



HM Inspectorate of Probation

AUDIT OF
ACCREDITED
PROGRAMMES

East Midlands Region of the
National Probation Service for
England and Wales

Report on:
Nottinghamshire Probation Area – Think First

November 2001

Acknowledgements:

We are grateful for the cooperation of staff from the Nottinghamshire Probation Area in completing this audit.

The audit team comprised:

Christine Fiddes	Alan MacDonald
Kate White	<i>Audit Manager</i>
<i>Inspection and Audit Officers</i>	Frances Flaxington
Andy Bonny	<i>HM Deputy Chief Inspector of Probation</i>
<i>Deputy Audit Manager</i>	

Glossary

ACE	Assessment, Case Recording and Evaluation System
ACO	Assistant chief officer
CO	Chief officer
HMIP	HM Inspectorate of Probation
IAPS	Interim Accredited Programmes Software
IQR	Implementation Quality Rating
LSI-R	Level of Service Inventory-Revised
N/A	Criteria not assessed
OASys	Offender Assessment System
OGRS	Offender Group Reconviction Scale
PO	Probation officer
PSR	Pre-sentence report
RASPER	Referral, Assessment, Supervision Planning, Evaluation and Review
SPO	Senior probation officer

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Context:

Programmes achieving accredited status have undergone a rigorous process of development and scrutiny to ensure they have maximum impact in terms of reducing reoffending. Selecting well-tested programmes is however only part of the picture – without effective implementation by probation areas much of the positive influence on offenders' behaviour may be lost.

Establishing robust quality assurance systems and independent audit arrangements for accredited programmes is therefore crucial. HMIP is responsible for auditing accredited programmes on behalf of the Joint Accreditation Panel. Each probation area will be assessed against the delivery criteria given in the Performance Standards Manual June 2001, which also outlines how these criteria are to be met and evidenced.

Scoring Approach:

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

Committed leadership and supportive management	20%
Programme management responsibilities	30%
Quality of programme delivery	30%
Case management responsibilities	20%

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

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

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

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

Overview:

- Nottingham Probation Area had delivered Think First from two sites since April 2001. At the time of the audit the area was running its eighth Think First programme.
- The audit was undertaken during November 2001 and comprised of four main stages: the provision of advance information; video monitoring; case file reading; and a visit to the area.
- A wide range of staff involved in the delivery and support of Think First in Nottinghamshire were interviewed, including the ACOs with responsibility for effective practice and programme delivery. A member of staff from the area's information unit, the programme manager, treatment managers, tutors and staff with responsibility for case management and writing PSRs were also interviewed. Visits were made to both delivery sites and interviews conducted with seven offenders.
- Nottinghamshire had implemented a structure of semi-specialist tutors who were also responsible for the case management of offenders undertaking Think First. Some PSR writers were also specialist in their role.
- Nine videotapes from three programmes were assessed. The case file reading exercise incorporated all offenders allocated to these programmes, whether or not they had commenced them.
- Three of the criteria were not assessed – B4.2, B4.3 and D1.8. The area was at an early stage of delivery of Think First and so all tutors were relatively inexperienced in this programme (B4.2); national training for experienced tutors was not yet in place (B4.3); and accreditation of the Cognitive Skills Booster Programme to reinforce offender learning was still awaited (D1.8).
- This audit focused entirely on Think First.

Findings:

It was evident throughout that senior managers were committed to delivering Think First. The area had been restructured in April 2001 to generate an integrated model of delivery, with the semi- specialist role of programme tutor/case manager at its centre. This had led to benefits including improved staff knowledge, commitment and communication. Extensive investment in monitoring and case recording systems provided a sound basis for programme delivery and the area was commended on its speedy feedback of information to staff.

Having established the structure, it was disappointing to find that the knowledge accumulated by staff had not translated into satisfactory programme delivery. Furthermore, the area had not fully used the programme tutor/case manager role to enhance the support for offenders during their participation on Think First, the opportunities for which were beginning to become apparent to staff. It would not take a great deal for the area to make better use of this role to improve the holistic delivery of the programme and demonstrate the impact of its investments.

