



**O**FFENDER  
**M**ANAGEMENT  
**I**NSPECTION  
INSPECTION

A report on Offender Management in  
**Nottinghamshire**

An inspection led by  
HM Inspectorate of Probation

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## **FOREWORD**

Nottinghamshire Probation Area has made significant improvements in performance over the past two years. From being in special measures, it moved to second position in the National Probation Service's performance tables in the third quarter of 2006/2007. There has been a deliberate strategy of driving the area to meet targets and we are impressed with the finding that, in addition to significantly improved performance against central and regional targets, the area has managed to demonstrate good quality work with offenders as well. Unsurprisingly, some offender managers have found this a challenging journey of change; others have responded positively to this leadership.

We found offender managers demonstrating an outcome focus, working positively with other staff and partners and responding well to diversity needs when they are identified. There are areas for improvement. Sentence and risk management planning needs to become more detailed. The management style used to make progress is significantly different from the previous style and has caused concern amongst a number of staff. The senior management team, having achieved the progress that was required, has begun to modify its style in order to consolidate these changes and achieve further developments.

### **ANDREW BRIDGES**

HM Chief Inspector of Probation

## **ACKNOWLEDGEMENTS**

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

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

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## CONTENTS

	<b>Page</b>
LIST OF ABBREVIATIONS/ACRONYMS	4
SUMMARY	5
SUMMARY OF SCORES	7
RECOMMENDATIONS FOR IMPROVEMENT	10
NEXT STEPS	10
SHARING GOOD PRACTICE	11
OFFENDER MANAGEMENT IN NOTTINGHAMSHIRE	13
OFFENDER MANAGEMENT IN HMP NOTTINGHAM	14
SERVICE USERS' PERSPECTIVE	16
<b>1. ASSESSMENT AND SENTENCE PLANNING</b>	<b>17</b>
1.1 General Criterion: PREPARING FOR SENTENCE	17
1.2 General Criterion: ASSESSMENT OF RISK OF HARM	17
1.3 General Criterion: ASSESSMENT OF LIKELIHOOD OF REOFFENDING	19
1.4 General Criterion: ASSESSMENT OF OFFENDER ENGAGEMENT	19
1.5 General Criterion: SENTENCE PLANNING	20
<b>2. IMPLEMENTATION OF INTERVENTIONS</b>	<b>22</b>
2.1 General Criterion: DELIVERING THE SENTENCE PLAN	22
2.2 General Criterion: PROTECTING THE PUBLIC BY MINIMISING RISK OF HARM	23
2.3 General Criterion: VICTIMS	24
2.4 General Criterion: ENSURING CONTAINMENT AND PROMOTING COMPLIANCE (Punish)	24
2.5 General Criterion: CONSTRUCTIVE INTERVENTIONS (Help and Change)	25
2.6 General Criterion: RESTRICTIVE INTERVENTIONS (Control)	26
2.7 General Criterion: DIVERSITY ISSUES	27
<b>3. ACHIEVEMENT AND MONITORING OF OUTCOMES</b>	<b>28</b>
3.1 General Criterion: ACHIEVEMENT OF INITIAL OUTCOMES	28
3.2 General Criterion: SUSTAINABILITY OF PROGRESS	29
<b>4. LEADERSHIP AND STRATEGIC MANAGEMENT</b>	<b>30</b>
4.1 General Criterion: LEADERSHIP AND PLANNING	30
4.2 General Criterion: PERFORMANCE AGAINST NATIONAL AND REGIONAL TARGETS	32
4.3 General Criterion: RESOURCE DEPLOYMENT	34
4.4 General Criterion: WORKFORCE PLANNING AND DEVELOPMENT	35
4.5 General Criterion: REVIEW AND EVALUATION	36
4.6 General Criterion: COMMISSIONING OF SERVICES	37
APPENDIX 1 Contextual information	39
APPENDIX 2 Inspection model, methodology and publication arrangements	40
APPENDIX 3 Scoring Approach	41
APPENDIX 4 Role of HMI Probation	42

## LIST OF ABBREVIATIONS/ACRONYMS

ABPO	Association of Black Probation Officers
CDRP	Crime and Disorder Reduction Partnership
CO	Chief officer
COMET	Community Penalty Enforcement Tracker
CSOG	Community Sex Offender Group
DAAT	Drug and Alcohol Action Team
DRR	Drug rehabilitation requirement
DTTO	Drug treatment and testing order
ESOL	English for Speakers of Other Languages
ETE	Employment, Training and Education
FDR	Fast delivery report
GP	General Practitioner
HMP	Her Majesty's Prison
HMI Prisons	Her Majesty's Inspectorate of Prisons
HMI Probation	Her Majesty's Inspectorate of Probation
ISP	Initial sentence plan
IT	Information technology
LCJB	Local Criminal Justice Board
LSC	Learning and Skills Council
MAPPA	Multi-Agency Public Protection Arrangements
NAAPS	National Association of Asian Probation Staff
NOMIS	National Offender Management Information System
NOMS	National Offender Management Service
NPD	National Probation Directorate
NPS	National Probation Service
OASys/eOASys	Offender Assessment System/electronic OASys
Ofsted	Office for Standards in Education
OGRS2	Offender Group Reconviction Score2
OMI	Offender Management Inspection
OMU	Offender Management Unit
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
SMB	Strategic Management Board
SMT	Senior Management Team
SPO	Senior probation officer
TPO	Trainee probation officer
ViSOR	Violent and Sex Offenders Register
VLO	Victim liaison officer
YJB	Youth Justice Board
YOT	Youth Offending Team

## **SUMMARY**

### **Assessment and Sentence Planning**

We found that the completion of the Offender Assessment System for likelihood of reoffending was timely, with assessments being properly countersigned and locked. The general quality of these assessments was good. There was a high level of provision for skills for life screening and appropriate follow-up when required.

We read a number of pre-sentence reports and found them to be fit for purpose, with outline plans attached as a matter of course. This was very encouraging. Sentencers viewed them positively, although in too many cases victim issues were not thoroughly addressed.

Improvements were needed in sentence planning and the use of generic objectives which appeared to be limiting offender managers' approaches. Risk management plans were very lacking in detail and did not reflect active thinking. We found that some staff were not clear about Multi-Agency Public Protection Arrangements structures and how to access and record them.

Generally, diversity issues were not being actively and thoroughly assessed.

### **Implementation of Interventions**

We were impressed with the positive and creative shared work both between different grades of staff and with colleagues from other agencies. Ofsted inspectors reported that there were well-managed processes for implementing interventions with regard to employment, training and education.

We saw several good examples of persistence, re motivating offenders, and consider this key to supporting achievement. Restrictive interventions were well monitored and there was speedy access to the Think First accredited programme.

When a diversity issue was identified, on the whole it was well dealt with.

There was no system to enable countersigners to check source material to identify whether the correct information had been used to identify all relevant issues relating to Risk of Harm and to be confident that they supported the Risk of Harm classification recorded.

### **Achievement and Monitoring of Outcomes**

This was an area of work that we found unusually positive. There was evidence of staff thinking about outcomes from an early stage. This was supported by re-scoring of the Offender Assessment System. Once again, there was evidence that persistence by staff had contributed to purposeful work being successfully undertaken. The area had implemented strategies to support attendance and had managed to establish systems for ensuring a high level of continuity of offender management.

## **Leadership and Strategic Management**

The chief officer and senior management team had demonstrated strong leadership and management to achieve a clear purpose over the past two years. They had successfully moved the area from being in special measures to a high performing one. Comments from partner organisations supported this view of a planned and positive change. The area had ensured a good range and depth of resources to address criminogenic need. A diversity group had also been established and one of its key roles was to impact/assess all new policies.

Staff were very positive about the middle management group and there was evidence of regular, good quality supervision.

