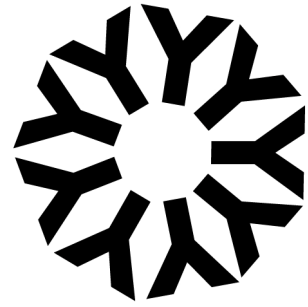


*Estyn  
Healthcare Commission  
Healthcare Inspectorate Wales  
HM Inspectorate of Constabulary  
HM Inspectorate of Prisons  
HM Inspectorate of Probation  
Office for Standards in Education  
Social Services Inspectorate for Wales*



# Joint Inspection of Youth Offending Teams of England and Wales

Reinspection Report on:  
Vale of Glamorgan Youth  
Offending Service

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## Foreword

The inspection of the Vale of Glamorgan YOS, conducted in October 2007 under phase four of the YOT/YOS inspection programme, revealed a number of shortcomings. We therefore conducted a reinspection in December 2008, focusing on the recommendations contained in the original report.

We were pleased to see that the Management Board had responded positively to the action plan following the original inspection. New terms of reference had been agreed, membership had been reviewed and new staff appointed, including a new YOS Manager. The Management Board had a better understanding of its role and responsibilities and the staff team impressed the inspectors with their enthusiasm, knowledge, skill and overall commitment. Improvement in the quality of practice was evidenced, but further work was still required in some key areas of service delivery, such as the assessment and management of Risk of Harm and safeguarding.

Although the process of change and progress in management and practice was still at a formative stage, we believe that the YOS has the foundations in place and the potential to continue to improve.

*Andrew Bridges*  
*HM Chief Inspector of Probation*

*February 2009*

## Acknowledgements

We would like to thank all the staff from the Youth Offending Service, members of its Management Board and partner organisations for their assistance in ensuring the smooth running of this reinspection.

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## Next steps

The report will be submitted to the Lord Chancellor, as the Secretary of State responsible for youth justice, with simultaneous copies to the Education and Health Secretaries and the Welsh Assembly Government. A copy will also be sent to the Youth Justice Board. In addition, copies will be made available to the press and placed on the website of HMI Probation at:

<http://www.inspectorates.justice.gov.uk/hmiprobation>

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## Glossary

Asset	Assessment tool developed by the Youth Justice Board
CAMHS	Children and Adolescent Mental Health Services
Estyn	HM Inspectorate for Education and Training in Wales
HMIP	HM Inspectorate of Probation
MAPPA	Multi-Agency Public Protection Arrangements
NEET	Not in education training or employment
ONSET	YJB tool for assessing children and young people at risk of offending
RoH	Risk of Harm
RoSH	Risk of Serious Harm
YJB	Youth Justice Board
YOS	Youth Offending Service

## Summary

### ***Work with children and young people at risk of offending***

- ◆ The YOS Management Board had made a successful application to the Safer Vale Partnership for three-year funding for the development of a youth crime prevention strategy.
- ◆ An experienced assistant team manager of prevention had started in August 2008 and a prevention coordinator had been appointed and taken up position in November 2008, but they had not been able to focus their attention on the development of this service and instigate the changes necessary.
- ◆ The YOS had the vision and potential to develop the prevention service but, in order to do so, key staff needed to be freed from operational and management responsibilities. This related specifically to the vacant assistant team manager post.

### ***Work with children and young people who have offended***

- ◆ There had been considerable advances in this area as a result of vacant posts being filled, staff roles clarified and policies, procedures and protocols being revised and agreed. In addition, there had been an ongoing programme of staff development.
- ◆ We found evidence to show that children's services and education and health colleagues were making an improved contribution to both assessment and intervention plans.
- ◆ The significant outstanding issue related to the inability of the YOS to have appropriate medium-term contingency plans to cover staff absence. This particularly related to the two members of its health staff on long-term sickness absence, but also to the vacant assistant team manager casework post that had temporary cover for only two days per week. Whilst additional cover was being provided by support from the deputy and assistant team managers and a staff member of the Chief Executive's department, this was in addition to their normal duties.

### ***Outcomes of work with children and young people in the community***

- ◆ Initial intervention plans had improved in terms of timeliness, quality and review of progress.
- ◆ The YOS had actively engaged with the local children and young people's services, and the child or young person's social care status was clearly recorded in a higher proportion of cases than previously.
- ◆ Areas of concern had been identified by the YOS in its evidence in advance and had been confirmed during the inspection. The overall quality of the work to reduce the Risk of Serious Harm and help

children and young people 'stay safe' was inconsistent. The YOS Management Board and staff were fully aware of these shortcomings and were determined to improve the quality of their work. We felt that the YOS had the capacity to achieve this when fully staffed.

### ***Victims and restorative justice***

- ◆ A part-time victim coordinator had been appointed in June 2008. Unfortunately, this was too late to have a significant impact on victim and reparation work inspected in the case sample specification that covered various periods between 1 May 2008 and 31 July 2008.
- ◆ We found that the members of staff involved in this area of work were highly motivated and committed. Victims' issues had been communicated clearly to all YOS staff and the basic building blocks were being established to deliver the service improvements necessary.
- ◆ Training for both YOS staff and volunteers had been completed and, during the inspection week, eight new volunteers had been trained and were ready to engage in the work of the youth offender panel.