Recommendations

The CO should ensure that the area:

- *takes immediate steps to improve the overall quality of programme delivery, by developing the skills of its programme tutors as identified in the areas for improvement in criteria C1.1 to C1.4;*
- *reviews the structure of treatment management and invests in relevant training and/or development opportunities for treatment managers, to improve their assessment and supervisory skills;*
- *produces job descriptions with competencies for all staff involved in the delivery of programmes;*
- *explicitly addresses programme delivery issues in relevant policies, plans and practice guidance, particularly those on PSR writing and enforcement;*
- *develops a strategy and both sets and meets targets to enhance commencement and completion rates;*
- *improves offender selection and assessment, to ensure that those allocated to programmes are within the agreed OGRS 2 target band;*
- *develops a strategy to address race equality and wider diversity issues in programme delivery and provides opportunities for staff to develop their skills and awareness of these issues;*
- *gives direction to case managers about the required level of contact with offenders during the course of the programme, ensuring that attention is given to reinforcing learning;*
- *builds on the learning achieved by offenders on programmes, through integrating objectives into supervision plan reviews;*
- *improves the quality of information leaflets to offenders by taking account of the 'areas for improvement' in criterion B1.2 and produces a leaflet for staff summarising the programme.*

SECTION A: COMMITTED LEADERSHIP

A1.1 Committed leadership

2

Description: *The senior management of the area should be openly and explicitly committed to the proper running of the programme through policy and public statements.*

Strengths:

- The area had included specific targets for Think First and for achieving its quality rating, together with identified supporting action within its Area Plan 2001/2002: Priorities, Objectives and Targets.
- The Training Plan for 2001/2002 also gave significant attention to requirements for Think First and other accredited programmes and related planned events to area targets.
- The programme had been well resourced with the intention of providing sufficient programme tutors to deliver Think First for the next three years, and investment in properties had been undertaken to assist the effective delivery of accredited programmes.
- Staff conferences and briefings, led by senior managers, had promoted the delivery of Think First.
- Senior managers gave regular consideration to implementation issues and a CO instruction to staff on Think First proposals demonstrated the priority given to the programme.

Areas for improvement:

- Not all members of the new senior staff group had attended a Think First context setting day.
- Area policies, plans and practice guidance on equal opportunities, diversity, PSR writing and enforcement did not fully or explicitly integrate guidance on programme issues.

A1.2 Management structures

1

Description: *Effective line management structures exist for the proper operation of the programme integrating this within case management structures. Adequate time should be set aside for the effective management of the programme.*

Strengths:

- The area had adopted a structure whereby programme tutors were also half-time case managers. This promoted integration of the two roles and a more holistic approach to programme delivery.
- An organisational chart identified the line management structure for all staff involved in programme delivery.
- Quarterly meetings for programme and operational managers provided the main forum for management discussion of programme issues. These were chaired by the ACO with responsibility for effective practice, who had delegated authority for decision making, reporting to the central management team.

Areas for improvement:

- The area had not developed clear competency-based job descriptions for staff involved in programme delivery, case management or support roles.

A1.3 Staff ownership of the accredited programme

1

Description: *There is full ownership of the programme by managers, programme tutors and other relevant staff, e.g. court personnel and case managers.*

Strengths:

- All groups of staff interviewed indicated their support for the programme.
- In 75% of the case files examined, the case manager attended the programme review meeting.
- Documentation showed that a significant proportion of service delivery staff had attended Think First briefing events and this was confirmed by those interviewed.

Areas for improvement:

- During the quarter April to June 2001, Think First proposals had been made for only 7% of the area's target group (cases in the 41-74 OGRS band).
- Comments made by tutors on one post-programme report revealed some reservations about the programme.

A1.4 Effective communication with sentencers

2

Description: *There is high quality, proactive communication with local sentencers and clerks to the justices about the programme, including written information.*

Strengths:

- Presentations had been made to all three probation liaison committees during the previous year, with further input on accredited programmes scheduled.
- A presentation had been made to eight judges early in 2001. This was part of a schedule of twice yearly meetings, with accredited programmes notified as the topic for the next meeting.
- Material had been provided to both magistrates and judges together with a written attachment for PSRs. Copies of the area newsletter for probation liaison committees were provided for October 2000 and June 2001, both featuring accredited programmes with the latter being entirely devoted to this subject.

Areas for improvement:

- The area had yet to analyse the impact of its communication with sentencers on concordance rates.

SECTION B: PROGRAMME MANAGEMENT RESPONSIBILITIES

B1.1 Resources and facilities

2

Description: *Adequate accommodation consistent with the Estates Standards Manual is available for all sessions of the programme.*

The area had two delivery sites: one each in Nottingham and Mansfield. The former was located in a large recently converted centre shared with the city's case management teams. The latter provided programme delivery facilities for the county division, taking offenders from Worksop and Newark as well as Mansfield.

Strengths:

- The group rooms at each delivery site could all accommodate 12 offenders, with 'break out' facilities available.
- All necessary equipment was either present in the group rooms or available.
- The area had already decided to upgrade the facilities and had placed an order for replacement chairs which would meet the required standard.
- Video storage facilities had been made available at the area's head office where a locked cabinet had been designated for this purpose.