Some staff expressed a less positive view of senior management. There was recognition that there was plenty of communication, but 22% of offender managers interviewed felt overloaded by it. Middle managers highlighted key initiatives in team meetings (a system which had been set up by the chief officer, who indicated those new policies or procedures which were to be dealt with that way) which helped staff to prioritise and deal with the volume of information. The senior management team was considered as not sufficiently visible by some staff; this was despite the opportunities that the chief officer and senior management colleagues had instituted to increase contact with staff around the area.

The senior management team and Board had already recognised this issue and were in the process of developing a style of management more suited to a period of consolidation. Inspectors felt that the area was right to be reviewing the focus on performance and assessing the balance between that and staff care.

The unpaid work service had been identified as a provision for contestability. In order to reduce costs, a number of changes had been made, including increasing the ratio of offenders to supervisors in work groups in line with national guidance. Some staff expressed concern that this would cause a reduction in the quality of the scheme and this was difficult for them to rationalise. These concerns had been passed to the relevant section of the national headquarters by the area.

## **Risk of Harm**

Inspectors agreed with the Risk of Harm classification in 90% of the cases inspected. However, the correlation between inspectors and the area was much lower when assessing the quality of the full Risk of Harm assessment. We found the assessment to be insufficient in 37% (25/68) cases.

Credit was due to the area for improvement in its performance in terms of timely completion of risk management plans. However, there was now a substantial job to be done to improve their quality and to make them useful plans for offender managers rather than a task to be completed.

The area had forged a positive partnership with the police in Multi-Agency Public Protection Arrangements and had direct access to the Violent and Sex Offenders Register information technology system. This was indicative of a trusted partner.

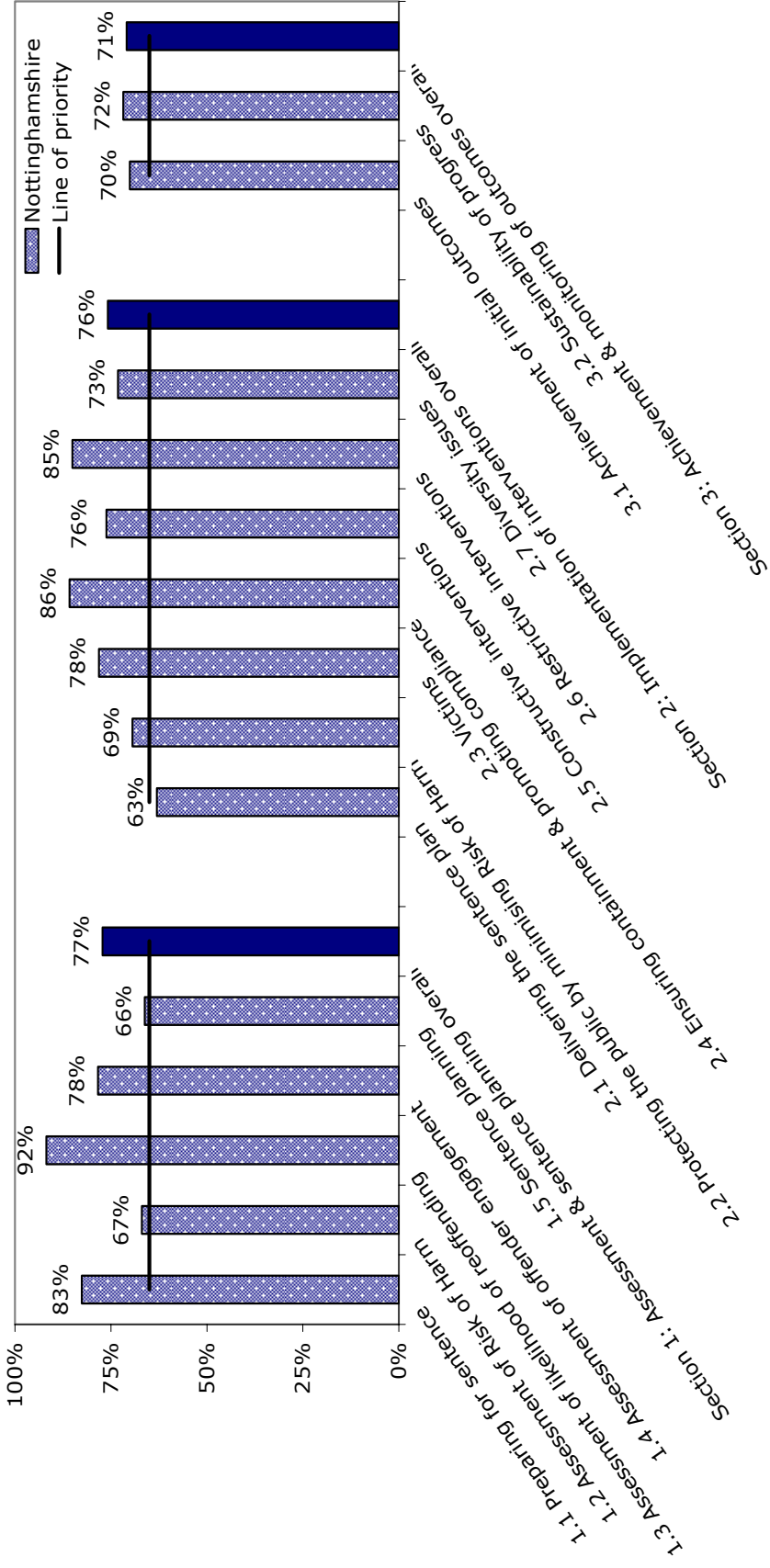
In the sample inspected there were a number of very good examples of Risk of Harm assessment and planning. The overall Risk of Harm score of 72% indicated that that proportion of tasks associated with this work were being completed sufficiently.

## **SUMMARY OF SCORES**

Outlined overleaf in Chart 1 are percentage scores for each Offender Management Inspection Criterion in sections 1-3. A line of priority for improvement is also indicated. The scores which fall below this line (which is not a line of 'sufficiency') indicate those criteria which form a primary focus for improvement. Table 2 indicates a score drawn from a range of indicators in the *Assessment & Sentence Planning* and *Implementation of Interventions* sections about Risk of Harm work. This score is significant in determining whether a further focused inspection will be carried out. Full details of our *Scoring Approach* are contained in Appendix 3.

**Chart 1: Scoring of sections 1-3:**

**Offender Management Inspection - Nottinghamshire (April 2007)**



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

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

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.

**Table 2: Risk of Harm Thread**

Score for Risk of Harm Thread	<b>72%</b>
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## RECOMMENDATIONS FOR IMPROVEMENT

Improvements are necessary as follows:

1. sentence planning becomes a central focus and driver within the offender management model and the quality and use of sentence plans, and their reviews, is improved
2. victim issues are comprehensively integrated into all Risk of Harm assessments
3. the quality and timeliness of risk management plans meet the standards defined nationally
4. there is a need for improved evidence of effective middle management oversight of high/very high Risk of Harm and child safeguarding cases.

## 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 Nottinghamshire.

## SHARING GOOD PRACTICE

Below are examples of good practice we found in Nottinghamshire.

### **Paying attention to appropriate methods:**

#### **OMI Criterion: 1.4 Assessment of offender engagement**

An 'introduction to IT' course was offered as a 'Guide to using eBay', to attract potential learners. The course, run over three sessions, used tutorial material from the eBay site, supported with other material written for the target audience of unconfident offenders. It included a 'buyer beware' section to alert offenders to advertisements which sounded (and generally were) too good to be true. It also included a simple section on how to select a secure but memorable password. A quiz at the end of each session tested learners' understanding and identified any areas for further work.

