



*Report of a
Follow-up
Inspection of the
Isle of Man
Probation Service*

2006

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Home Office

FOREWORD

Our original inspection of the Isle of Man Probation Service in May 2004 discovered considerable weaknesses in the management of the service and in the quality of some of the practice seen. We were pleased that these findings were readily accepted by the Department of Home Affairs and Chief Probation Officer who agreed that there was considerable scope for improvement. Action was quickly taken to address the issues of concern and we agreed to undertake a follow-up inspection in due course to assess what changes had taken place.

Two years on from our previous visit we have found that there has certainly been progress, most particularly in relation to the arrangements for staff supervision and appraisal, the introduction of offending behaviour programmes and the regaining of sentencers' confidence. Against this though there has been only limited improvement against many of the issues of good practice that were of earlier concern. We accept that staffing difficulties have created certain obstacles to progress, but the service still needs to do further work in achieving more satisfactory results across a number of aspects of its work. We believe that this follow-up report can now act as a template for addressing the areas most in need of improvement. We welcome the positive manner in which both the Department and the Chief Probation Officer have again accepted the findings.

Andrew Bridges
HM Chief Inspector of Probation

May 2006

ACKNOWLEDGEMENTS

We would like to express our thanks to the managers and staff of the Isle of Man Probation Service for the considerable assistance received in enabling the inspection to proceed smoothly. Without their help the work could not have been completed successfully.

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GLOSSARY

ACE	Assessment, Case Recording and Evaluation System
CPO	Chief probation officer
CS	Community service
DAT	Drug Action Team
DHA	Department of Home Affairs
ESI	Effective Supervision Inspection
HMI Probation	HM Inspectorate of Probation
LSI-R	Level of Service Inventory-Revised
MAPPA	Multi-Agency Public Protection Arrangements
OASys	Offender Assessment System
OGRS2	Offender Group Reconviction Score
PLC	Probation Liaison Committee
PO	Probation officer
PSO	Probation service officer
SER	Social enquiry report
SLA	Service Level Agreement
SMT	Senior management team

REASONS FOR UNDERTAKING THE FOLLOW-UP

- HMI Probation last inspected the Isle of Man Probation Service in May 2004, the report being published early in 2005. This concluded that the service demonstrated many strengths, including good performance against Manx standards and strong links with courts and partnership organisations. However, considerable weakness was found in the quality of some of the practice seen and there was particular concern about the absence of sound structures for staff supervision and appraisal.
- These concerns were addressed in nine recommendations in the inspection report:

The CPO should ensure that:

1. *there is further consideration of making offending behaviour programmes available in the Isle of Man*
2. *all staff receive regular formal supervision sessions as required by service policy and are subject to an annual appraisal*
3. *systems for the allocation of work to staff are reviewed, including those related to assessing the suitability of offenders to attend the report centre*
4. *expenditure on partnership organisations is regularly reviewed to confirm that they provide value for money and meet the needs of offenders currently under supervision*
5. *all cases have their risk of harm assessed and regularly reviewed as required by Manx standards, with appropriate oversight by managers of the supervision of high risk of harm cases*
6. *there are improvements in the quality of supervision planning and supervision plan reviews*
7. *victim issues are sufficiently addressed in the supervision of all offenders*
8. *there is improvement in the quality and degree of pre-release work in prison licence cases*
9. *better use is made of outcome data at all levels in the organisation.*