Areas for improvement:

- Some of the videotapes from the Derby Road site had poor sound quality.

B1.2 Provision of information leaflets about the programme

0

Description: *There should be a set of leaflets for offenders, sentencers and staff clearly describing the programme and its requirements.*

Strengths:

- The area had produced a leaflet for sentencers which clearly outlined the requirements of the programme.

Areas for improvement:

- There were two information leaflets for offenders, neither of which was adequate for use at the pre-sentence stage. The leaflets did not provide a sufficient account of programme requirements and made no reference to the area's complaints procedure. Of particular note was the absence of any reference to race equality or wider diversity issues.
- Only one of the offenders interviewed referred to receiving a leaflet before appearing in court.
- There was no leaflet for staff, which summarised the programme.

B2.1 Managing attendance

1

Description: *Offender attendance and absence are managed to achieve the required National Performance Management target for offender completions. Attendance is managed to achieve coherent delivery with full impact for all undertaking the programme. The maximum number of absences by any one offender is consistent with the requirements of the programme manual for the specific accredited programme.*

Strengths:

- The area's integrated case recording system demonstrated effective levels of communication between case managers and programme tutors.
- Staff understood their responsibilities for managing attendance and enforcement.
- Attendance registers and case records examined, demonstrated in the majority of cases that absences were dealt with in accordance with national standards and the programme requirements.

Areas for improvement:

- The area's policy and practice guidance on enforcement gave limited attention to programme attendance issues.
- Information on attrition had been collected, but this and other information had not yet been used to develop a strategy for enhancing completion rates.

B2.2 Avoidance of cancellation or disruption to sessions

1

Description: *Sessions are not cancelled or disrupted owing to offender crises, high workload or other pressures, and arrangements exist to deal with crises outside of the programme session. Sessions are delivered at the frequency defined in the programme manual.*

Strengths:

- A calendar of programmes had been produced for each programme delivery site.
- Most programmes had three designated tutors plus a treatment manager who provided cover for unforeseen circumstances.

Areas for improvement:

- Tutors reported some disruption to the programme due to the early or late arrival of transport.
- There was evidence on videotape of external disruption to sessions and of a tutor leaving the room on more than one occasion during sessions.

B2.3 Catch-up sessions/Attendance

1

Description: *Provision is made for catch-up sessions, or a 'bus stop' approach, to allow offenders who miss a session to continue with the programme. All offenders missing sessions, who are not excluded from the programme, should attend catch-up sessions, or in the case of a 'bus stop' approach be moved onto another programme within ten working days, to ensure full delivery of the programme. Treatment managers must specify arrangements for monitoring the integrity of catch-up sessions.*

Strengths:

- The case file reading exercise demonstrated that recording and enforcement of catch-up sessions was undertaken to a good standard.
- The programme calendar identified a member of staff with responsibility for catch-up sessions and staff confirmed that time was reserved for this purpose.
- Attendance registers indicated that catch-up sessions were planned and delivered in the correct sequence.

Areas for improvement:

- The area had not yet implemented a system of video monitoring and integrity checks for catch-up sessions.

B2.4 Timeliness

0

Description: *All offenders commence the programme, or specified pre-programme phase, within the first month of the order or within three months if other structured pre-programme work is undertaken. Occasionally, the timing may be different to permit other preliminary work to be completed, e.g. a programme of drug detoxification.*

Areas for improvement:

- Offenders in only seven of the 28 cases reviewed had started the programme within one month of the order commencing.
- In 25% of the cases reviewed, offenders had not started the programme within one month nor was there evidence of necessary preliminary work having taken place.

B3.1 Staff selection

2

Description: *A staff selection procedure meeting the requirements of the programme manual is in place and only staff meeting the defined criteria are selected to deliver the programme.*

Strengths:

- Tutors confirmed that they had been well informed about what was involved in running accredited programmes prior to deciding to apply. The area had delivered briefings about the assessment centre and provided written information.
- It was area practice to use only accredited, trained staff to deliver the programme and all tutors had successfully passed the assessment centre and necessary training. However, this practice now needed to be formally included in the area's policy on programme delivery.

B3.2 Staff roles and competencies

0

Description: *Differences in role between grades or posts are clearly reflected in job descriptions. A defined set of competencies exist for each staff role involved in the programme, using those specified in the programme manuals and the national management manual.*

Strengths:

- All staff were able to describe their own roles and areas of responsibility.
- The roles and responsibilities of the effective practice implementation manager (ACO), the SPO programmes and effective practice, SPO line managers and unit administrative managers had been discussed and initial guidance offered. Additionally, the programme manager had developed information packs for tutors and treatment managers. These were discussed in individual briefings with treatment managers to ensure adequate knowledge of roles and expectations.