### **Working with other agencies:**

#### **OMI Criterion: 2.1 Delivering the sentence plan**

The area had, several years earlier, decided to take provision for substance misuse in-house. In both the city and county teams there were GP sessions and treatment clinics being run every week. Drug treatment workers were based in the same office as offender managers and worked closely on the supervision of offenders. One of the advantages was that this enhanced their ability to spot early on when someone was beginning to relapse, e.g. having established links with local pharmacies the drugs worker knew when an offender on the programme had stopped collecting their methadone prescription which indicated an increase in illegal substance misuse. The prescription could be cancelled immediately, a home visit undertaken – hopefully to find the offender – testing arranged to verify the position and, if necessary, a modified treatment approach agreed.

### **Flexibility to enable success:**

#### **OMI Criterion: 2.4 Ensuring containment and promoting compliance (Punish)**

Joe was subject to a DRR and had been breached twice in the first six weeks. On the second occasion, the offender manager proposed to the court that an ETE specified activity condition be inserted. The court had enough confidence to follow this suggestion and since then Joe had attended 86 of 90 appointments and was actively addressing his drugs problem.

**Community  
reintegration:**

**OMI Criterion: 2.5  
Constructive  
interventions  
(Help and  
Change)**

Benny was a long-standing, ten year user of heroin. His marriage had broken down and he was homeless. He had been a habitual offender who had a poor history of engagement and compliance. He was placed in the PPO project. The offender manager worked jointly with a police officer. Benny was moved from a tent in a cemetery to supported accommodation and was now maintaining his own tenancy. He was on a methadone script and in treatment for his addiction. He had completed Think First.

These were strong outcomes resulting from good partnership working, persistence and accessing partnership provision.

**Responding to  
diverse need:**

**OMI Criterion: 2.7  
Diversity issues**

Women who are offenders and who also use illegal drugs are judged, even by other offenders and drug users but who happen to be male, as 'bad' particularly if they have children. Criticism can be heard in the office waiting room; as a consequence women experience the extra barrier to accessing the treatment they need. Women drug users are also most likely to suffer from low self-esteem which is compounded by this prejudice; compliance is therefore less likely. In response the Nottingham Substance Misuse Team had established a women-only group where women were able to relax in the knowledge that they would not be judged and were therefore more likely to attend and benefit from this provision.

## **OFFENDER MANAGEMENT IN NOTTINGHAMSHIRE**

The area had divided into Offender Management and Interventions Directorates in April 2005. The initial structure involved PO grades as offender managers for nearly all cases, with PSOs and administrative staff acting in a support capacity.

Following constructive negotiations with the unions and agreement about regrading and appropriate training and support, the area had then begun to use PSOs as offender managers and intended to continue this development. This had taken time to progress, although here was a clear plan for rolling out the training and associated moves. A benefit of this process taking time had been the opportunity to identify a series of other organisational issues related to offender management arrangements which required some attention alongside staff development work.

It was intended that by April 2008 all PSOs within OMUs would have been trained to take cases at Tiers 1 and 2 and a few at Tier 3. They will have had training for managing RoH and for completing FDRs in court.

This move, over this timescale, had the potential for many benefits for the area, including reduced unit costs and providing more capacity for the supervision of high RoH offenders and PPOs. However, there were considerable risks for quality of work and staff morale, given the pace and level of change involved. This included potential additional activity for middle managers, not least in terms of quality assurance. The area recognised this risk and had a number of strategies in place to deal with it.

The national roll-out of NOMIS had been postponed, thus delaying any local benefits the area might have achieved from this implementation.

Working relationships with HMP Nottingham appeared very good at a strategic level. Operationally, numbers serving their sentence at Nottingham were relatively low and offender managers needed to engage with a large number of prisons.

## **OFFENDER MANAGEMENT IN HMP Nottingham**

HMP Nottingham is a busy Victorian local prison (built 1890), with cramped old accommodation, some of which is cold and unfit for purpose – one wing was closed at the time of the inspection – dealing with a transient population with multiple needs. However in the last inspection HMI Prisons found it to be improving. The prison usually served Nottinghamshire and Derbyshire courts, but recent pressure of numbers within the system and the nature of the establishment had resulted in prisoners from as far afield as London and the south east being located there, with local men being moved further afield than usual. The average stay was four weeks.

Slightly over 20% of the population were from a black or minority ethnic background (5% of staff); there were 48 foreign national prisoners, with a small number of immigration detainees.

42% were sentenced; 32% remanded, with most of the rest awaiting sentence; approximately 55 were discharged into the community each month (HMI Prisons report April 2007).

We visited the prison to hear how offender management had been implemented and developed in this local prison. We met with the governor and the seconded SPO from Nottinghamshire Probation Area who was the head of the OMU and had full functional responsibility for public protection and sentence planning. She reported to the deputy governor and was a member of the prison SMT. The governor was very clear that he enjoyed a positive working relationship with probation and saw the area as integral to the successful implementation of offender management in the establishment.

In addition to the SPO, the unit comprised of five offender managers (two PSOs and three prison officers), and both an executive and administrative officer. They had access to probation's IT system, so could read and complete OASys and also email offender managers anywhere in the country. However, many items had to be double entered onto the prison IT system as well. This was a significant waste of valuable resource and needed a technical solution from the centre.

The governor asserted that the model used for resettlement in the prison prior to offender management being introduced was in fact very close to the new system and, as a result, staff were familiar with the core concepts and did not perceive that something new had arrived. There were small adjustments to practice required, rather than a new way of thinking.

Once a newly arrived prisoner had been assessed as in scope for the OMU, an email was sent to their offender manager if that person could be identified. If not, one was sent to a central point in whichever area was responsible to be forwarded once the case had been allocated. At the time of the inspection visit, there were 22 emails awaiting a reply, including one or two from Nottinghamshire, and relating to 12 PPOs and some high RoH prisoners. The SPO gave examples of poor response and lengthy waits. She had taken the matter up with her line manager, but was still experiencing problems including, on occasion, from Nottinghamshire.

The unit had run a few sentence planning boards and there was a significant issue about offender managers' confidence in chairing these. This was coupled with the

difficulty created by the fact that security and pressure of numbers and places dominated prisoner allocation. Even with goodwill from the relevant section of the prison system, people still got moved and plans had to be changed. This was an issue that would require decisions and guidance from the very top of NOMS and from government if offender management is to be implemented fully as planned.

There were limited interventions available. In the main, this comprised a four and a half day induction which covered a variety of elements and a drugs programme.

In summary, the OMU had been well established and enthusiastically received in HMP Nottingham. It is well led by the SPO and positively and actively supported by the governor. There were challenges in that liaison with the field was not happening as it should which was holding up several of the developments intended. This was exacerbated by the timing of prisoner moves. There was also a concern as to how the regional commissioning arrangements would be coordinated to accommodate the movement of prisoners across England & Wales.

## **SERVICE USERS' PERSPECTIVE**

### **Offenders**

One hundred questionnaires were sent to those offenders who were in the inspection sample. Eighteen of these were returned. In addition, 31 offenders were interviewed in five groups based in approved premises and taking part in accredited programmes and unpaid work.

On the whole, those responding to the questionnaire expressed satisfaction with the level of information provided to them at the start of their supervision. This included induction and discussion about the sentence plan. There was a more mixed reaction on this topic during the group interviews.

Of all offenders, either responding or interviewed, the vast majority found that their offender manager worked well with colleagues and staff from other organisations. This was expressed as being significantly helpful in terms of the overall process of supervision.

82% of respondents stated that in addition to having a good working relationship with their offender manager, the work they had done had caused them to think about their offending behaviour and made them less likely to offend in the future. These comments fitted well with the findings from the 100 file inspections that were undertaken. It was gratifying that 83% of questionnaire respondents considered that they now thought more about the impact of their behaviour on victims. This figure was as low as 50% with those offenders interviewed.