### ***Management and leadership***

- ◆ We found a reconstituted Management Board that had responded positively to the recommendations of the previous inspection report. New terms of reference had been agreed with partner agencies, and appropriate representation and attendance across a range of interests had been achieved. Members were beginning to have a better understanding of their roles and responsibilities.
- ◆ There was evidence to show that the YOS, through the Chief Executive, was becoming more closely linked with the authority and better placed with both the Young People's Partnership and the Community Safety Partnership. It had also fully engaged in producing the Children and Young People's Plan 2008-2011.
- ◆ Protocols and contracts had been reviewed and signed or were in the process of being finalised. Key staff appointments had been made to strengthen the YOS management and its operational capacity.
- ◆ We found that significant improvements had been achieved, but further work was required with regard to strengthening the capacity of the YOS to effectively supervise the case management function of the service and, in particular, in protecting the public and vulnerable children and young people.

## RECOMMENDATIONS - Action by:

### 1. The Chief Executive

#### Recommendation 1

**The Chief Executive should ensure that** the Management Board is properly constituted; works to its terms of reference; is supported effectively by partner agencies, who are held to account; and new members are properly inducted and prepared for their role.

- 1.1 The Chief Executive had taken on the responsibility for chairing the Management Board, and a timely action plan had been agreed and forwarded to the lead inspector as required following the first inspection.
- 1.2 The inspectors noted that new terms of reference had been agreed and approved by the Management Board. There had been a review of membership that ensured an appropriate representation across a range of interests, and an improvement in attendance, commitment and ability to take effective action.
- 1.3 Members of the Management Board had received induction training and an induction pack for new members had been prepared and issued. Board members had been able to access a relevant Open University course and had received advice from the YJB regarding future training opportunities.
- 1.4 Since the original inspection a 'joint day event' involving staff and Board members had been held to inform the action plan. Members of the YOS staff had been invited to attend Management Board meetings to discuss their work.
- 1.5 The Management Board was, therefore, properly constituted, and members were beginning to have a better understanding of their roles and responsibilities.
- 1.6 A report on the development of the YOS had been made to the Vale of Glamorgan County Council Scrutiny Committee.

#### Outstanding issue

- 1.7 The new governance arrangements had been overseen by the YJB and looked promising. Arrangements were still relatively new and had not had time to be fully embedded at either strategic or operational levels. Members of the Management Board interviewed recognised this and were determined to build on the foundations now in place.

## Recommendation 2

**The Chief Executive should ensure that** the YOS has a clear strategic role within the Community Safety and Young People's Partnerships and is able to increase its capacity with their support.

- 2.1 Both the Safer Vale Partnership and Children and Young People's Partnership were represented at a senior level on the Management Board.
- 2.2 Significant progress had been made with regard to the YOS participation in the Safer Vale and Young People's Partnerships and the preparation of the Children and Young People's Plan. Joint work had been undertaken to identify need and to develop a three-year service plan. As a consequence, the Safer Vale Partnership had agreed three-year funding to the YOS to provide a more comprehensive prevention service. The YOS was also represented on seven core aims working groups contributing to the authority's Children and Young People's Plan 2008–2011.
- 2.3 There were clear and well considered plans in the authority for addressing social inclusion and meeting the needs of the more vulnerable children and young people, including those in contact with the YOS.
- 2.4 We found that the YOS had developed its involvement in these strategic plans on several levels and was fully aware of the funding streams available through community safety and Cymorth grants. Some success had been achieved by the time of this inspection and other service developments were being planned with possible funding from these sources.

## Outstanding issue

- 2.5 The YOS Management Board had identified the need to further develop its contribution to joint working on strategic partnership plans in order to achieve positive outcomes for service users. Whilst the YOS was now actively engaged, this was at an early stage of development.

## Recommendation 3

**The Chief Executive should ensure that** the YOS is supported to make the best use of individual training and development and team building opportunities.

- 3.1 Following the reconstitution of the YOS Management Board, the Chief Executive had ensured that training, development and team building were made available. A YOS staff and Management Board consultation workshop had taken place to develop mutual understanding and promote team building. This informed the action

plan presented to and approved by HMI Probation in June 2008. A further joint workshop had been planned for March 2009.

- 3.2 The Chief Executive had personally attended YOS staff team meetings to assist the team building process.
- 3.3 Individual members of staff had been invited to make presentations to the Management Board meetings on their areas of particular responsibility.
- 3.4 We found evidence that staff had received some core training and other training was being planned through National Association for the Care and Resettlement of Offenders covering Asset and Onset assessments, identification of RoH to the public and safeguarding children and young people.
- 3.5 The YJB workforce development adviser for Wales had been invited to make a presentation to the Management Board in November 2008 on the various training options available and the subsequent resource implications. At the same meeting, a Workforce Development Strategy had been discussed and contained a comprehensive training plan for YOS staff and Board members.

### Outstanding issue

- 3.6 Training needs had been identified and a training plan developed, but further work was required in this area to deliver the training programme and promote service and staff development.

## 2. The Management Board

### Recommendation 4

**The Management Board should ensure that** the service is fully staffed to the levels already agreed by partner agencies to meet the needs of the service.