Areas for improvement:

- Refer to the 'areas for improvement' under criterion A1.2 above.

B3.3 Preparation and debriefing time for tutors

1

Description: *Tutors are allowed 1½hours for preparation and debriefing for each session in addition to the programme delivery time.*

Strengths:

- Programme staff confirmed that the time allowed for preparation and debriefing was in accordance with the national management manual and this was demonstrated for most cases in the session completion information forms.

Areas for improvement:

- Documentation indicated that in some of the early programme sessions practical difficulties (e.g. reception cover and equipment problems) had eroded preparation time.

B3.4 Staff continuity

2

Description: *Three leaders should normally be assigned to each accredited programme to allow for leave, sickness and other contingencies. All sessions of the programmes are delivered by at least two of the three assigned staff. Continuity is maintained by at least one of the staff members having run the previous session.*

Strengths:

- The area normally allocated three tutors and a treatment manager to each programme, with a designated member of the team to complete catch-up sessions.
- Staff expressed confidence in the system and said that it worked as intended.
- Session registers provided evidence of good tutor continuity and this was confirmed by offenders.

B4.1 Training arrangements for new staff

2

Description: *Training courses exist for all grades and roles involved in delivering the programme and all staff newly assigned to the programme receive training before running their first programme. The training delivered follows that defined in the programme training manual.*

Strengths:

- All programme tutors and the programme manager had successfully completed the required training prior to delivery of the programme. Designated staff had attended training in psychometric test scoring.
- Supervision notes and personal plans demonstrated that regular attention was given to staff development needs.
- The first stage of treatment manager training had been provided for 17 members of staff.

Areas for improvement:

- Treatment managers identified the need for training to develop skills in assessing and scoring the quality of practice.

B4.2 New staff paired with an experienced colleague when running their first programme

N/A

Description: *Staff newly trained in a programme should be paired with a more experienced colleague when running their first course.*

As staff had been appointed to programme tutor roles at the same time this criterion has not been scored in the first year.

B4.3 Training arrangements for experienced staff

N/A

Description: *Competency-based booster and developmental training arrangements exist for all staff experienced in delivering the programme. All programme delivery staff are required to attend such training when they have demonstrated their competence to do so. [This will include delivering a stipulated minimum number of courses.]*

National booster training was still awaited and therefore this criterion has not been scored.

B4.4 Staff knowledge of the concepts and methods used in the programme

2

Description: *All relevant staff have a knowledge of the programme model, targeting, objectives and methods sufficient for effective delivery of the programme.*

Strengths:

- All tutors delivering the programme had successfully completed the national training.
- Programme tutors and case managers demonstrated a detailed level of knowledge of programme concepts and methods.
- Staff were well informed on appropriate targeting bands following the dissemination of recent area research.

Areas for improvement:

- Whilst PSR writers demonstrated an adequate grasp of the concepts and methods used in the programme, they indicated the need to develop more knowledge and to actively keep Think First on the team agenda.

B4.5 Staff knowledge of the theoretical and evidential basis of the programme

1

Description: *All relevant staff have a knowledge of the programme's theoretical base and evidence, sufficient for effective delivery of the programme.*

Strengths:

- Programme staff and case managers were able to discuss in some depth the theoretical and evidential basis for the programme and were familiar with some of the relevant literature.
- Staff were able to identify additional information and learning needs and demonstrated an open attitude to improving their knowledge.

Areas for improvement:

- Case managers and PSR writers indicated that more information about the evidential base for Think First, including regular updates on current research, would help them to 'sell the programme' more effectively to offenders.

B4.6 Supporting skills necessary to run programmes

0

Description: *From interview, observation, appraisal and training audits all relevant staff have supporting skills including core group work skills, presentation skills, case management, etc, sufficient for the effective delivery of the programme.*

Strengths:

- The area had invested in a range of training in supporting skills. These included basic group work skills for team assistants and POs, cognitive-behavioural skills for team assistants and supervising skills for treatment managers. Motivational interviewing for case managers and programme staff had already been delivered, with further training scheduled in January and February 2002.
- Personal plans for staff documented learning and development needs appropriate to role and within the context of programme delivery.
- Video monitoring observation forms, completed by treatment managers, identified individual tutor development needs and recorded objectives for improvement.

Areas for improvement:

- Despite the area's investment in training, videos of programme sessions indicated that staff had not yet developed their skills sufficiently to deliver programmes to a satisfactory standard. This was reflected in the low scores for group work skills, details of which can be found at criterion C1.3.