### **Victims**

One victim returned their questionnaire, out of four that were sent out and one victim attended to be interviewed. Both respondents found that they were treated respectfully and listened to. One expressed the view that they had not received sufficient information about the offender's sentence nor about the service available to them from the probation VLO. The other person recognised that it was very early in the process in terms of when the offender was sentenced and already had a good knowledge of the system because of her employment. Neither had been asked to give feedback before.

### **Courts**

Ten of the 30 questionnaires sent to courts were returned. In addition, the Clerk to the Justices for Nottinghamshire was present at one of the meetings held for partners of the area. The view expressed by respondents about the work done by probation staff both for and in the court was overwhelmingly positive. They were considered to have the right skills and knowledge for the work they did in the court setting. More specifically, reports of all types were judged to be both timely and of good quality. There was a particularly strong and positive view expressed by all about the effectiveness of the liaison between courts and the probation area. 82% of respondents took the view that they received sufficient information about probation policy and practice and that managers in the area were professional in their approach.

## 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.*

83%

#### Strengths:

- (a) In 53 of the 59 community order cases where we looked at the PSR, the court had indicated the level of seriousness and in each of those cases the PSR author had clearly taken account of that indication.
- (b) All of the reports considered were completed on time and in the correct format, i.e. FDR or SDR.
- (c) In two of the three reports on PPOs the offence seriousness and likelihood of reoffending were clearly outlined. In all three labelling was avoided and a clear and proportionate proposal was made.
- (d) There were 18 cases where self-harm was an issue and in 14 of these the information was clearly recorded.
- (e) In 48 of the 57 cases (84%) where a community proposal was made this was followed by the court.
- (f) Overall, the general quality of reports was considered to be good. In addition, the area introduced the requirement that all reports be produced using the eOASys template early in 2007. Half of the reports inspected had used it and of these inspectors felt that the quality of 90% of reports had been enhanced.

#### Area for Improvement:

- (a) 24% of the PSRs examined were not considered to be sufficiently balanced or verified. An example of this was a FDR with no copy of the RoH screen completed, nor any evidence that it had been done, but the report asserting that there were no RoH issues.

#### 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.*

67%

#### Strengths:

- (a) All cases had an OASys assessment completed, and in 96% of them the RoH screening had been completed at the right time; inspectors considered that 82% of these screenings were accurate.

- (b) A full RoH analysis was indicated in 84 cases and was completed in 68 of these (81%).
- (c) Inspectors agreed with the RoH classification in 90% of cases.
- (d) In all but one of the 20 high/very high RoH cases inspected, the risk classification had been communicated to all staff involved. This also applied to 17 of the 18 registered MAPPA cases in the sample. These figures reflected the good communication generally between different staff members about the work being undertaken with individuals.
- (e) It was encouraging that, where they existed, MAPPA or other assessments were clearly taken account of in the RoH assessments in 69% of cases.
- (f) Risk management plans were recorded using the correct headings in 72% of relevant cases, and within the required five working day timescale for high and very high RoH cases in 86%.
- (g) In ten of the 11 cases where a referral to approved premises was made, inspectors agreed that the referral was appropriate.

**Areas for Improvement:**

- (a) Notwithstanding the strengths at (a) and (c) above, there is scope for improvement on RoH screen accuracy and consideration should be given to developing this.
- (b) In 37% of cases where a full RoH analysis was completed, inspectors found them to be of an insufficient standard. This in the main was related to a lack of detail about the victim.
- (c) There were 11 cases where a full RoH analysis was indicated and an acceptable explanation for not doing one was not recorded.
- (d) A number of staff were unclear in interview about the MAPPA structure and how to access and record it. There were several examples of cases being recorded as MAPPA Level 1 on the basis that there was single agency management, but the cases were not appropriate for MAPPA in the first place. Another example of misunderstanding was in the case of a registered sex offender who had not been referred to MAPPA because of a medium RoH assessment.
- (e) Victim issues were thoroughly covered in only 59% of RoH assessments.
- (f) Risk management plans were considered to be sufficiently comprehensive in only 20% of cases.
- (g) There was insufficient evidence of effective middle manager oversight in six (30%) of the 20 high/very high RoH cases inspected. Of the 19 child safeguarding cases in the sample, eight (42%) lacked such evidence.
- (h) Countersigners needed to have a system to check source material appropriately.

**Conclusion:**

This criterion represents a priority for improvement.

**1.3 General Criterion: ASSESSMENT OF LIKELIHOOD OF REOFFENDING**

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

**92%**

**Strengths:**

- (a) Ninety-four cases had had a timely OASys score calculated and of the remaining six an OGRS2 score had been appropriately identified.
- (b) Relevant criminogenic factors were assessed in 86 cases and in all but six of these it was pleasing to find supportive and pro-social factors identified.
- (c) Five of the cases were identified as PPOs and in all of these the OASys was comprehensively completed within the five working day standard.
- (d) In 84% of relevant cases the OASys drew appropriately on other relevant assessments.

**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.*

**78%**

**Strengths:**

- (a) At the PSR stage offenders were routinely given a Fast Track 20 screening assessment which indicated ability levels for literacy and numeracy support purposes. Referral to further diagnostic assessment depended on a score defined by the fast track process.
- (b) That a skills for life screening had taken place was sufficiently evidenced in 79% of cases and, where subsequently indicated, a full assessment was undertaken in 75%.
- (c) Offender managers paid attention to identifying methods likely to be effective in communicating with the offender in 75% of cases. Similarly, offenders' learning style, intellect and ability to change had been considered at an early opportunity.
- (d) We found evidence of diversity and individual need being actively assessed in 68% of cases inspected, and in 86% of cases where there were factors identified plans were put in place to minimise their impact.

**Area for Improvement:**

- (a) There should be an increase in the proportion of cases where an active diversity assessment was undertaken and evidenced.

**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.*

**66%**

**Strengths:**

- (a) Offender managers were responsible for allocating offenders to tiers and in 90% of cases inspectors agreed with the allocation and on the whole (87%) the tier was recognised within the sentence plan.
- (b) The allocation of an offender manager took place in a timely manner in 93% of community orders.
- (c) Restrictive interventions were appropriately considered during planning in 84% of relevant cases.
- (d) It was clear in 93% of cases that the offender understood the requirements of their order and the consequences of failing to comply.
- (e) In 87% of applicable cases, inspectors were satisfied that the ISP drew on other relevant assessments. Planned contact levels were appropriate in 91% of cases and all contacts were enforceable in 86% of them.
- (f) In over 70% of cases interventions were identified that were judged likely to reduce or contain RoH, address offending behaviour and meet the punitive requirements of the order. 58% clearly promoted community reintegration.
- (g) The screening and referral form used by the dyslexia specialist contractor was extremely detailed and well informed. The interview pro forma for ESOL learners effectively enabled the tutor to make an assessment of learners' speaking skills and their knowledge and understanding of the English language. Those offenders referred from custody had often completed a Passport while in custody and this was usually forwarded to the probation area. Staff responsible for carrying out diagnostic assessment closely monitored referrals and attendance and had effective links with offender managers. Staff monitored the number of referrals from individual offender managers and ensured that the referral system was working effectively. This was important in addressing any individual issues which could prevent an offender from succeeding.

**Areas for Improvement:**

- (a) Overall, inspectors considered that sentence planning was insufficient, not giving a clear shape to supervision in 55% of cases. Its strongest point was that it reflected the sentencing purpose (punish, help, change, control) in 68% of cases, but this still remained an area for improvement. The sequencing and timing of interventions also required better planning.
- (b) Offender managers recognised that there was a lack of clarity as to the process and purpose of a tier allocation being changed during supervision, not least that it could cause conflict with the area's policy of consistency of offender manager. There would be merit in further work on these points.
- (c) Roles and responsibilities of all workers were only clearly defined and recorded in the sentence planning documents in 45% of cases.
- (d) In only 62% of sentence plans were issues of diversity properly addressed.
- (e) There was evidence of the offender's active participation in planning in 65% of cases. However, although 15 of the 16 offenders who returned a questionnaire stated that the plan had been discussed with them, the majority of those directly interviewed had signed their plan but had not in their view been specifically enabled to participate in its development meaningfully.
- (f) In 64% of relevant cases there was a strategy for addressing the offender's RoH.
- (g) Of the interventions identified in ISPs, 8% of cases were considered not to contribute to offending behaviour, RoH, community reintegration or to meet the punitive requirements of the order.