- 4.1 The review of the YOS structure and staffing establishment had been a major task for the Management Board since being made aware of the findings of the original inspection report in November 2007. The Management Board, with advice from the YJB, had approved a new management structure and senior management appointments to the YOS had been made. Partner agencies had agreed funding, vacant posts had been filled and staffing numbers increased to the agreed levels.
- 4.2 By the time of the reinspection, the revised staffing structure was in place and the majority of the postholders had taken up their appointments. Staff morale had improved considerably.

- 4.3 With staff in place, the YOS had started to develop its statutory work and had the beginnings of a prevention service in place. Significant improvements had been achieved with regard to work with children's services, education, health, and drug and alcohol services. Protocols and contracts had been reviewed, evaluated, updated and agreed in these key areas.

### **Outstanding issues**

- 4.5 The YOS had identified some areas requiring further improvement with regard to case management and this was confirmed by the inspection. Staff had experienced increasing work pressures from courts, which had had a detrimental effect on the quality of their assessment and intervention work. YOS staff had been travelling to the Cardiff courts for several months pending the completion of the refurbishment of the Barry courts, but this work had been completed by the time of the inspection and pressures had reduced considerably.
- 4.6 More recently, the impact of more serious cases involving RoSH and the protection of vulnerable children and young people had added to the workload. These pressures had been reported to the Management Board and were being addressed. Some improvements had been achieved by the recruitment of temporary case managers but further, more permanent appointments were still to be achieved.
- 4.7 The casework team had two members of staff on long-term sickness absences. An experienced assistant team manager had opted to take up a YOS case manager's post in the weeks leading up to the fieldwork. It had not been possible to plan over a longer period of time for this change. Short-term arrangements had been made to provide extra staff and supervisory support, but this had not had time to make a significant impact by the time of the inspection and had left staff feeling vulnerable.
- 4.8 The existing staffing structure did not have sufficient senior management capacity or expertise for the professional supervision and support required by case managers. Temporary arrangements had been made, and informal arrangements were in place with children's services, but the inspectors felt that this required further consideration by the Management Board as a matter of some priority.
- 4.9 Some of the posts were subject to short-term funding and, as a result, undermined staff morale, but this was being addressed by the Management Board.
- 4.10 It had not been possible to arrange temporary cover for the absent YOS nursing staff; this had left a major gap in the service available.

## Recommendation 5

**The Management Board should ensure that** the Management Board develops its performance management framework to monitor and review the implementation of the Youth Justice Plan and inform the strategic direction of the YOS.

- 5.1 The YOS had formally adopted the Vale of Glamorgan Performance Management Framework published in December 2007 as the basis for monitoring and developing performance.
- 5.2 The Youth Justice Plan for 2008/2009 had been completed and submitted on time to the YJB by the Management Board. The plan had been approved by the YJB, who had used it as a pilot for the validation process of plans in Wales.
- 5.3 Since the original inspection, there had been six Management Board meetings and performance management/monitoring had been on the agenda for each meeting.
- 5.4 The Management Board had developed the inspection action plan and, at each of its subsequent meetings, had focused on updating the progress made on each specific action point.
- 5.5 Performance reports had been received by the Board following the publication of the YJB quarterly returns and these were being scrutinised from one quarter's report to the next to monitor trends and promote service development. The Board had noted an encouraging and positive trend in performance.
- 5.6 A report on NEET children and young people had been presented to the Lifelong Learning Scrutiny Committee and included a full report from the YOS covering the concerns raised in the HMI Probation inspection report. The scrutiny was aimed at achieving more effective arrangements for identifying and providing services for children and young people at risk of becoming NEET.
- 5.7 YOS Managers had introduced a monthly case file and Asset audit system that provided the basis of work undertaken in individual supervision with staff and informed the YOS training programme.
- 5.8 YOS Managers had introduced a quality checklist for all court reports.

### Outstanding issue

- 5.9 The focus was beginning to move from quantity to quality and a consultant had been engaged for two days per week to assist the YOS team with the task of considering a range of effective performance practice indicators. This had been instigated by the Management Board in November 2008 for consideration at a future meeting.

### 3. The Chair of the Management Board

#### Recommendation 6

**The Chair of the Management Board should ensure that** the YOS Manager receives formal and planned supervision.

- 6.1 The YOS Manager reported a very positive and constructive relationship with her line manager, the Chief Executive, who provided formal supervision [performance development and review] on, at least, a monthly basis and informal supervision, as required.
- 6.2 The close working relationship between the YOS Manager and the Chief Executive had enabled progress to be achieved quickly with regard to the functioning of the Management Board, resolving staffing issues and performance managing the standard of work being achieved by the YOS.

### 4. The YOS Manager

#### Recommendation 7

**The YOS Manager should ensure that** all staff, including administrative staff, are regularly supervised and appraised within a performance management framework.

- 7.1 YOS Managers showed a commitment to formal and informal supervision of staff. We were pleased to see evidence that monthly supervision for all staff had been introduced and was planned in advance.
- 7.2 The YOS used a standardised Directorate of Social Services Departmental Staff Supervision and Development Policy revised and introduced from September 2008. The policy contained a basic format that could be adapted for a particular role. Staff were able to contribute to the agenda and provide their own observations.
- 7.3 A sample of the supervision records inspected were signed and dated by the supervisor and supervisee. Most of the staff interviewed reported satisfaction with the frequency and quality of supervision in the quarter leading up to the inspection.
- 7.4 Staff annual appraisals had been introduced and were being implemented for all staff using the corporate personal development and review process. Partner agency staff were appraised in accordance with their individual agency's policy.