B5.1 Staff supervision and quality of practice

1

Description: *All staff involved in the programme receive support and supervision at a frequency specified in the national management manual. This will enable tutor skills to be developed and problems resolved within the lifetime of the current programme by supervisors familiar with effectiveness methods and the programme. The manager to have observed staff in the delivery of the programme either directly or through video prior to each supervision session.*

Strengths:

- There was evident commitment to provide supervision at the required frequency. Programme tutors received treatment manager supervision after every five sessions as well as monthly supervision from line managers.
- Treatment managers undertook video monitoring more frequently than was required. Whilst their assessment and scoring skills needed development, there was evidence in the majority of cases of careful attention being given to tutor performance and this was reflected in their comments. Objectives were set after each session and subsequently reviewed.

Areas for improvement:

- In some cases tutor supervision sessions lasted for less than the hour prescribed in the national management manual.
- A large number of treatment managers had limited their ability to build-up expertise which, in turn, reflected on the quality of supervision and the assessment and scoring of performance.

B5.2 Staff appraisal

1

Description: *All members of staff involved with the programme have their competence to perform their assigned role assessed annually through the appraisal process. Staff whose performance is assessed as below the acceptable standard but making progress should be given further training and other assistance to improve their performance and a date set for review. Staff who are not making progress in achieving the required standard of performance should not take any further part in running the programme.*

Strengths:

- Examples of appraisals conducted early in 2001 reflected that attention was given to programme delivery issues. Personal plans for programme staff specified learning and development needs, together with how these were to be addressed during the current year.
- Key areas for achievement were explicitly linked to competencies identified within the personal plan.
- Video monitoring forms, completed by treatment managers, provided evidence that most treatment managers set out detailed strengths and objectives, which were subsequently reviewed.

Areas for improvement:

- The area had no written policy on deselection of tutors who failed to perform satisfactorily.
- The systems in place for supervision and appraisal had not yet led to a satisfactory level of programme delivery.

B6.1 Offender selection and assessment

0

Description: *Routine monitoring results confirm the profile of those entering the programme are consistent with the criminogenic needs addressed by the programme, the level of risk of reoffending and the level of risk of harm/dangerousness.*

Strengths:

- The area's development and implementation of the RASPER form ensured that a thorough system was in place to conduct assessment and selection.
- There was evidence that the area had recently taken action to improve targeting practice to reflect a concentration on those in the medium risk of reoffending band and to promote better assessment of suitability.

Areas for improvement:

- A high proportion (32%) of offenders referred to the programme between February and October 2001 were in the OGRS 2 category of over 74%. Senior managers recognised that this was not an appropriate balance.
- 32% of the case files reviewed were found to be outside the agreed targeting matrix. This included some cases with a high OGRS 2 score but without additional work identified, as well as some below the target level.
- The area's own research had identified gaps in completion of the RASPER form by area staff.

B6.2 Offender knowledge and understanding of the programme requirements

1

Description: *The requirements of the programme are clearly communicated on at least two occasions to each participant verbally and in writing, and there is evidence from signed consent forms, observation and/or interview that offenders know and understand the requirements.*

Strengths:

- Case managers gave a thorough account of their explanation of programme requirements to offenders, which were reinforced by programme tutors at the pre-group session.
- Offenders interviewed had a reasonable understanding of programme requirements.

Areas for improvement:

- Only 54% of case files reviewed showed that programme requirements had been communicated on at least two occasions and there were six cases with no recording of an explanation at all.

B6.3 Group size

1

Description: *For group programmes the maximum starting group size during the previous year did not exceed 12 and the minimum was not less than four.*

Strengths:

- Registers for the first five programmes confirmed that the number of offenders instructed to attend the programme complied with the national requirements.

Areas for improvement:

- Groups had continued to be run with very small numbers, when it would have been more appropriate to restart offenders on a new programme.

B6.4 Accessibility of group work programmes

1

Description: *If female or minority ethnic offenders are placed in mixed groups there are no singleton placements unless agreed to by the offender. Appropriate support arrangements should be evidenced for these programme participants.*

Strengths:

- Members of staff demonstrated awareness and sensitivity regarding the placement of women and minority ethnic offenders on the programme: they consistently referred to the policy of no singleton placements and described action taken on an individual basis to assist satisfactory attendance and completion.
- The composition of the tutor group was such that programme teams could reflect the make-up of the offender group.
- The area had engaged in research into the supervision of minority ethnic offenders in Nottinghamshire and had formed a study group for improving service delivery to black offenders.