**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.*

63%

#### Strengths:

- (a) Of the relevant licence cases, work done in the community built upon that started in custody in 80% of cases inspected.
- (b) Inspectors were impressed that in 80% of cases they found evidence of work being done both to prepare offenders for interventions and to reinforce new skills afterwards. This reflected the positive joint work and communication seen between different grades of staff and between staff and partner workers. It also evidenced the effective coordination of the whole sentence by the offender manager and the commitment of staff to assisting the offender to succeed.
- (c) 75% of sentence plans were reviewed at least every 16 weeks and in the same proportion there was evidence of all sentence requirements being fully delivered. The majority of these cases integrated other relevant plans such as MAPPA or an individual learning plan into the review.
- (d) Eight cases had been transferred in from other areas. In 75% of these there was a completed and current OASys assessment forwarded, and the first appointment with a Nottinghamshire offender manager was made within five working days of notification.

#### Areas for Improvement:

- (a) The sequencing of interventions needed to be more overt in 35% of cases.
- (b) Reviews of sentence plans required significant improvement in quality, in particular in setting clear objectives and milestones and in overtly engaging the offender in the review and forward planning processes. There was evidence of this occurring sufficiently in only 38% of cases.
- (c) Of the eight transferred-in cases, a home visit within ten working days was made in only three cases. This is a missed opportunity to confirm a considerable amount of information and needs to be improved.
- (d) In 21 of the 40 licence cases inspected, there was no evidence of work being done with the offender between prison-based staff and offender managers during the custodial period. Offender managers spoke about the difficulties of engaging positively with offenders when they were located all around the country. In the remaining cases, where some preparatory work had taken place, this was timely in only 18% and not sufficiently either positive or proactive.

**Conclusion:**

This criterion represents a priority for improvement.

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

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

**69%**

**Strengths:**

- (a) RoH to others was reviewed on at least a 16 weekly cycle in 83% of cases and the vast majority of these demonstrated ongoing planning to address the RoH to children and young people and to the general public.
- (b) Inspectors identified that MAPPA had been used effectively in 72% of relevant cases and that area staff had contributed well to these in 83%.
- (c) Of the eight recalled licence cases, it was clear that recall was used as an appropriate part of the risk management process in 75%. Apart from one case, inspectors found that recall had been actioned properly and in five of them there was evidence of clear explanations being given and work to re-engage the offender taking place.
- (d) There was a high level (83% of relevant cases) of offender managers identifying changes in risk factors quickly and, more importantly, acting upon them.

**Areas for Improvement:**

- (a) In only 61% of cases where there was a significant change was the RoH reviewed as a result. It may be that there needs to be clarification as to what would constitute a significant change to assist staff and managers in recognising these occasions.
- (b) The planning to address RoH to known adults and to staff was less well evidenced at 65% and 59% respectively.
- (c) The level of purposeful home visiting in cases of high/very high RoH was too low and required attention. More specifically, of the nine cases concerned, a purposeful home visit was carried out within ten working days in five cases and these were appropriately repeated in only three cases.

**Conclusion:**

Performance against this criterion was good.

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

**78%**

**Strength:**

- (a) Thirteen of the 40 licence cases in the inspection sample required statutory victim contact and performance in this area was generally good. Face-to-face contact within 40 working days of sentence occurred in 77% of cases. In 83% of relevant cases the victim was able to express a view about licence conditions, and in each pertinent case the victim was enabled to see the parole report and informed about release conditions in a timely manner.

**Areas for Improvement:**

- (a) Inspectors found that victim safety had not been given a sufficiently clear priority in 12 of the 29 relevant cases and this needed to improve.
- (b) There was evidence of victim awareness work being undertaken with offenders in 48% of cases inspected.

**Conclusion:**

Performance against this criterion was good.

**2.4 General Criterion: ENSURING CONTAINMENT AND PROMOTING COMPLIANCE (Punish)**  
***Contact with the offender and enforcement of the sentence is planned and implemented to meet the requirements of national standards and to encourage engagement with the sentence process.***

**86%**

**Strengths:**

- (a) In 92% of all cases there was evidence of a full and timely induction for offenders.
- (b) Inspectors were particularly impressed with the levels of offender contact that had been achieved across the area. This was considered to have played a significant part in helping many offenders simply to complete their orders (93%). In addition, in 80% of cases the frequency of contact supported the sentence plan and in 74% of them it met the identified RoH requirements.
- (c) There were 23 cases with an unpaid work requirement. Again, there was a high frequency of sessions made available and in 83% of cases this conformed to the national standards, whilst in 96% it facilitated the requirements of the sentence.
- (d) Inspectors considered that the vast majority of unpaid work placements – up to 90% – were well matched to the offender, suitably demanding and of benefit to the community.

- (e) The five PPO cases were all managed within a multi-agency project which was considered to be excellent. Each case clearly met the requirements for enhanced levels of contact and a pattern of reporting that supported all the elements of the sentence.
- (f) In 94% of cases there was sufficient evidence that offender managers monitored attendance across the whole order. In 88% of cases where it was necessary, they took effective action to ensure compliance and in eight of the nine relevant cases there was evidence of effective liaison with the electronic monitoring organisation.
- (g) There were 75 cases where absences were recorded and in 88% of these the offender manager's judgements about acceptability or otherwise was concurred with by the inspector.
- (h) Of the 31 cases where breach action was required, 26 were instigated within the correct timescale and 24 of these were resolved within the required number of days. This demonstrated good systems within the area and a shared approach to enforcement with the Courts Service.
- (i) Inspectors found the case records to be well organised, full and with clear REM details in well over 80% of cases. Recording was considered to be of a high standard in terms of clarity and timeliness in 92% of the cases reviewed and of sufficient detail in 83%.

**Area for Improvement:**

- (a) There had only been sufficient probation contact with offenders pre-release in 17 of the 40 licence cases.

**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.*

**76%**

**Strengths:**

- (a) It was clear that constructive interventions challenged offenders to accept responsibility for their offending in 70% of the relevant cases in the sample.
- (b) Even more positively, we found that in 93% of them, there were sufficient resources directed at community reintegration.
- (c) The area had made sufficient provision for addressing skills for life requirements where that need was identified and this was in place in 81% of the cases concerned.

- (d) In all of the six DRR cases in the sample, the offender manager showed evidence of preparation of reports and attendance at review hearings.
- (e) Twenty-one of the inspected cases had an accredited programme requirement. Of these, there were 14 for whom the timing of access to the programme was consistent with the sentence plan.
- (f) Individual learners benefited from some very effective teaching and learning. Individual sessions were mostly extremely well planned, using well-designed materials contextualised to learners' needs, and designed to maintain their interest. Activities were brief and varied, to reinforce learning with offenders with very short attention spans.
- (g) The approved premises in the area offered quite a wide range of interventions. Of the six offenders in the sample who had been resident in the approved premises for at least six weeks, all had received input on their motivation, five had done work on developing a healthy lifestyle and in move on accommodation support, and four sex offenders had been engaged in relapse prevention work. Other interventions available included a focus on ETE.

**Areas for Improvement:**

- (a) In four of the seven cases with an accredited programme requirement there was no acceptable explanation recorded to explain why the sentence plan was not followed.
- (b) There was insufficient provision above skill level 2 for learners, with the exception of higher level learning provision such as Open University courses. A few offenders were unable to access mainstream provision such as college courses because of the terms of their licence – for example, they may have been prohibited from associating with under 18s that meant they could not go to college, or they may have been subject to a curfew that meant they could not attend evening classes.