SUMMARY OF THE FINDINGS OF THE FOLLOW-UP

Key findings

- ▣ **Quality of Management:** There had been considerable activity focused on tackling the recommendations in the original report and there was at least some progress demonstrated against all of them. There were also improvements in the general scores relating to the practice sections of the inspection. However, it was recognised by the probation service that overall progress had been slower than might have been expected. Staffing difficulties had been a major obstacle to swift improvement and tensions within the SMT remained an issue. Progress had continued in the development of offending behaviour programmes with the introduction of the domestic abuse programme and a short alcohol education programme for disqualified drivers. Weaknesses remained in the operation of the CS programme. These were being addressed through the implementation of internal financial audit report recommendations and in the DHA business plan. Workload allocation was now operating more effectively and staff supervision and appraisal were taking place. SLAs were being introduced for the DHA funded partnership agencies to ensure a greater focus on value for money, and offender literacy and basic skills needs were now addressed through an informal partnership with the local Further Education College. There was continuing effective communication with sentencers, though information on the quality and effectiveness of offender supervision could be improved.
- ▣ **Quality of Assessment:** The majority of cases now contained a risk of harm assessment though improvements were still needed in the quality and consistency of those assessments. Increased focus on the timeliness and quality of risk of harm reviews was also required. Progress on improving the quality of supervision planning and reviews had been slower than anticipated and further work was needed so that supervision plans reflected the assessment of risk of harm and likelihood of reoffending. There had been improvements in ensuring that offenders understood the requirements of their order or licence. Despite an impressive electronic case record system, the quality and sufficiency of case recording had not increased and more attention needed to be given to this.
- ▣ **Quality of Interventions:** Levels of contact with offenders had not improved and enforcement practice required considerably more attention. Appropriate interventions reflecting the risk of harm and likelihood of reoffending were being carried out in the majority of cases, and this was happening particularly well in the high risk of harm cases. There was also an increased focus on work directed at community reintegration of the offender and we saw some examples of good practice with individual offenders, undertaken in partnership with other agencies. However, apart from in the high risk of harm cases, there had been no improvement in challenging offenders to accept responsibility for their offending and progress had been limited in ensuring victim awareness was addressed as a routine part of supervision. Good attention was now being paid to offender literacy and basic skills needs and there was increased evidence of offenders' diverse needs being taken into account in their supervision. Considerable improvement was shown in the quality and degree of pre-release work in prison licence cases by the case manager. Risk of harm work on the whole was not being managed well. Further attention needed to be paid to this to ensure that all staff understood what was required of them to enable risk of harm to the community to be kept to a minimum.

- ▣ **Quality of Initial Outcomes:** Most offenders were complying with the requirements of their order or licence, particularly those posing a higher risk of harm. These offenders also showed more evidence of positive change in their attitudes to offending. More attention was now being paid to the longer term community reintegration of offenders and there was improvement in their community ties and social circumstances in half the cases inspected. In most instances, resources allocated to cases were consistent with the risk of harm and likelihood of reoffending. There had been increased attention to the collection of outcome data and further developments were underway. However, better use could be made of existing management information in order to increase effectiveness.

Next steps

- ▣ This report has been submitted to the Isle of Man Government and the CPO of the Isle of Man Probation Service. Copies have also been made available to the press and are on the website of HMI Probation at:

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

SCORING SUMMARY SHEET

Section A: Quality of management	Original Inspection	Follow-up Inspection	England and Wales average
A1: Leadership and planning	Not met	Not re-scored	–
A2: Resource allocation	Partly met	Not re-scored	–
A3: Management and supervision of staff	Not met	Not re-scored	–
A4: Partnership/contracting out	Partly met	Not re-scored	–
A5: Effective communication with sentencers	Partly met	Not re-scored	–
Section B: Quality of assessment			
B1: Assessment of risk of harm	16%	28%	57%
B2: Assessment of likelihood of reoffending	97%	76%	77%
B3: Case management	27%	43%	64%
B4: Documentation	53%	48%	75%
Score for section B	48%	49%	67%
Section C: Quality of interventions			
C1: Managing attendance and enforcement	69%	55%	85%
C2: Delivering appropriate supervision	45%	54%	70%
C3: Diversity needs	39%	76%	83%
C4: Responsivity	30%	88%	78%
C5: Management of risk of harm	44%	28%	70%
Score for section C	47%	57%	77%
Section D: Quality of initial outcomes			
D1: Interventions are delivered with the desired outcomes	58%	63%	67%
D2: Improvements are sustainable	50%	66%	66%
D3: Outcomes of interventions are assessed and reviewed using available data	Not met	Not re-scored	–
D4: Interventions demonstrate value for money	64%	68%	82%
Score for section D	59%	65%	73%
OVERALL SCORE FOR SECTIONS B-D (excluding D3)	51%	57%	73%