## Outstanding issues

- 7.5 There were examples of two different procedures being used. One was based on the corporate personal and development review process (appraisal) and the directorate of social services policy (supervision) adopted as the standard supervision procedure from September 2008. Both were required and had started to be implemented, but we found that further development was necessary to ensure their full and consistent application for all staff.
- 7.6 Regular and planned supervision had been slow to be developed due to the lack of management capacity available and the absence of an agreed supervision policy. This had improved over more recent months. Staff indicated that supervision was improving but needed to become embedded as part of the YOS management culture. We concur with this view.

### Recommendation 8

**The YOS Manager should ensure that** all aspects of national standards relating to practice and operational management are achieved, with a particular focus on:

the development of a prevention service to meet the needs of individual children and young people.

- 8.1 The YOS Management Board had made a successful application to the Safer Vale Partnership for three-year funding for the development of youth crime prevention strategy and service.
- 8.2 An experienced assistant team manager of prevention had taken up her new post in August 2008. In addition, a prevention coordinator had also been appointed and had taken up his position in November 2008.
- 8.3 The Management Board, in conjunction with the Safer Vale Partnership, had agreed the following outcomes for the first year:
- outcome one – benchmark level of need and service. To be achieved by identifying, monitoring and mapping current service needs of all first-time entrants into the YOS, and assessing the level and quality of services and reporting mechanisms
  - outcome two – establishment of effective referral and report channels by developing new processes and protocols for the service
  - outcome three – inclusivity of service providers. By adopting a partnership approach of agencies and service providers engaged in benchmarking need and services, and through the provision of multi-disciplinary training and staff development, promote understanding and confidence in the services and processes being used

- outcome four – sustainability for the future. Develop a prevention service for the YOS, establish an action plan for its delivery and develop a range of programmes that prevents offending and reoffending.
- 8.4 The YOS had recently started a pilot for a small group of five children and young people aged between nine and 12 years. Referrals had been received initially from within the YOS, and young people were being provided with an individual support plan that involved individual and group work.

### Outstanding issues

- 8.5 Whilst having a clear vision for the service, progress to date had been slow. Due to operational pressures, both the assistant team manager of prevention, and the prevention coordinator had not been able to focus their attention on the development of the service and instigate the changes necessary.
- 8.6 The YOS was aiming to work with up to thirty children and young people per year and intended to establish a multi-agency panel to manage the process from initial referral to individual support plans but, to date, this had not been achieved.
- 8.7 It was the YOS's intention to develop a framework of policy, procedures and practice in the New Year following this inspection. We felt confident that, if freed from other operational and management responsibilities, the YOS had the potential management and operational capacity and the expertise to develop the prevention service.

### Recommendation 9

**The YOS Manager should ensure that** all aspects of national standards relating to practice and operational management are achieved, with a particular focus on:

improving the quality of multi-agency assessment and contributions to intervention plans by the YOS case managers and specialist staff, children and families services, education and health colleagues.

- 9.1 There had been considerable advances in this area as a result of vacant posts being filled, staff roles clarified and policies, procedures and protocols revised and agreed. In addition, there had been an ongoing programme of staff development with a particular focus on multi-agency assessment and contributions to intervention plans from children's services, and education and health colleagues.

- 9.2 Initial Asset assessments had been completed within the national standard requirements for timeliness in all of the case sample examined, and for quality in 66% of the case sample examined. This compared with 71% and 54% at the time of the original inspection.
- 9.3 The case sample analysis indicated that children and young people and their parents had been involved with the Asset assessments in over 93% of the case sample compared with 71% previously.
- 9.4 Initial assessments of children and young people had been informed by children's services in 67% of the case sample and contact with the education/training provider, or any other relevant assessments, including health, in 66% of the case sample. This compared with 25% in the original inspection.
- 9.5 Initial Assets were considered to be of a 'sufficient standard' by the inspection team in 67% of cases, compared with 46% when previously inspected.
- 9.6 Attention had been paid to the methods likely to be most effective with the child or young person in 80% of the case sample compared with 54% in the original inspection. Positive factors, such as supportive and pro-social factors were identified in 93% of cases.
- 9.7 The child or young person had been invited to complete a *What do you think?* form in 67% of the case sample compared with 29% previously.
- 9.8 Race and ethnicity had been accurately recorded in all cases examined and diversity issues in 87% of the case sample.
- 9.9 The first appointment with the child or young person following a community order had taken place within 24 hours in accordance with national standard timescales in 82% of the cases examined compared with 40% in the original inspection.
- 9.10 The frequency of appointments conformed to national standards in 82% of the cases compared with less than 50% previously.
- 9.11 Judgements about acceptability/unacceptability were deemed to be consistent and appropriate in all of the relevant cases, and effective action had been taken to promote compliance in 60% of the case sample compared with 44% previously.