**Conclusion:**

Performance against this criterion was good.

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

**85%**

**Strengths:**

- (a) We found sufficient evidence that restrictive interventions were fully monitored in 79% of relevant cases. Inspectors also judged that all reasonable steps were being taken to minimise RoH in 81% of those cases where such interventions were identified.

- (b) Of the six cases that resided in approved premises, inspectors formed the view that this facility was being used as an appropriate restrictive intervention with each offender. The impact of this was supported by the constructive interventions delivered to those cases as part of the programme within the approved premises.
- (c) There were 25 offenders subject to licence conditions in the sample. These conditions were considered to be comprehensive, necessary and proportionate in 84% of cases.
- (d) There were two PPOs released on licence within the sample and in both cases there was an additional drug misuse related condition included.

**Area for Improvement:**

- (a) Of the 25 licence cases inspected, conditions were appropriate for the protection of victims in 16 of them. This was a relatively low figure for the area's general public protection work and consideration should be given to increasing this aspect of supervision when licence conditions are being planned.

**Conclusion:**

Performance against this criterion was good.

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

**73%**

**Strengths:**

- (a) Overall, inspectors found sufficient evidence that full and proper attention had been paid to diversity issues during the delivery of interventions in 82% of the cases in the whole sample.
- (b) In 78% of the cases in which literacy or dyslexia had been identified as an issue, such matters had been appropriately addressed.
- (c) There was evidence in 86 of the files that the offender had been told in induction that discriminatory behaviour was not acceptable and would not be tolerated.

**Area for Improvement:**

- (a) In those cases where a minority offender was being placed in a mixed setting, e.g. for an accredited programme, in only 40% of the cases was there evidence of that offender being equipped to give informed consent to the arrangements. Equally, in a similar proportion, there was not sufficient attention given to supporting their engagement or to staff composition.

**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.*

70%

##### Strengths:

- (a) In general terms, inspectors took the view that the area had performed well against this criterion, with a finding that in 74% of cases planned objectives had been efficiently achieved.
- (b) OASys had clearly been re-scored in 77 cases and there was an improvement in 53% of them. It is recognised that a higher score is often the result of an improved assessment rather than a worsening situation; however, a lower score is likely to be indicative of better circumstances.
- (c) Of the whole case sample, 83% had been neither convicted nor cautioned for a further offence. 57% had clearly applied new learning or skills in their lives and 54% had demonstrated positive change in their behaviour.
- (d) There was a clear sense that staff of all grades had a general practice of persistence as far as ensuring that offenders engaged in purposeful work.
- (e) There was good evidence of high levels of attendance and of focused re-engagement after a failure.
- (f) Achievement of *punishment* as an objective of the sentence was managed in 89% of cases, *help* in 81% of relevant cases, *control* in 93%, and *change* in 54%.
- (g) All of the PPO cases had resources allocated that were consistent with their status. In 93% of the whole sample, inspectors judged that the resources used were consistent with the offender's likelihood of reoffending and in 84% with their identified RoH.
- (h) More positively, in 89% cases there was a link between resources used and the achievement of positive outcomes for the offender.
- (i) Outcomes were good from the Fit for Work programme. Offenders gained good social and personal skills, coupled with additional health benefits. This project made a significant contribution to reducing reoffending behaviour and continued drug misuse. Of the 14 offenders who completed the ten week programme, 13 improved compliance, eight were drug free with five reducing dependency, 13 had not reoffended since starting the Fit for Work programme and 13 had achieved stability. All participants had become aware of the additional health benefits from the programme. An initial evaluation of the programme had highlighted the significant personal gains for offenders.

**Areas for Improvement:**

- (a) In 36% of cases where there was a concern about domestic violence, the offender manager did not know whether there had been any police call-outs. There was a need for a routine system of communication on matters such as this which contributes to victim protection.
- (b) There was evidence of improved victim awareness in only 33 cases, and whilst 68% of the whole sample had complied with the requirements of the sentence, this still left 32 who had not fully complied.
- (c) Learners' achievement of basic skills qualifications was low. On average approximately 30% achieved a qualification. Retention on many programmes was satisfactory. However, retention rates on the 'Think First' programme was low and averaged 50%.

**Conclusion:**

Performance against this criterion was good.

**3.2 General Criterion: SUSTAINABILITY OF PROGRESS**

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

**72%**

**Strengths:**

- (a) 81% of the whole sample had had no more than two offender managers including the PSR writer. Of these, 35% had been consistently supervised by only one officer.
- (b) Full attention had been paid to community reintegration issues in 80% of relevant cases, and 84% of offenders were aware of the community organisation which could help them address their criminogenic needs.
- (c) Sufficient action was taken to consolidate the offender's learning and to re-enforce new skills in 66% of cases.

**Area for Improvement:**

- (a) Improvement was required in the area's approach to structured sentence planning, which was given high priority in 51% of cases.

**Conclusion:**

Performance against this criterion was good.

## 4. LEADERSHIP AND STRATEGIC MANAGEMENT

### 4.1 General Criterion: LEADERSHIP AND PLANNING

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

**Well met**

#### Strengths:

- (a) The Area Business Plan was developed inclusively and included targets from NOMS, the ROM and local authority partnerships. The whole plan was reviewed on a quarterly basis and these reviews were considered by the whole Board. Business risk was identified and reviewed for all items and contingency thinking was in evidence.
- (b) Since April 2005 the area had moved from being in special measures to being a high performing area. In order to achieve this, the CO and senior managers had had to develop many new policies and procedures. It was pleasing to see examples of these being prioritised for staff, so that the most important were identified by the CO to be promoted in team meetings. The area was able to demonstrate a practice of monitoring and reviewing key policies and procedures such as those for staff supervision.
- (c) The Clerk to the Justices was clear about the improvement in relationships between the area and the courts since April 2005. There was evidence of sentencer confidence in a number of the cases inspected and the joint target for breach proceedings stood as second of the 42 criminal justice areas at the time of our inspection.
- (d) The area was represented at a senior management level on Supporting People, YOT Management Board, DAAT and CDRPs.
- (e) The CO was Chair of the MAPPA SMB, thus effectively leading on public protection for the county. The SMB commissioned a MAPPA development group, with a number of probation representatives, to consider how to improve the efficiency and effectiveness of the process.
- (f) The area had a Race Equality Scheme which had been formally reviewed. 70% (61) of offender managers who were interviewed had completed an ethnic monitoring questionnaire in the previous 12 months. As a result of previous concerns, the area had instigated a review of all PSRs on minority ethnic offenders.
- (g) The area had established a diversity group with a particular responsibility to impact/assess all new policies.
- (h) The area headquarters had been designated as one of a small number of reporting centres for hate crime in Nottingham City.

- (i) The CO and SMT had instigated a series of visits to offices and focus groups to elicit staff views and to engage with them. They were aware that they had deliberately adopted a particular style of management in order to move the organisation from special measures into high performance and that there was a potential cost to that. Two years on, the SMT had begun discussions about changing that style into one more appropriate to a slower pace of change and one which might engage more with staff. Inspectors found this approach to show good awareness of the leadership role and of the need for clarity of method linked to purpose.
- (j) The Board could evidence agreements with staff groups on important developments such as workload management tools and the SMT was able to cite a significant reduction in grievance and disciplinary hearings in the six months before the inspection.
- (k) The CO and Board Chair were clear that they welcomed the inspection findings and saw the process as a learning opportunity. The Hanson and White plan had been fully completed and acted upon, again evidencing a positive response to a regulatory body.