INSPECTION ARRANGEMENTS

- HMI Probation was invited to inspect the Isle of Man Probation Service and a small team of Inspectorate staff visited the service in May 2004. The inspection was based on the framework used in the ESI programme of inspections of probation areas in England and Wales, in which areas were being assessed on how well they had met defined inspection criteria focusing on the:
 - overall management of the area
 - quality of the assessments carried out on offenders
 - quality of the interventions carried out with offenders
 - initial results of the interventions, both in relation to criminogenic factors such as employment, accommodation and substance misuse, and also whether there had been any reduction in the risk of harm and the risk of reoffending.
- The Isle of Man follow-up inspection was a limited exercise focusing on progress against the recommendations in the original report. It involved scrutiny of 29 case files and discussion with case managers, enabling us to compare findings with the 30 cases examined in the earlier inspection. A small number of the offenders had been assessed as presenting a high risk of harm to the public. The case sample contained community sentences and post-release licences commencing between May and November 2005.
- Meetings were held with the SMT, the Chief Executive of the DHA, and members of the Isle of Man's PLC, including the High Bailiff. On this occasion, no interviews were held with members of other agencies involved in supervision of the cases, nor with offenders, though we did receive some unsolicited feedback from an offender.

SCORING APPROACH

- The report uses a similar framework to that used in the earlier inspection, assessing the probation service's performance against the criteria that are relevant to the issues addressed in the follow-up. The original inspection included interviews with offenders and people from other agencies involved in cases, so the scores for the interventions and outcomes sections had reflected the results of these. As no such interviews were held on this occasion, those original sections have been re-scored to enable direct comparison with the results from this follow-up. However, the relevant criteria in the management section and in D3 have not been re-scored because of the narrower focus of the follow-up.
- At the request of the DHA, comparative information from England and Wales has been included in the scoring summary. This is based on average scores for the sections on assessment, interventions and outcomes from the first 29 probation areas inspected under ESI. More detailed information about the scoring methodology is available on the HMI Probation website.

SECTION A QUALITY OF MANAGEMENT

A1 Leadership and planning

Description:

The SMT leads the service in the achievement of national targets and implementation of national priorities. The service is enabled to work efficiently and effectively by the DHA which provides guidance and resources. The SMT is committed to the implementation of national targets and priorities, including What Works strategies, risk management and promoting diversity.

- Since the original inspection there had been considerable activity focused on tackling the recommendations in the original report and the CPO had met monthly with the Chief Executive to evaluate progress. The latter believed there was greater awareness generally in the service of the need for continuous improvement in practice and a commitment by managers to achieve this. A departmental business plan was in place and the priority of the Chief Executive was to deliver this. Both he and the SMT recognised that overall progress against the recommendations had been slower than might have been expected. Staffing difficulties, especially sickness absence, had been a major obstacle to improvement and these were still not resolved fully.
- To improve cohesion within the SMT, work had been undertaken with an external consultant. While this was thought to have been positive in achieving action on the inspection report recommendations, tensions within the team have remained. Staff were also aware of this, with several case managers commenting specifically on the divided nature of the SMT.
- Despite these difficulties, there had been progress in relation to offending behaviour programmes. To tackle the harm caused by domestic abuse, the service had introduced a programme to address this, which was already in use in Northern Ireland. One, three month group programme had already been run successfully and another was due to start at the time of the inspection. This was a welcome innovation, involving support for partners of the offenders as well as direct work on offending. Arrangements had also been made with police officers to notify probation staff of domestic abuse incidents which came to their attention. Particularly noteworthy was the input to the programme by a child psychologist, regarding the effect of such abuse on children. Participant evaluation of the programme demonstrated the powerful impact this had had on some offenders.
- Consideration had also been given to introducing other offending behaviour programmes, but the service took the view that lengthy group or individual programmes would not be viable given its small size and the resource implications for staff. An alcohol education programme had recently been introduced, aimed at disqualified drivers who were due to have their licence returned in the near future. To maximise attendance, the programme was delivered over a full day at the weekend. A positive response to this multi-agency programme was expected from sentencers, but its limited target group meant there was still no facility to tackle drink related driving offences as an enforceable condition of a community sentence or licence.
- A cognitive behavioural programme, aimed at tackling deficits in thinking skills, had been run on one occasion in the hostel, but no decision had yet been made about repeating it there or implementing it for general use with offenders under supervision. If this were to be

adapted for individual use, it would meet a gap in providing interventions which challenged directly the poor thinking skills which can lead to offending.