## Health

- 9.12 Since the first inspection, the YOS had agreed a working practice protocol for the specialist nurse post with the Child Health Directorate Cardiff and the Vale NHS Trust. This covered health surveillance, advice, support and health promotion, as well as a referral route to CAMHS where a child or young person had acute mental health difficulties. It also formalised existing protocols to facilitate the appropriate sharing of information between health and other services.

- 9.13 The CAMHS substance misuse nurse was employed by Cwm Taf Trust and a working practice protocol covered this post. A protocol/working agreement had been agreed with Inroads (Cardiff and Vale Street Drugs Project).
- 9.14 The YOS had an established health team of a clinical nurse specialist, a CAMHS Tier 3 worker and a substance misuse Tier 2 worker. The team was able to access general medical services, CAMHS services, including a consultant psychiatrist and paediatric support and plans were in place to access electronic community health records from the YOS office.
- 9.15 The identification of health needs on Asset had improved for physical health, emotional and mental health and substance misuse. These needs had been accurately identified in all relevant cases compared with 50% in the first inspection.
- 9.16 Where physical health, emotional and mental health and substance misuse needs had been identified, an intervention had been delivered to the child or young person on average in over 78% of the case sample compared with 50% in the last inspection.
- 9.17 There was evidence that the YOS had supported the child or young person in accessing local services in 83% of the cases inspected compared with 58% in the original inspection.

### **Children and Young People's Services**

- 9.18 The YOS had agreed and implemented a protocol with the children and young people's services. The protocol covered case management, bail and remand placements, management of referrals to the Taith Project [a service for children and young people with particular sexual health needs] and arrangements for communication and the resolution of disputes.

### **Education Training and Employment**

- 9.19 The Management Board had been monitoring and scrutinising the YOS performance and, in this context, NEET children and young people had been subject to a clearer focus and, consequently, a higher profile. Needs had been identified and new approaches to resolving issues shared and applied in practice supported by the Board.
- 9.20 There had been significant changes in this particular area that had been proactively led by the director of learning and development. A passport to learning project for young people aged 14-19 and at risk of becoming NEET had been agreed and implemented, and included arrangements for children and young people referred by the YOS. A direct link had been established between the director and the YOS education officer to facilitate service improvements. Head teachers of

secondary schools had been made fully aware of their responsibilities with regard to NEET children and young people.

- 9.21 Where employment, training and education needs had been identified for children and young people of statutory school age, an appropriate referral for assessment followed by an intervention had been made in all of the relevant cases compared with 75% previously. For post-16 education and training, appropriate referrals for specialist assessment had been made in 75% of cases. The content of the intervention had promoted learning opportunities and attainment in 94% of the relevant cases compared with 80% in the first inspection.
- 9.22 Children and young people under 16 years were now being provided with educational provision where previously they had frequently been left without it for weeks at a time. Formal processes were in place involving the YOS and the local education authority to identify, discuss and resolve the educational placements of children and young people causing 'exceptional concern' and, therefore, difficult to place.

### Outstanding issue

- 9.23 The main outstanding issue related to the inability of the YOS to obtain cover for the two members of its health staff on long-term sickness absence, and the vacant assistant team manager casework post that had temporary cover for only two days per week.

#### Recommendation 10

**The YOS Manager should ensure that** all aspects of national standards relating to practice and operational management are achieved, with a particular focus on:

improving the quality of initial intervention plans and, in particular, the management of Risk of Harm and helping children and young people 'stay safe'.

- 10.1 Initial intervention plans had met the required standard for timeliness and outlined clearly who would deliver the intervention in 83% of cases examined. They had also addressed the likelihood of reoffending behaviour in 83%, and diversity in 80% of cases compared with less than 50% previously.
- 10.2 Progress against the objectives of the intervention plan had been reviewed in 86% of the cases examined compared with 36% in the original inspection.
- 10.3 Steps had been taken to ensure that the child or young person fully understood the requirement of the order in 82% of the cases examined, or the penalties involved if breached in 64% of the cases, compared with 60% for both previously.
- 10.4 The first appointment with the child or young person following sentence had taken place in accordance with national standard

timescales in 82% of cases compared with 40% in the first inspection. The outstanding appointments had taken place within a day or within two to five days.

- 10.5 The youth offender panel had met within 20 days in all cases examined and the referral order contract had started within five days in 67% of relevant cases compared with 43% previously.
- 10.6 Action had been taken to address accommodation needs in all relevant cases compared with 56% of cases previously inspected.
- 10.7 The YOS had actively engaged with the local children and young people's services at the assessment stage in 67% of the case sample compared with 24% previously. The child or young person's social care status had been clearly recorded in 93% of the cases, compared with 47% in the original inspection, and there had been liaison between the YOS worker and children's services in 71% of cases, compared with 20% in the original inspection.
- 10.8 The RoH to others had been reviewed following a significant incident in the two relevant cases inspected.