**Areas for Improvement:**

- (a) There was no clear evidence of the service users' perspective being taken into account in the planning process.
- (b) Notwithstanding the strength at (i) above, 56% of staff interviewed did not consider that some managers modelled positive leadership behaviour and 45% expressed the view that some managers did not demonstrate professional management approaches. This perhaps reflected the pace of change and strong leadership style.

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

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

**Well met**

NPS Performance Data	Target	April 2006- March 2007	
		Area	England and Wales
Enforcement: breach taken where required within ten working days: all orders/licences	<b>90%</b>	97%*	92%*
Offender compliance: proportion of arranged appointments attended in first 26 weeks	<b>85%</b>	83%*	83%*
Accredited programme completions: % performance in relation to target	<b>100%</b>	175%*	114%*
Unpaid work completions: % performance in relation to target	<b>100%</b>	112%*	111%*
DTTO/DRR starts: % performance in relation to target	<b>100%</b>	97%*	99%*
DTTO/DRR completions: % performance in relation to target	<b>100%</b>	110%*	119%*
Skills for life: % performance in relation to starts	<b>100%</b>	102%*	125%*
Sickness absence: average days absence	<b>9 days</b>	10.3	12
Court report timeliness	<b>90%</b>	91%*	80%*
Accurate and timely ethnicity data	<b>95%</b>	98.7%*	98.2%*
Home Secretary's Race Equality Employment Target for 2009	<b>(East Midlands Region) 7.2%</b>	11.6%*	
Proportion of victims of serious sexual/violent offences (where offender sentenced to custody of 12+ months) offered contact within eight weeks	<b>85%</b>	95%*	93%*
RoH assessments and plans for high RoH cases completed within five working days of start/release	<b>90%</b>	97%*	94%*
RoH assessments and plans for PPO cases completed within five working days of start/release	<b>90%</b>	99%*	98%*
Offenders into employment: % performance in relation to target	<b>100%</b>	162%*	128%*
Offenders into employment, retained for four weeks: % performance in relation to target	<b>100%</b>	144%*	115%*

Joint 'end-to-end' targets on enforcement for LCJB	Target	April 2006- March 2007	
		Area	England and Wales
Average time to resolve community penalty breach proceedings from relevant unacceptable failure	<b>No more than 35 working days</b>	31*	44 days
Proportion of all breach proceedings resolved within 25 working days of relevant unacceptable failure to comply	<b>50%</b>	64%*	47%*

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

**Strengths:**

- (a) Nottinghamshire was performing second of the 42 areas in the third quarter of 2006/2007, having been 32nd at the end of 2004/2005. This was the result of a clear strategy, initially by the Board, who sought the appointment of a new CO to take this forward.
- (b) There had been a clear and deliberate plan to develop a focus on performance and meeting targets. The area was performing particularly well on offenders into employment and their retention for four weeks. Enforcement was also very good.
- (c) A performance officer was appointed to coordinate all of this work and to ensure that the SMT and Board received comprehensive reports on a monthly basis.
- (d) Information systems had been developed to enable speedy feedback to middle managers where performance fell short of the target. On receipt of the relevant data, middle managers were asked to investigate the reason for any shortfall and there was a requirement that they reported back to a senior manager. This approach was supported by an SPO checklist for use when driving up underperforming measures.
- (e) Information in the COMET system (an IT system for collating the shared targets between criminal justice agencies) showed Nottinghamshire to be second in the country in meeting shared targets for completing breach proceedings through the courts.
- (f) Guidance had been issued to staff as to acceptable and unacceptable reasons for absence. This contributed to ensuring that individuals were less likely to be treated differently.
- (g) The area had drawn up a briefing document outlining actions to improve the quality of OASys. A similar paper to improve completion and timeliness had also been produced. The area's Performance Improvement Group had been relaunched as the OASys Improvement Group as a response to concerns about OASys completions.
- (h) The area had taken part in a regional data validation exercise shortly before the inspection. A report on findings had been prepared and individual reports on each area's outcomes shared amongst participants.
- (i) Information on PSR timeliness performance against local targets was sent to practice staff.
- (j) The area had developed a RoH implementation plan, which included training and procedures, and should contribute to improved consistency in approach, judgement and practice.
- (k) There was a Women Service Users' Forum which was designed to recognise and support the particular requirements of women offenders and to improve the area's response to them.
- (l) The area was meeting targets and paying due regard to diversity. Examples of this included the women-only group work and the provision of ESOL classes.

#### 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.*

**Well met**

##### **Strengths:**

- (a) Trends were monitored from the workload measuring tool and the information gained informed decisions about re-deployment of staff into areas of highest need. An example of this was the re-allocation of four staff from the Interventions Directorate into offender management.
- (b) The area was party to a PPO project with police and substance misuse workers as well as others. The scheme had been independently evaluated and recognised as successful to the extent that the local authority had provided additional funding which would allow the project to accommodate up to 80 additional PPOs per year.
- (c) There was a staff deployment policy that specifically included workload changes as a reason for requiring movement of staff. This linked to the area presenting evidence of its analysis of need in workload terms, identifying caseload by RoH by location, so that staffing proportions could be monitored. Thus the area demonstrated that it could monitor the situation and adjust as required so that resource followed risk, although it was not clear that this had yet needed to be acted upon.
- (d) Senior managers had met with representatives from the Mental Health Services to discuss ways of improving employability of offenders with mental health difficulties.
- (e) There was a workload agreement in place with the unions of which all staff have been informed.
- (f) The area had carried out a review of Tier 4 cases and at the time of the inspection had a plan to do the same for Tier 2 and 3 cases by the summer, in order to ensure that the correct cases were being supervised by the most appropriate staff.
- (g) Resources had been dedicated to a number of diversity initiatives. This had included the appointment of a diversity manager, a significant number of major activities during Diversity Week, and a drive on improving REM recording. The area had also published Race, Disability and Gender Equality Schemes.
- (h) To support victims of domestic violence services had been commissioned from the Mansfield and Ashfield Women's Aid and a report on this provision had been prepared and circulated.

##### **Areas for Improvement:**

- (a) Several of the sentencers who responded to the inspection questionnaire commented that on occasion the amount of probation resource in court was overstretched and struggling to cope. This was in the context of overall satisfaction with the service received.

- (b) Probation accommodation was insufficient in one centre. ESOL and skills for life learners had to share rooms. This caused particular difficulties for those learners needing to practice pronunciation, speaking and listening skills.

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

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

**Well met**

**Strengths:**

- (a) In consultation with the relevant unions, the area had developed a series of policies and procedures related to workforce planning and development. There were implementation project plans and review dates associated with them. This included a proposal for a staff awards scheme and ceremony.
- (b) There was a history of engagement with the unions and working arrangements appeared to have improved over recent years. The CO reported a significant reduction in grievance hearings as evidence of this.
- (c) The area had a workforce planning strategy document for the development of the offender management model, as part of its review process. Whilst there had been significant movement towards the model required, there was still work to be done to train a number of PSOs appropriately for their role as offender managers.
- (d) All managers had been on a nine day training programme specifically designed to help the area develop a consistent managerial approach and skill set.
- (e) Specific provision had been made for the training of TPOs.
- (f) 91% of staff interviewed answered 'Yes' when asked if they were clear about their role within the offender management model.
- (g) 75% of offender managers stated that they received formal supervision on at least a six weekly basis and 80% of them described the quality of supervision as being at least sufficient, with 17% considering it to be excellent.
- (h) When asked about their annual appraisal, 83% of offender managers interviewed had received one in the past year and 92% of those were clear that their objectives were linked to the Area Business Plan.
- (i) The area introduced an attendance management policy in December 2005 that was intended to reduce sickness absence. The CO established a cross-grade group, which included Board members, to implement and monitor the policy. Staff sickness levels had reduced from 14.1 days per person when the policy was introduced to 10.3 days per person in March 2007. The process was centrally monitored

to ensure that it was consistently applied and that no individual was treated unfairly by its improper application. 97% of offender managers indicated that they were aware of the area's procedures. Since the introduction in October 2006 of 'triggers' (15 days sick leave per rolling 12 months) leading to a formal interview to identify any ways in which the area could support the staff member, the area's figures had come well within the national target.