- Although the CS issues referred to in the original report had been resolved to the satisfaction of sentencers, there remained weaknesses in its operation. Two CS cases in the sample were discovered to have had no risk of harm or likelihood of reoffending assessments. The offenders had been sentenced without SERs (when such assessments would usually be undertaken) and the service had no system for ensuring that these were undertaken before allocation to work placements. We were assured that measures were in place to prevent any repetition.
- An internal audit report had also uncovered financial irregularities in CS, relating to alleged fraudulent timesheet claims in the external supervision of offenders. These were responded to swiftly, but it had been recognised that business control measures were weak and the DHA and probation service were in the process of implementing the recommendations from that report. Devising specific Manx standards for CS was also an objective in the DHA Business Plan for 2006/2008.

Conclusion: *We assessed the service as demonstrating some improvement in relation to the availability of offending behaviour programmes. However, further work was needed in respect of leadership issues and in developing the quality of practice overall.*

A2 Resource allocation

Description:

The service demonstrates a strategic approach in allocating resources to deliver effective performance and shows positive results in relation to value for money.

- The workload allocation system had been reviewed and there were no indications from staff that this was operating unfairly, as had been the concern previously. However, case managers were unclear as to whether there was a workload prioritisation model in existence.
- A system was now in place to ensure that inappropriate cases were not transferred to the report centre. This was confirmed by PSO staff as being a significant improvement.

Conclusion: *We assessed the service as demonstrating improved performance in relation to the recommendation around systems for workload allocation and suitability of offenders to attend the report centre.*

A3 Management and supervision of staff

Description:

The DHA and CPO have human resources planning strategies that ensure delivery of effective supervision to offenders.

- All case managers confirmed that supervision was now taking place in line with service policy as regards frequency. PSO staff in particular were very positive about the supervision, support and guidance provided through the new practice manager post. All case managers

had also had an appraisal completed within the last 12 months, though the link between appraisals and the service business plan was not evident to all practitioner staff.

- Every offender case file was now subject to internal audit procedures which had been introduced and overseen by the practice manager. This was a useful development, though it focused mainly on performance against Manx standards and the service recognised that it also needed to cover the quality of work undertaken.
- Staff sickness remained a problem for the service, several having been absent because of stress and one was on long-term sick leave. Agency staff had been recruited to provide some operational cover, for example in relation to report writing. Whilst this was appreciated by staff, the absence of colleagues continued to place a burden on those remaining, with some people being moved into different roles to ensure all work was covered. All the case managers interviewed were clear about the probation service procedures in place to address staff sickness absence, but the managers remained concerned that the civil service procedures for dealing with long-term sickness and capability were somewhat drawn out.

Conclusion: *We assessed the service as demonstrating improved performance in relation to the recommendation concerning supervision and appraisal of staff.*

A4

Partnership/ contracting out

Description: *The DHA and CPO have strategies and procedures in place to ensure that partnerships with both voluntary and statutory agencies support service delivery and are value for money.*

- The probation service and the DHA acknowledged that there had been limited progress in relation to the recommendation on reviewing the value for money of partnership organisations. The probation service acted, in effect, as a conduit for DHA funding of David Gray House and Victim Support, and did not commission services itself. However, SLAs were being introduced with both organisations as part of the business plan. The latter also contained an objective to evaluate the effectiveness of the electronic monitoring programme.
- There was now an informal partnership in place with the local Further Education College to meet the needs of offenders with basic skills and literacy difficulties and this appeared to be working well.

Conclusion: *We assessed the service as demonstrating some progress in relation to the recommendation on reviewing the value for money of partnership organisations.*

Description:

There is high quality, proactive communication by the service, supported by the DHA, with local sentencers and legal advisors about the supervision of offenders and the provision of reports.

