existing resources to provide a more comprehensive accommodation service across the county in partnership with external housing providers.
- (e) The area had not met the 5% target spend on partnerships in 2006/2007 and were not on target to meet the 10% target for 2007/2008. The present projected spend was between 5% and 6%. While the sub-contracting plan was a positive move towards remedying this, some strategic partners commented on the need for the area to improve its role in joint commissioning. At the time of

the inspection there were no jointly commissioned services in place.

- (f) Despite the active input into offender management in prisons, the quality of relationships between offender managers and prisons was variable. We saw some individual examples of effective working arrangements between the two organisations. However, this was not consistent and in 32% of relevant cases concerns were expressed about the effectiveness of liaison and working arrangements between offender managers and prison-based offender supervisors. In the case files we assessed there was little evidence of routine communication and information sharing. From our discussions with offender managers, many commented that they were still 'getting to grips' with the expectations of phase two.

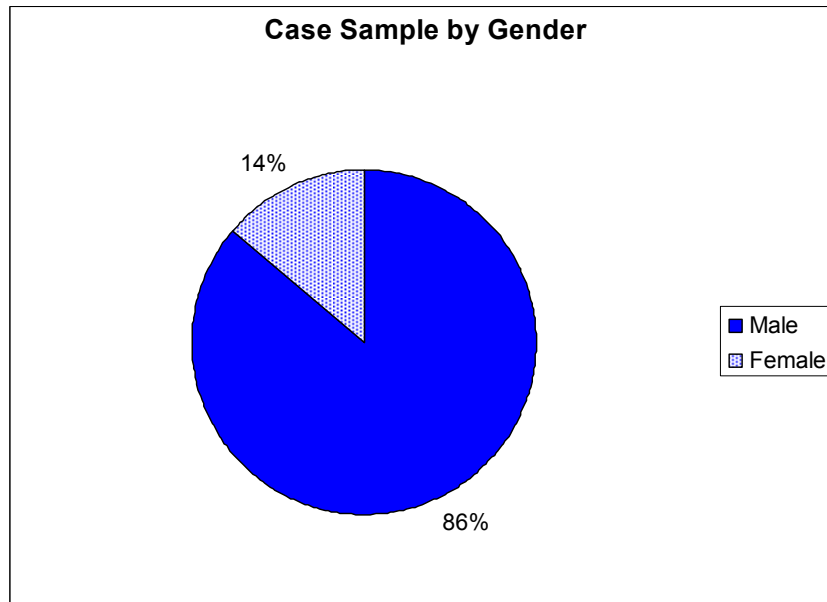
APPENDIX 1 Integrated Probation Performance Framework: April-September 2007

IPPF										Q2										IPPF Area Score										2										Kent																					
IPPF Domain Score:					IPPF Domain Score:					IPPF Domain Score:					IPPF Domain Score:					IPPF Domain Score:					IPPF Domain Score:																																				
Public Protection	Actual	Target / Milestone	National	Previous Year - Q2	IPPF Grade	Offender Management	Actual	Target / Milestone	National	Previous Year - Q2	IPPF Grade	Interventions	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	86%	90%	83%	79%	3	NS Offender Management	8.1%	90%	77%	79%	3	NS Interventions	75%	90%	64%	79%	2	Sickness Absence	12.7	9.0	11.7	9.4	1																																						
Tier 4 OASys Assess	94%	90%	96%	n/a	3	Enforcement (Within 10 Days)	92%	90%	94%	94%	3	Upaid Work Completions	927	708	27306	831	4	Ethnic Monitoring	####	95%	97%	####	4																																						
PPO OASys Assess	96%	90%	96%	n/a	3	% Arranged Appointments Attended	85%	85%	85%	82%	3	Accredited Programme Completions	142	175	5834	181	1	Budget Variance	10339	10074	414618	9933	1																																						
Victim Contact	98%	85%	93%	95%	4	Cases Reaching 6m Without Requiring Breach Action	72%	70%	71%	68%	3	Sex Offender Treatment Programme Completions	8	12	293	11	1	Sub-Contracting																																											
Tier 1, 2 & 3 OASys Assess	Data Available in Q3					Court Report Timeliness	95%	90%	95%	n/a	3	Domestic Violence Programme Completions	21	30	900	18	1	Data Availability Under Review																																											
OM Phase II OASys Assess	Data Availability Under Review					Referrals to LSC	413	618	33073	732	1	DTTO/DRR Starts	155	206	8119	158	1																																												
Approved Premises	Data Available in Q4					% Orders / Licences Successfully Completed	68%	75%	63%	71%	1	Employment Sustained For 4 Weeks	248	173	7576	176	4																																												
Reduce Re-offending		Actual		Predicted		Difference		Significant?		IPPF Grade		Management Information																																																	
		8.6%		9.4%		-0.8%		No		2																																																			
Management Information												Management Information																																																	
Outstanding Performance												4																																																	
Good Performance												3																																																	
Passable Performance												2																																																	
Poor Performance												1																																																	
Management Information												Management Information																																																	
Offenders Manager Changes												1.1										n/a										1.1										n/a										2									
Average Acceptable Absences												2.1										n/a										2.6										2.6										4									
Completions Of Unpaid Work												63%										n/a										68%										66%										1									
OBP Attrition												50%										n/a										39%										53%										2									
Employment Gained												350										n/a										10744										n/a										n/a									
DTTO/DRR Completions												55										n/a										2970										61										n/a									
Alcohol Treatment Requirement Starts												52										n/a										2361										n/a										n/a									
Alcohol Treatment Requirement Completions												23										n/a										701										n/a										n/a									