### **Outstanding issues**

- 10.9 The Vale YOS, following a potentially serious incident and weekly internal case file audits undertaken since September 2008, had identified RoH and safeguarding as areas requiring further staff development and training. An interim serious case review report written by the YOS management team identified the following issues:
  - *"insufficient support for case manager; ideally sex offenders should be joint worked*
  - *lack of supervision by a line manager*
  - *demands of a high risk caseload*
  - *poor quality assurance systems within the YOS".*
- 10.10 These issues were being addressed by the YOS, but had not been fully resolved due to a lack of management capacity in this highly important area of work. Regular staff supervision and case audits had been introduced, but due to a combination of long-term sickness and a line manager vacancy we found that the service was vulnerable in these areas.
- 10.11 An Asset RoSH to others form had been completed in two out of six relevant cases. An acceptable explanation for this was only provided and recorded on Asset in one case. Out of the two cases, we thought that the risk classification of one should have been changed from medium to high.
- 10.12 Evidence in advance from the YOS, confirmed by interviews with staff, identified that the MAPPA had not been as effective as they

should have been. This was being addressed through MAPPA and meetings had been scheduled for this purpose.

- 10.13 Out of the three relevant custodial sentences, an Asset risk management plan had not been completed in two cases and the need for planning had not been recognised in any of the cases. In addition, we found no evidence of middle and/or higher management involvement.
- 10.14 We found that the RoSH to others had not been reviewed within three months of the previous Asset and every three months thereafter in the majority of community and custodial sentences.
- 10.15 Where considered necessary, due to vulnerability, the worker had made a referral to children's services in only one out of four relevant cases.
- 10.16 We found evidence to suggest that the child or young person had been a risk to themselves in six cases and at risk from others in five cases. However, a vulnerability action plan had only been produced to reduce the identified needs in two cases, which was only a marginal improvement from the previous inspection.
- 10.17 Action was not considered appropriate to meet the safeguarding needs of the case in four out of six cases.
- 10.18 The frequency of appointments met any RoH considerations in 55% of the case sample, and safeguarding considerations in 36% of the cases inspected, compared with 50% and 54% in the original inspection.
- 10.19 The overall quality of the work to reduce the RoSH and help children and young people who had offended to 'stay safe' was inconsistent. Managers and staff were fully aware of these weaknesses and were determined to improve the quality of their work in these areas.

### Recommendation 11

**The YOS Manager should ensure that** all aspects of national standards relating to practice and operational management are achieved, with a particular focus on:  
the development of victim and restorative justice work.

- 11.1 Work with victims and restorative justice had been judged as adequate in the original inspection, but our concerns in the report reflected the fact that the part-time victim coordinator post had been vacant and there were no signs of an appointment being made to fill the vacancy. As a result, there were clear dangers of the service failing to build on the strong foundations established by the previous postholder.

- 11.2 We were pleased to find that this had been addressed. A new part-time victim coordinator had been appointed by the YOS and had been in post for approximately six months, having taken up the appointment in June 2008. Unfortunately, this was too late to have a significant impact on the victim and reparation work inspected, as the case sample covered the period from 1 May 2008 to 31 July 2008.
- 11.3 As identified in the original inspection, procedures were in place that encouraged victims to participate in the restorative justice process, and close links had been established between the victim coordinator, YOS police officer and reparation officer to this end. Where the victim had requested direct reparation, a joint home visit had been undertaken to carry out a risk assessment. This had been allowed to drift but had been restored by the time of this inspection.
- 11.4 The coordinator participated in case planning forums held for children and young people deemed to present the highest RoH to the public in order to raise awareness of victim issues. Basic training for case managers had taken place, and this was supported by face-to-face discussions around their respective roles with regard to supervision of intervention plans and reparation.
- 11.5 The strong relationship with the local authority's visible services department continued to provide a range of services for reparation. These included beach cleaning, graffiti removal and gardening and litter collection in community areas. Links had also continued with the St John Ambulance Service and the Royal National Institute of Blind People, and children and young people had been engaged in various reparation activities through these organisations.
- 11.6 Good working relationships were in place with the South Wales Fire, Police and Ambulance Services, as well as Victim Support, the general practitioner liaison service (provided by the Vale community health team and offering counselling for people suffering distress who did not require access to long-term mental health service) and the probation service. Arrangements were in place for a victim to be referred to the Criminal Injuries Compensation Board in appropriate cases and also for transfer from the YOS to probation victim services once the child or young person who had offended had reached 18 years of age.
- 11.7 The police notified the YOS of victims' details in accordance with national standards in 80% of the case sample (similar to 77% in the first inspection). The YOS had a police IT terminal that facilitated access to victim information by the YOS police officer and other nominated and trained staff.
- 11.8 The child or young person had been involved in community reparation in the 12 relevant cases, and work had commenced within three months of the order in 11 of these cases.
- 11.9 Training for volunteers had been successfully completed and, during the week of the inspection, eight new volunteers had been trained

and were ready to engage in the work of the youth offender panel. A victim had recently attended a panel and another nine victims had been engaged and supported appropriately.

11.10 We found that the members of staff involved in this area of work were highly motivated and committed. Victims' issues had been communicated clearly to all YOS staff and we felt confident that the basic building blocks were being established to deliver the service improvements necessary.

### **Outstanding issues**

11.11 The case file analysis reflected the absence of an effective victim and restorative justice service prior to the appointment of the victim coordinator. Victims had only been invited to participate in a restorative justice process related to the offence in 10% of the case sample, and the decision for not inviting the victim had not been recorded in any of the cases. Only one victim had been involved in a restorative justice process and victims rarely attended the youth offender panel.