- ▣ Sentencers commented positively on the probation service overall. SERs were viewed generally as being comprehensive and well written, though the quality did vary.
- ▣ The issue identified in the original report regarding CS orders had been resolved and sentencer confidence in the service did not seem to have been affected unduly. There was some concern expressed that enforcement action was tardy on occasions and this was borne out by our inspection findings.
- ▣ Comprehensive performance information continued to be provided regularly to the PLC and sentencers respected the honesty of the service in identifying shortfalls in performance, for example in relation to the achievement of Manx standards during periods of staff sick leave. However, they indicated that more information about the quality of practice and the outcomes of supervision would be appreciated.

Conclusion: *We assessed the service as demonstrating continuing effective communication with sentencers, though information on the quality and effectiveness of supervision could be improved.*

SECTION B QUALITY OF ASSESSMENT

B1	Assessment of risk of harm	Original inspection	16%
		Follow-up inspection	28%

Description:

Risk of harm is satisfactorily assessed using an approved instrument (OASys where available), specialist assessment tools, where relevant, and draws on MAPPA, other agencies' and previous probation service assessments.

- Since the last inspection, the service had introduced a risk of dangerousness tool to assess offender risk of harm. Overseen and reviewed by the psychologist who provided consultancy and support for the sex offender programmes, it was similar to tools used in the probation service in England and Wales. All but three cases had been assessed using this form and the risk assessment level was considered to be appropriate in 79% of cases overall, rising to 100% of the high risk of harm sample. This was a considerable improvement on practice at the time of the earlier inspection.
- The quality of risk of harm assessments was satisfactory in 41% of cases seen. There was a need for further development in case manager understanding of the use of the risk of dangerousness tool. We found confusion about the risk categories, including whether the form referred solely to the offender's risk of harm to themselves, and a lack of consistency in use of the risk levels. The assessment tool would have benefited from descriptors (definitions) attached to the risk levels, so that all staff were clear about what was meant by a high risk of harm case, for example.
- Risk of harm had been reviewed regularly in 30% of cases, a far from satisfactory figure even though it was an improvement on previous inspection findings. Management involvement in assessment was not considered sufficient in any of the high risk of harm cases. These issues are considered further in Section C5 later in the report.
- A close fit between the interventions planned and the offender's risk of harm was found in just under two-thirds of the cases, slightly less in the high risk of harm sample.

Conclusion: *We assessed the service as demonstrating some improved performance in respect of the recommendation relating to risk of harm assessments and reviews. Further work is needed to improve consistency in understanding the risk classification model used and the quality of risk assessments and reviews overall.*

B2	Assessment of likelihood of reoffending	Original inspection	97%
		Follow-up inspection	76%

Description:

The likelihood of reoffending and criminogenic factors are satisfactorily identified and assessed using an approved instrument (OASys, OGRS2, LSI-R, ACE).

- 62% of cases contained a satisfactory assessment of the offender's likelihood of reoffending and the areas of need related to this, using LSI-R. This rose to 80% for the high risk of harm

sample. Both figures were lower than in the original inspection, partly explained by the lack of any assessment in three cases.

- In all but the three cases there was a clearly identified likelihood of reoffending score.

Conclusion: *We assessed the service as demonstrating poorer performance in relation to this criterion.*

B3	Case management	Original inspection	27%
		Follow-up inspection	43%

Description:

The case is managed effectively and interventions coordinated to enable criminogenic factors to be addressed and any risk of harm managed. The initial supervision plan or CS assessment takes account of the SER or sentence plan in licence cases, and describes an overall plan of work for each offender, in line with the assessments of risk of harm and need and the likelihood of reoffending.