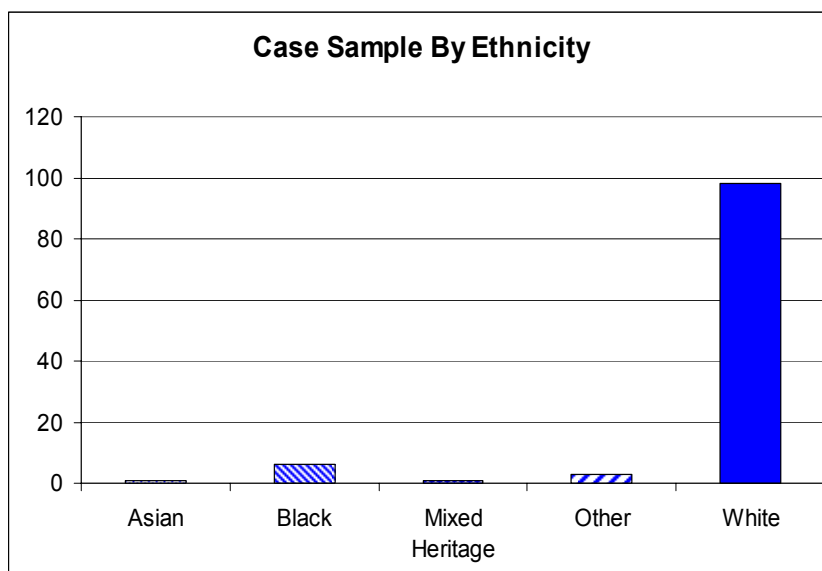
IPPF is the performance framework operated by NOMS. Under this, for each probation area, a score is assigned for each of four 'domains' as indicated, based on results for the metrics specified. Using these scores, an overall score for the probation area is also assigned.

APPENDIX 2 Contextual information

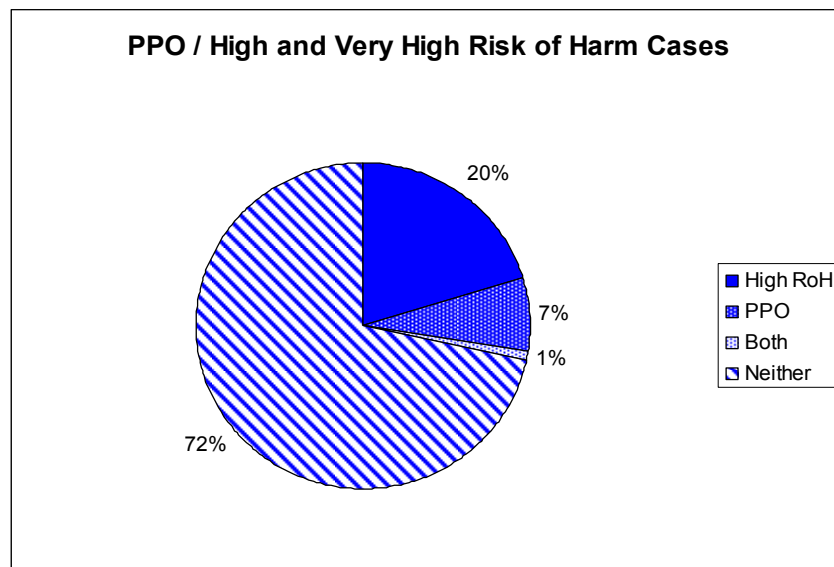
The chosen sample takes into consideration the number of female offenders in the area. A representative number is then included in the sample.



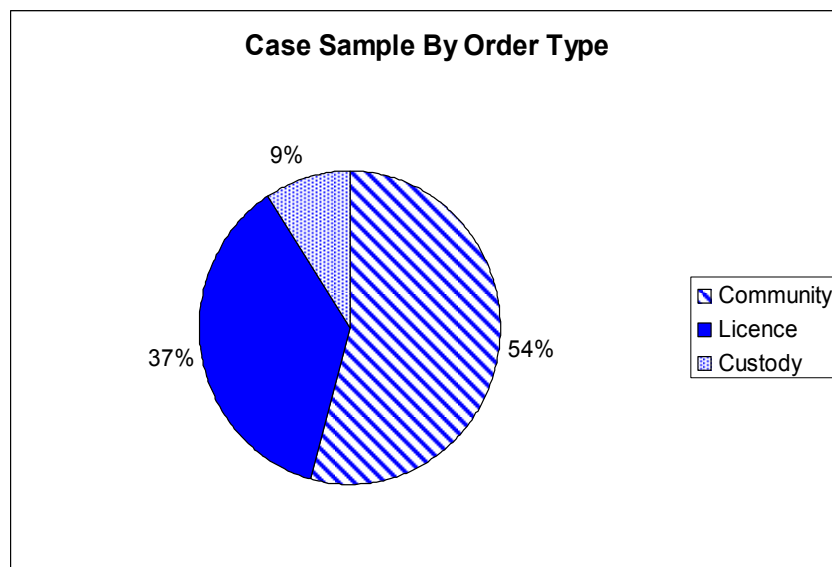
The chosen sample takes into consideration the number of black and minority ethnic offenders in the area. A representative number is then included in the sample.



Each 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.



Caseload at end of December 2006

Total caseload	5,559
% <i>White</i>	93.3%
% <i>Minority ethnic*</i>	6.7%
% <i>Male</i>	90.4%
% <i>Female</i>	9.6%
Number of cases subject to MAPPA:	(%)
Level 1	0.89%
Level 2	5%
Level 3	0.39%
Number of PPO cases	1.34%
* Excluding cases for which ethnicity information is not available.	

The local definition of a PPO case – on which the above figure is based – is any offender who is assessed as being a prolific and other priority offender.

Total revenue budget in 2006/2007: £19.817m.

Total revenue budget in 2007/2008: £20.136m.

Approved premises: Fleming House capacity – 25.

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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