Areas for improvement:

- There was no written strategy providing a framework for the accessibility and delivery of the programme to women and minority ethnic offenders and staff were unable to identify the source of the no singleton placement policy.

- The service to women and minority ethnic offenders appeared to depend largely on individual case managers and programme tutors, rather than through a centrally driven strategy. Consideration did not appear to have been given to proactive arrangements such as mentoring.
- Staff expressed the view that they would have welcomed the opportunity for a more coordinated and informed approach to the delivery of programmes to women and minority ethnic offenders.

B7.1 Implementation of monitoring and evaluation design

2

Description: Interview and observation show that monitoring and evaluation arrangements are working as intended and are understood and supported by all staff involved. This should include both input and feedback of data to managers and practitioners at local level.

Strengths:

- Nottinghamshire had developed comprehensive systems for its monitoring and evaluation of programme delivery. The three main components were the RASPER form, the pre-IAPS programme documentation and the spreadsheets maintained by administrative staff. These provided the basis for area programme monitoring.
- The area's IAPS implementation plan identified the documentation required and staff responsible for completing it. This was reinforced by the tutor and treatment manager information packs provided individually to all treatment managers as part of their briefing with the programme manager.
- The designation of two administrative staff to collect and collate programme information was a contributory factor to its success.
- Staff at all levels indicated that they received feedback from the monitoring and evaluation work undertaken, often through the programme manager.
- Quarterly reports to senior managers were used to identify further information needs and generated additional analysis to inform operational needs.

Areas for improvement:

- The area had identified some shortfalls in the level of completion of the RASPER form by staff.
- Staff indicated that it would have been helpful to have had more routine access to information via a newsletter or digest.

B7.2 Practice is informed by monitoring and evaluation evidence

2

Description: Consistent use is made of evaluation information as it becomes available by those with most direct responsibility, e.g. managers giving regular consideration to attendance and completion information, practitioners to offender feedback and attitude/behaviour change scores. Awareness/knowledge about evaluation results from the same programme operating elsewhere will be relevant.

Strengths:

- Managers used the quarterly reports to identify areas of poor performance and instigate remedial action. This was evidenced most clearly in the CO instruction to staff to propose Think First for all those in the appropriate OGRS2 targeting band, unless sanctioned otherwise by their line manager, although the impact of this had yet to be measured.
- Information from the first quarter's performance generated further analysis of the OGRS 2 proposals, completion rates for black offenders and the impact of drug misuse on an offender's

ability to complete the programme. It was evident that the results of these investigations had been fed back to staff to inform their targeting and PSR practice, although the effect had yet to be demonstrated.

- There was evidence that monitoring and evaluation issues were discussed at area meetings for programme staff, group work managers' meetings and at the regional effective practice meetings.

SECTION C: QUALITY OF PROGRAMME DELIVERY

C1.1 Adherence to programme manual

0

Description: *All sessions of the programme should be delivered in line with the instructions of the programme manual and demonstrate close adherence to the aims and objectives. There should be evident commitment to follow the intention/purpose of the exercises used, including repetition/reinforcement, where these are designed parts of the programme.*

Programme sessions were short, the average length of an observed session being one hour and 23 minutes. This contributed to the poor score on 'adherence to the programme manual'.

Areas for improvement:

- Exercises were frequently not set up and run in accordance with the manual. Some exercises were missed, not fully completed or properly explained.
- The substitution of alternative examples and exercises in some programme sessions did not always work well.
- Exercises did not generally run for an appropriate length of time and opportunities to reinforce learning through additional exercises in the manual were missed.
- Insufficient attention was given to checking out the group's learning and consequently the aims and objectives of sessions were not being achieved.

C1.2 Adherence to treatment style

0

Description: *From direct observation or video evidence, programme tutors make competent and appropriate use of the techniques specified. There will be evidence of effective communication of the material, offender understanding and engagement. Pro-social attitudes are skilfully modelled by workers and are predominant in the group. This includes challenging pro-criminal or anti-social attitudes and behaviour.*

Strengths:

- Offence supporting views were appropriately challenged.

Areas for improvement:

- Tutors had not developed an open questioning approach, often using closed questions which did not generate involvement or participation.
- The lack of open questions was compounded by a failure to listen to answers, which seriously undermined learning opportunities. This was commented on by an offender and on one occasion during an observed session contributed to a confrontational dialogue.
- Tutors were too ready to interpret for offenders, express their own views or offer solutions, rather than encourage participants to reach their own conclusions.
- Links between and within sessions were not adequately made.

C1.3 Group work skills

0

Description: *Programme tutors demonstrate effective management of the group, including effective co-working to facilitate learning by offenders and modelling pro-social behaviour. Disruption by participants is minimised.*

Low group numbers, combined with an imbalance of an offender to tutor ratio, limited the ability to demonstrate group work skills.