- In 45% of cases the supervision plan or CS assessment was considered to be sufficient in terms of its content and timeliness. While this was an improvement compared with previous findings, it was recognised by the SMT that this was still unsatisfactory and that progress on improving the quality of supervision planning and supervision plan reviews had been slower than expected.
- There was limited understanding amongst case managers that supervision plans needed to reflect the assessments of risk of harm and likelihood of reoffending. Appropriate interventions to address offending behaviour and community reintegration were identified in only half the cases, and even less in the high risk of harm ones. Recent developments in the offender database were expected to aid case managers with this, for example by ensuring that areas of offender need, as shown in LSI-R scores, were easily identified in the supervision plan. Managers accepted that practice did need to change and guidance on the required content of supervision plans would assist with this process.
- Liaison responsibilities with other organisations involved in supervision were clearly identified in only one out of the five high risk of harm cases and in just over a third of the cases overall. This was lower than in the original inspection.
- There had been improvement in ensuring that offenders understood the requirements of their order or licence; this was demonstrated in over 80% of cases. It was less evident that offenders had been given the opportunity to participate in planning their supervision; only 35% had been involved though this rose to 60% of the high risk of harm offenders.

Conclusion: *We assessed the service as demonstrating some improvement in respect of the recommendation relating to supervision planning and reviews. Further work is needed to ensure that supervision plans reflect the assessments of risk of harm and likelihood of reoffending.*

B4	Documentation	Original inspection	53%
		Follow-up inspection	48%

Description:

All relevant documentation is available and has been satisfactorily completed.

- Case records were assessed as being well organised and containing all relevant documentation in 52% of cases, rising to 80% in the high risk of harm ones. We were impressed by the electronic case record which was straightforward to use and had been designed to be user-friendly. For example, every case manager had a ‘home page’ on the system which contained reminders of work needing to be done.
- The offender contact record also contained headings to provide a structured focus to interviews to guide appropriate recording. Despite this, the quality of record keeping was judged to have deteriorated since the last inspection, with only 45% assessed as sufficient overall.

Conclusion: *We assessed the service as demonstrating poorer performance in relation to this criterion. More attention needs to be given to the quality and sufficiency of case records.*

SECTION C QUALITY OF INTERVENTIONS

C1	Managing attendance and enforcement	Original inspection	69%
		Follow-up inspection	55%

Description:

Contact with the offender and enforcement of the order or licence is planned and implemented to meet the requirements of Manx standards.

- In 38% of cases the frequency of appointments or CS work sessions did not conform to the requirements of Manx standards, the achievement of objectives or any risk of harm considerations. Staff sickness absence had clearly had an adverse impact on frequency of contact with offenders.
- There was no improvement in judgements about the acceptability of offender absences. In 38% of cases there was a more generous attitude than we would have expected towards failures to attend appointments or CS work sessions.
- There were several examples of poor enforcement practice where cases should have been brought back to court for breach, but either this was not done in a timely fashion or it was not done at all. Only 22% of relevant cases were breached in line with the Manx standard. The service's internal audit process had identified this already as an issue which required attention. It was recognised that cases needed to be reviewed earlier to ensure deficiencies in practice were tackled in a timely fashion. The information system had been further developed recently to include the tracking of breach processes, to assist with improvement in this area.

Conclusion: *We assessed the service as demonstrating poorer performance in relation to the criterion. Further work was needed in particular on enforcement practice.*

C2	Delivering appropriate supervision	Original inspection	45%
		Follow-up inspection	54%

Description:

Interventions are delivered to achieve the objectives identified in the initial supervision plan and recorded according to the requirements of Manx standards. Supervision is prioritised according to an ongoing assessment of risk and need and takes account of previous reviews and work already undertaken by the service and other agencies. Case managers oversee and coordinate the work of other staff and partner organisations and all staff play an active part in motivating and supporting offenders throughout their supervision.

- Satisfactory supervision plan reviews were evident in 39% of the overall sample and 60% of the high risk of harm cases, an improvement on the findings in the last inspection though still much lower than would be expected.
- Appropriate interventions that reflected the offender's risk of harm and likelihood of reoffending were considered to have been carried out in 65% of cases, rising to 80% in the

work with high risk of harm offenders. Again, this was an improvement on previous findings.