11.12 Whilst relationships were being established within and outside of the YOS, we found that this was at an early stage of development and required greater management priority to achieve significant results quickly.

## **Appendix 1 Contextual information**

### **Area**

The Vale of Glamorgan YOS was located in the County Borough Council in Wales and, as a single YOS, covered the Vale of Glamorgan local authority.

The area had a population of 119,292 as measured in the Census 2001, 11.3% of which were aged 10-17 years old. This was slightly higher than the average for England & Wales, which was 10.4%.

The population of the Vale of Glamorgan was predominantly white British, 97.8%. The population with a black and minority ethnic heritage was 2.2%, significantly below the average for England/Wales of 8.7%.

Reported crime levels for children and young people aged 10-17 years of age in the Vale of Glamorgan were 49.2 per 1,000 against an England and Wales average of 53.

## **YOS**

The Vale of Glamorgan YOS was one of seven YOTs/YOSs covering the South Wales Probation and the South Wales Police areas. Community health services were provided by the Cardiff and the Vale of Glamorgan NHS Trust.

The Youth Justice Plan 2007/2008 showed that the YOS had 32 staff and 31 volunteers. Sixty three per cent of staff were female and 0.03% had a black or minority ethnic heritage. However, at the time of the inspection the YOS had 24 members of staff, of whom six were part-time, providing in total 18 full-time equivalent members of staff. During this period the YOS had been operating with up to eight vacancies. The Youth Justice Plan Cymru 2008/2009 showed an increase to 27 members of staff, of whom six were part-time, and 31 volunteers, with most of the vacancies being filled.

The work of the YOS, including the Intensive Supervision and Surveillance Programme, was based in one main office located in the largest town of Barry, with easy access to the Vale of Glamorgan Youth Court, which covered the area.

## **YJB Performance data**

The YJB summary of overall YOS performance available at the time of the inspection for the period to March 2008, gave the Vale of Glamorgan YOS a score of 3 on a scale where 5 is the maximum. This was on a par with the national and marginally below the regional performance for Wales as well as the performance of comparable YOTs/YOSs (also level 3).

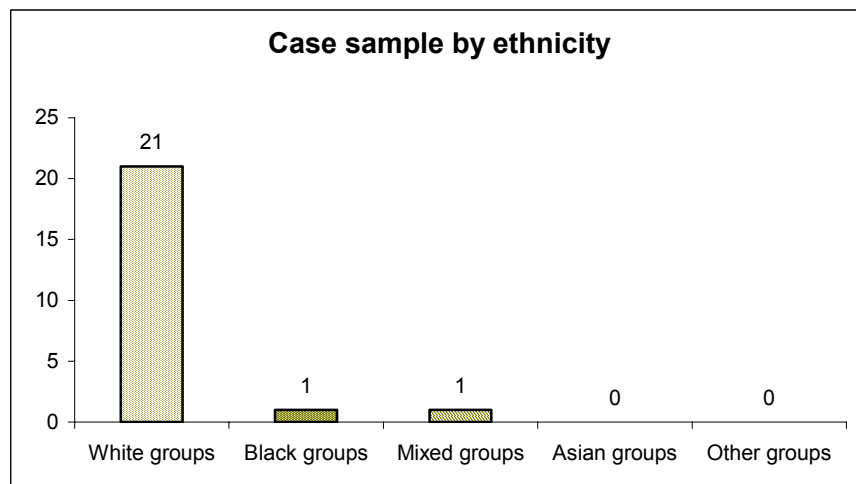
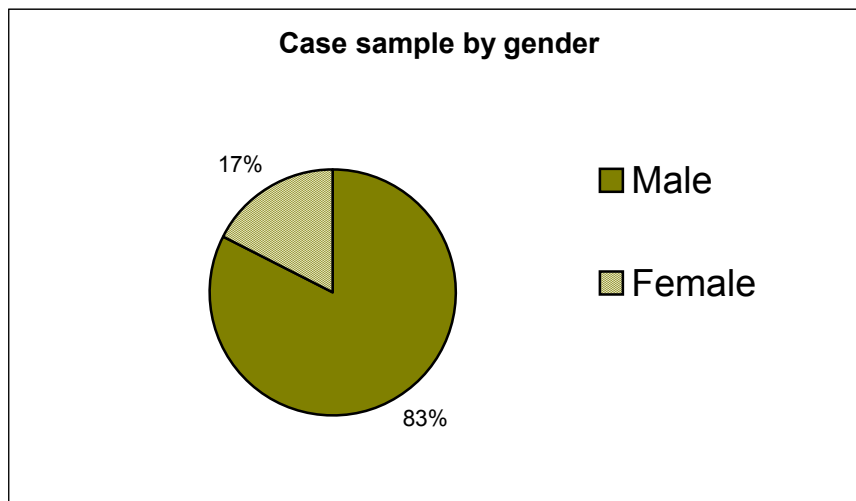
Performance on reducing reoffending received a score of 5, which was significantly above that of all comparators.