Strengths:

- Tutors used appropriate language and were clearly spoken in most cases.

Areas for improvement:

- Despite low numbers, groups were not well managed. There were interruptions, including a tutor leaving the room on four occasions during programme sessions.
- Some sessions were dominated by one group member, leaving others uninvolved.
- The introduction and endings of exercises were not focused.
- There was little evidence of the use of praise.
- Co-working skills were assessed as in need of improvement in seven of the nine sessions viewed.

C1.4 Programme delivered addressing race equality and diversity issues

1

Description: *From direct observation or video evidence, issues of racism and sexism are effectively addressed whether arising within programme delivery or offender response. Staff are alert to race equality and diversity issues, they always respond appropriately and show that they have considered and developed strategies for responding, e.g. relevant resources and arguments, clarity about boundaries, approaches that may promote perspective taking.*

Strengths:

- The diversity action plan set out the need to take action to 'ensure that minority ethnic offenders are included into accredited programmes and monitored'. An analysis undertaken by the programme manager illustrated that the proportion of black offenders completing the programme was better than that for white offenders.
- During interview, staff demonstrated that they were alert to race equality and wider diversity issues and that these were addressed on an individual basis. This process began with the case manager and was reinforced through the group ground rules.
- The area's group work meetings provided the opportunity to discuss diversity issues and there was evidence that this had been done. Further opportunities to improve and develop practice were afforded through the area's representative on the national programmes diversity panel.
- Minority ethnic offenders interviewed considered that they had been dealt with fairly.

Areas for improvement:

- Programme tutors expressed some concerns about how to challenge racist or sexist remarks within programme delivery without affecting programme integrity. This tension was demonstrated on two of the videotapes observed when remarks went unchallenged and gave a clear indication of the need for staff training in this area.
- Whilst the area had an equal opportunities policy and statements within the What Works implementation strategy and diversity action plan, these were not supported with practice guidance or explicit management strategy in relation to programme delivery. This left staff to address issues on an individual level rather than within an organisational framework.

C1.5 Programme integrity checklist

1

Description: *The programme integrity checklist for each session is completed.*

Strengths:

-
- Programme tutors completed a session completion information form and register for each session of the programme, setting out details of offender participation. These were completed during the debriefing period at the end of each session.

Areas for improvement:

- The information about offender participation was limited and of variable quality.
- Tutor session review/video monitoring forms had not been completed for all programme sessions and the performance recorded on those available was better than that observed by the auditors.

C1.6 End of programme summary reports

1

Description: *The case record shows that at the end of the programme delivery staff prepare a summary for the case manager indicating:*

- *Participation in the programme*
- *Progress made*
- *An assessment of risk, including the identification of factors relevant to the individual concerned*
- *An assessment of the offender's coping skills*
- *Likely scenarios for relapse, including immediate precursors and triggers which might give prior warning*
- *Identification of remaining treatment needs.*

Strengths:

- The area had developed a post-programme report format, which covered all the required areas and was completed for all those who finished the programme.

Areas for improvement:

- Post-programme reports, whilst focused, were brief and limited in detail, some particularly in relation to the identification and explanation of remaining treatment needs. Case managers interviewed indicated that the post-programme meeting was more useful than the report itself as they were familiar with general progress through the electronic case record.
- The case file reading exercise revealed that the post-programme report had influenced the supervision plan in only one of four cases.

SECTION D: CASE MANAGEMENT RESPONSIBILITIES

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

1

Description: *The supervision plan integrates the programme into the overall plan of work for each offender. Specific objectives are set in a sequence appropriate for the offender and are recorded in the initial supervision plan and regularly reviewed. Assessments should be based on OASys when available, or ACE or LSI-R before then.*

Strengths:

- The case files revealed that the practice of writing SMART objectives was beginning to take effect with some good examples evident.
- The majority of cases reviewed demonstrated some level of integration of the programme within the overall plan of work for the offender. Fifteen of the 28 cases were scored as fully integrated, with a further nine as mostly integrated.
- Sixteen of the 28 cases were found to have fully met the requirement of being based on a recognised risk assessment instrument, with a further seven as largely met.

Areas for improvement:

- The case file reading results, whilst promising, nevertheless demonstrated that there were still improvements to be made in setting relevant SMART objectives for the offender which integrated the programme, as well as making full use of assessment information.