- (j) There was a 2006/2007 Learning and Development Plan which was linked to the Business Plan.
- (k) Black and minority ethnic staff were actively encouraged to attend the local Black Staff Group and NAAPS and ABPO. Posters had been produced to publicise these groups and staff were reminded about them during the induction programme.
- (l) The area operated with full regard to the Race Relations (Amendment) Act 2000 and adhered to the Race Equality Scheme. The area had established a Diversity Steering Group, chaired by a Board member, and a Diversity Working Group. In addition, a director and a deputy director had lead responsibility for diversity issues. It was pleasing to find that 70% of offender managers had been asked to complete an ethnic monitoring form in the past 12 months.
- (m) The area had a 2007/2008 costed Training Plan, linked to its Business Plan. This was designed to support staff development and improve service delivery.

**Area for Improvement:**

- (a) Only 55% of offender managers indicated that they felt that their training and development needs were met.

<b>4.5</b>	<b>General Criterion: REVIEW AND EVALUATION</b> <i>Outcomes of interventions are assessed and reviewed using available data.</i>	<b>Satisfactorily met</b>
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**Strengths:**

- (a) The Board and SMT had the principle of review built into their thinking from the outset, with new policy documents having printed on the front cover dates for reviews and specific points that would be considered. Examples produced as evidence for the inspection included the policies on attendance management and staff supervision and appraisal. Additionally, review documents covering tiering, workforce planning, the Race Equality Scheme and PSO regrading were also produced.
- (b) The area was conducting an audit of PSRs of minority ethnic offenders to gather information to help improve practice.
- (c) There had been a senior staff group in March 2007 devoted to user and stakeholder feedback, with a particular focus on diversity.

- (d) The probation led multi-agency project for PPOs was independently evaluated and a detailed report had been published.
- (e) There had been a number of audits and analyses covering a range of court related matters, including proposal and outcome information. Whilst this did not appear to happen in an ongoing manner, nonetheless there was evidence of its due consideration and publication to assist staff. Guidelines for report writing had been produced with explanations as to why certain items needed to be included in them.
- (f) A number of highly detailed analyses of exit interviews of offenders on unpaid work had been produced. It was pleasing to see that these had a clear focus on diversity issues.
- (g) There was a group of senior managers who met to review the learning points from SFOs and a written process for ensuring that appropriate learning points were properly disseminated. There was evidence of a robust approach to implementing the lessons from SFO reports.
- (h) The area had a process for dealing with complaints and both processes and outcomes were analysed and reported to the Board. Where complaints were upheld, the issues were raised with the relevant staff member in supervision.

**Areas for Improvement:**

- (a) The area did not routinely use OASys data to evaluate outcomes for offenders, although this work was planned for the future.
- (b) The views of offenders other than on unpaid work were not routinely analysed, although there was evidence of an exit interview questionnaire to be used for final interviews during a particular month.

**4.6 General Criterion: COMMISSIONING OF SERVICES**  
*There is efficient provision of effective services to support offender management outcomes and to ensure equal access to provision for offenders.*

**Satisfactorily met**

**Strengths:**

- (a) Commissioned services were clearly linked to the Area Business Plan, and reviews of this indicated progress or change to the original proposal. The plan and its reviews all contained an assessment of business risk for each item.
- (b) A partnership reference group representing black and minority ethnic and other voluntary groups had been established to advise on the Business Plan, the subcontracting plan and the best value process.
- (c) In partnership with the police and the local authority, the area had developed systems for measuring reoffending against stretch targets for PPOs.

- (d) The area was actively represented on a range of multi-agency commissioning bodies, including Supporting People, the LSC, the LCJB and the CDRP. These groups helped the area to meet targets on public protection, reduce reoffending and improve provision for offenders. Supporting People for example had recently agreed to fund an increase in the number of floating supported tenancies it would provide for offenders.
- (e) The area was involved in work with organisations that specifically supported work with minority groups such as Azuka, a local support group for black prisoners.
- (f) A good range of services had been commissioned and offender managers identified that there was no gap in provision in 73% of cases. In particular, drug and alcohol services were well integrated into the worksites within Nottinghamshire and effectively used by staff. This also applied to the PPO project.
- (g) Drug and alcohol services were considered to be at least sufficient in 83% cases, whilst education and training were so viewed in 96% cases. This was in the context of very good working relationships and arrangements with the LSC.
- (h) There were good joint working arrangements with the police for MAPPA and for the PPO project.

**Areas for Improvement:**

- (a) There was little evidence that the user perspective was a key factor in commissioning, maintaining or decommissioning services for offenders.
- (b) In the inspection sample offender managers on the whole had little contact with offenders during the custodial part of their sentence. Nor was there evidence of active links with their counterparts based in the establishments.

## APPENDIX 1 Contextual information

### Caseload at end of March 2007

Total caseload	
% White	83.21%
% Minority ethnic*	16.63%
% Male	89.09%
% Female	10.91%
Number of cases subject to MAPPA:	(%)
Level 1	59
Level 2	478
Level 3	17
Number of PPO cases	61
* Excluding cases for which ethnicity information is not available.	

The local definition of a PPO case – on which the above figure is based – is those convicted of high numbers of serious acquisitive crimes, primarily, Robbery, Burglary, and serious auto crime. Predominantly those with drugs or substance misuse problems.

**Total revenue budget in 2006/2007:** £18,006k

**Total revenue budget in 2007/2008:** £18,310k (provisional)

**Approved premises:** **Trent House** – 19 beds, potential for three to five women, but none at present.

**Southwell House** – 18 beds, potential for three women, but two at present.

**Astral Grove,** – 15 beds.

## **APPENDIX 2**

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

#### **Model**

- The OMI programme started in May 2006. All NOMS areas in England and Wales are being inspected over a three year cycle, region by region. We hope to identify and promote effective work with offenders and disseminate information about good practice.
- Probation areas are being assessed on how well they have met defined inspection criteria focusing on:
  - Assessment and sentence planning carried out on offenders
  - Implementation of interventions delivered to offenders
  - Achievement and monitoring of outcomes
  - Leadership and strategic management.Particular attention will be given to RoH issues – it is performance against these measures which will determine whether a re-inspection is carried out.
- The inspection takes account of the regular NPS performance data. These are produced by the NPD who are responsible for their collection and quality assurance.
- Each inspection takes place over one week. The area is asked to identify a random sample of 100 offenders (more in the largest areas) who have been under supervision for approximately six months. We then ensure that there is a minimum number of the following types of cases: high/very high RoH; PPOs; approved premises residents; statutory victim contact; black and minority ethnic offenders. The cases are drawn from both community orders and licences.

#### **Methodology**

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

#### **Publication arrangements**

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

## APPENDIX 3

### Scoring Approach

This describes the methodology for assigning the scores to each of the general criteria, to sections 1 to 3 and to the *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 4**

### **Role of HMI Probation**

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

#### **Home Office Objectives**

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

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

#### **Role**

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

#### **Code of Practice**

HMI Probation aims to achieve its purpose by:

- undertaking its work with integrity in a professional, impartial and courteous manner
- consulting stakeholders in planning and running inspections and regarding reports
- forming independent inspection judgements based on evidence
- the timely reporting and publishing of inspection findings and recommendations for improvement
- promoting race equality and wider diversity issues in all aspects of its work, including within its own employment practices and organisational processes
- developing joint approaches with other Inspectorate and Audit bodies to ensure a coordinated approach to the criminal justice system.
- The Inspectorate is a public body. Anyone who wishes to comment on an inspection, a report or any other matter falling within its remit should write to:

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