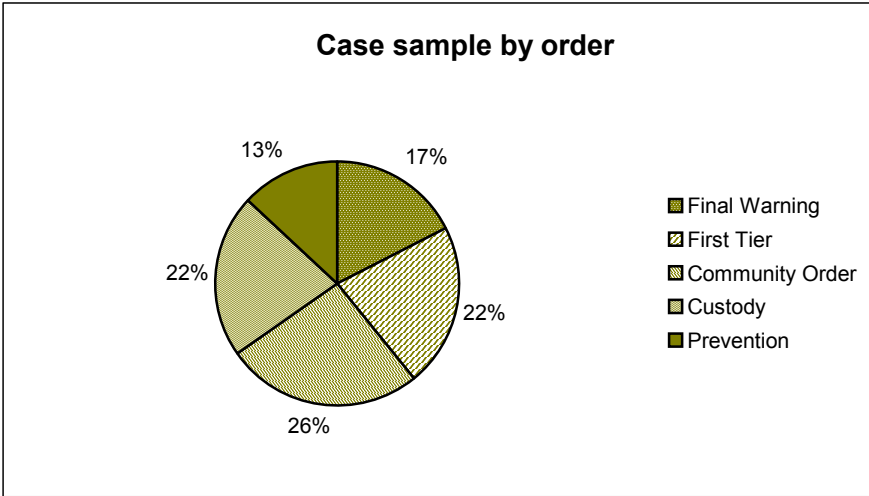
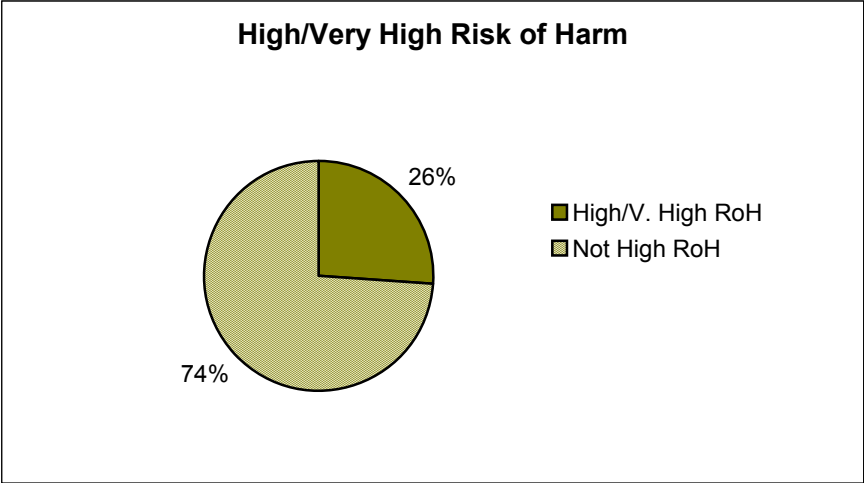
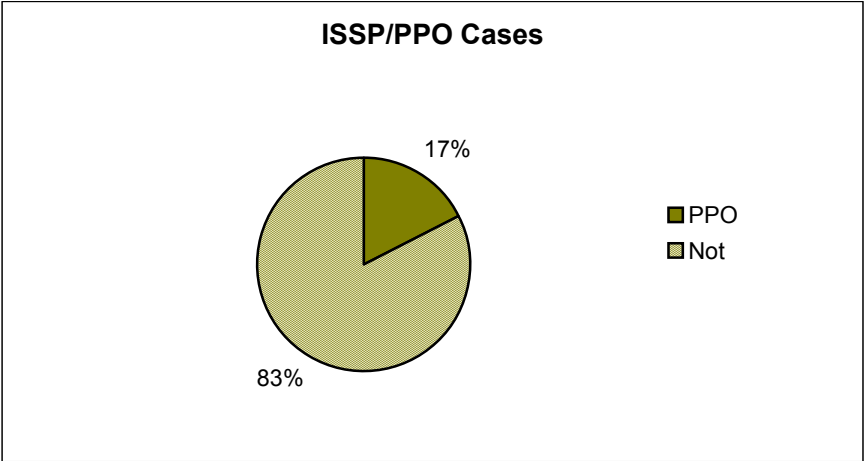
## Appendix 2 Inspection data

Fieldwork for this inspection was undertaken in December 2008.

The inspection consisted of:

- ◇ evidence in advance
- ◇ examination of YJB performance data and assessments
- ◇ examination of practice in a sample of cases, normally in conjunction with the case manager or other representative, as follows:
  - 3 prevention files
  - 4 final warnings
  - 5 first tier penalties (referral orders, reparation orders)
  - 6 community sentences
  - 5 custodial cases.
- ◇ meetings with staff, managers and partners.





### **Appendix 3: Joint inspection arrangements**

The joint YOT/YOS inspection programme began in September 2003 and was the first full inspection programme to examine the work of the YOTs/YOSs. It has been implemented over four phases, covering all 157 YOTs/YOSs in England and Wales over a five-year period.

### **Appendix 4: Role of HMI Probation and code of practice**

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

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

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

- working in an honest, professional, fair and polite way
- reporting and publishing inspection findings and recommendations for improvement in good time and to a good standard
- promoting race equality and wider attention to diversity in all aspects of our work, including within our own employment practices and organisational processes
- for the organisations whose work we are inspecting, keeping to a minimum the amount of extra work arising as a result of the inspection process.

The Inspectorate is a public body. Anyone wishing 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  
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London, SW1P 2BQ*

**<http://www.inspectorates.justice.gov.uk/hmiprobation>**