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

2

Description: *The case records show, and interviews with selected staff indicate, the existence of effective arrangements for liaison, handover and communication. This should include the three-way meetings between the case manager, programme staff and the offender at the end of the programme.*

Strengths:

- Case records demonstrated that on three of the four relevant occasions the case manager had attended the post-programme three-way meeting. The value of this was confirmed during interviews with staff who had supervised those completing programmes.
- The majority of cases reviewed provided evidence of effective communication between programme staff and case managers. This was assisted by the electronic case record which was accessible to both groups of staff. Programme tutors described how they used this to alert case managers of any urgent issues.

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

0

Description: *The case manager is responsible for preparing and motivating the offender prior to their participation on an accredited programme and for reinforcing learning during the programme.*

Strengths:

- Two-thirds of the case records showed that the case manager had undertaken all of the pre-programme and motivational work within the appropriate timescale.

Areas for improvement:

- Whilst there was some evidence of ongoing work by case managers to address problems, there was insufficient evidence of learning being reinforced during the programme. This reflected the absence of an organisational expectation requiring case managers to maintain regular contact with offenders during programmes.

D1.4 Understanding and knowledge of programme methods

2

Description: *Interviews with case managers demonstrate they have a clear understanding of the aims and objectives of the programme and that they either have the requisite skills to undertake reinforcement, follow-up and/or relapse prevention work, or the ability to refer to staff possessing these skills.*

Strengths:

- All case managers interviewed confirmed that they had received the required national training and, as they were also programme tutors, they were able to demonstrate a high level of knowledge of programme methods. This ensured that they had the requisite skills to undertake reinforcement, follow-up and/or relapse prevention work.
- A number of case managers had undertaken motivational interview training and those who had not were being encouraged to do so.

D1.5 Monitoring of attendance and enforcement

2

Description: *Responsibility for the monitoring of attendance and the enforcement of orders is clearly defined with appropriate systems in place. There is evidence of effective enforcement in all cases.*

Strengths:

- Case records demonstrated a very high level of recording offenders' attendance, non-compliance and enforcement action taken, with 93% of those cases reviewed fully meeting this requirement.
- The area achieved good results in terms of enforcement action taken within the agreed national standards timescale, with 86% of relevant cases either fully or mostly meeting this standard.
- Staff were clear about their responsibilities in relation to the monitoring of attendance and enforcement.

D1.6 Documentation

1

Description: *The case record shows that all relevant documentation is completed.*

Strengths:

- The area had established comprehensive and systematic documentation and had taken action to inform and improve levels of completion.
- Most (83%) of the case records reviewed contained all or most of the documentation required.

Areas for improvement:

- There were four cases (14% of the sample) where this criterion was not met at all.

D1.7 End of programme review

0

Description: *The supervision plan review for each offender shows that at the end of the programme appropriate individual objectives are identified to strengthen and build on the progress made, and to achieve successful community reintegration.*

Strengths:

- The majority of case records provided evidence that attention had been paid to community reintegration issues: 50% of these achieved full marks in the case file reading exercise.

Areas for improvement:

- The level of attention to the post-programme report in the supervision plan reviews was disappointing, with only one of the four relevant cases fully considering this document.
- Few case records had fully SMART objectives in the supervision plan review.

D1.8 Reinforcement and relapse prevention work

N/A

Description: *There are specific arrangements in place to reinforce learning and for relapse prevention work, including booster programmes where required by the programme, delivered by appropriately trained and skilled staff.*

The area was not yet at the stage of implementing booster training. Developments were awaited at a national level. This criterion has therefore not been scored.

Next Steps

HMIP will employ a three-tier follow-up process, depending on a probation area's performance rating:

Level 1 follow-up

A level 1 performing area will have met or exceeded the agreed IQR figure of 70%. (This figure rises to 75% for year 2 and 90% for year 3.) The follow-up will normally be conducted within one year of the audit report being received by the probation area, and will usually be limited to a desktop exercise, depending on the advance information received, focusing on the areas for improvement for criteria that were not fully met in the original audit.

Level 2 follow-up

A level 2 area will not have reached the 70% quality rating for programme delivery, but will have attained at least 40%. The follow-up will combine a request for written information and a one-two day visit to the probation area with HMIP auditing further videotapes and case files. This will normally take place within one year of the audit report being received by the probation area.

Level 3 follow-up

A level 3 area will have scored less than a 40% IQR. The follow-up will involve a fresh audit of the probation area and will normally be completed within six months of the audit report being received by the probation area.

Nottinghamshire Probation Area achieved an IQR of 52% and is a **level 2 area**. A limited follow-up audit will be carried out in one year's time. The area should pay particular attention to mandatory items, which have not been fully met.

This audit report and the IQR will be received by the Joint Accreditation Panel in February 2002.