- SERs now included a specific section in respect of victim issues and both the domestic abuse and sex offender programmes tackled victim awareness. However, there had been limited progress in ensuring that victim awareness was addressed as a routine part of supervision of other offenders. Under a third of cases showed victim issues being addressed with the offender to a satisfactory standard or work being undertaken to raise awareness of the impact of the offence on the victim.
- A two hour victim awareness programme had been devised but had yet to be used with any offenders in the community. It was unclear to us how its content would increase offenders' understanding of the effects of their actions or encourage victim empathy. Some probation areas in England and Wales had already adapted materials on victim awareness from the *Targets for Effective Change Manual* and this could prove a more straightforward approach for the service. It would then need to ensure that a suitable programme of such work was undertaken with every offender.
- There had been an increased focus on work directed at community reintegration issues such as accommodation, employment, substance use and family relationships. This was clearest in the high risk of harm cases, with 75% showing sufficient work having been done, whilst the figure was 59% in the sample as a whole.
- Apart from in the high risk of harm cases, there had been no improvement in challenging offenders to accept responsibility for their offending and its consequences. Outside of the domestic abuse and sex offender programmes, we saw little evidence of offence focused work. Indeed, several case managers reminded us that their role was one of 'advise, assist and befriend' rather than crime reduction. Their perception would not appear to sit easily with the community safety focus in the DHA business plan.

GOOD PRACTICE EXAMPLE

Z was a young offender who misused a variety of drugs and also had mental health problems. His case manager worked in partnership with a colleague from the DAT, together prioritising initial interventions to stabilise mental health and thus reduce the risk of self-harm. Part of this involved crisis intervention and admission to hospital, along with life-map work with the offender to help him understand how he had reached this point. Z's mental health improved and progress is expected to be maintained through continuing work with the PO attached to the DAT, once formal supervision has ended.

Conclusion: *We assessed the service as demonstrating little improvement in relation to the recommendation regarding victim issues being sufficiently addressed in the supervision of all offenders.*

C3	Diversity needs	Original inspection	39%
		Follow-up inspection	76%

Description:

There is a full range of interventions to meet diverse needs. There is evidence of appropriate support arrangements for women, minority ethnic and disabled offenders.

- There was increased evidence of case managers taking account of offenders' particular needs, with supervision assessed as sensitive to diversity issues in 79% of cases. However, apart from CS, this was not based on a routine check for diversity issues at the start of supervision.
- Basic skills and literacy difficulties were addressed sufficiently in 81% of cases, a marked improvement from the last inspection. Good use was being made of the informal partnership arrangement with the Further Education College to accept referrals from the probation service.

GOOD PRACTICE EXAMPLE

The new domestic abuse group programme was held outside usual office hours on a Saturday morning. This was a helpful attempt to meet the needs of those attending, most of whom were in employment. There had been a positive response to this from the offenders and it had encouraged their compliance.

Conclusion: *We assessed the service as demonstrating considerably improved performance in relation to this criterion. However, a formal assessment needed to be made at the start of supervision of offenders' diverse needs and any potential obstacles to successful completion of supervision.*

C4	Responsivity	Original inspection	30%
		Follow-up inspection	88%

Description:

Offenders' learning style, motivation and capacity to change are taken into account in the assessment and intervention plan.

- Three cases in the sample were released prisoners being supervised on licence. The quality of pre-release work by the case manager, taking account of the assessment of risk of harm and need and the offender's motivation and capacity to change, was assessed as sufficient in all of them. This was a marked improvement on the findings in the previous inspection.
- Consideration had been given to the methods most likely to be effective with the offender in 76% of cases, though the figure was lower in the high risk of harm sample.

Conclusion: *We assessed the service as demonstrating considerably improved performance in relation to the recommendation concerning the quality and degree of pre-release work in prison licence cases. Further work is needed to ensure that consideration is given to the methods most likely to be effective with offenders posing a high risk of harm.*

C5	Management of risk of harm	Original inspection	44%
		Follow-up inspection	28%

Description:

Risk of harm is actively managed in consultation with other agencies.

- Interventions were judged to have been appropriate to the assessed risk of harm in 72% of cases, rising to 80% in the cases posing a high risk of harm. This was an improvement on the earlier inspection.
- Whilst the new risk of dangerousness form required management oversight of all risk of harm assessments, there were examples of inconsistent understanding of risk of harm issues, for instance an inaccurate low-risk assessment in a domestic abuse case that had also been inappropriately countersigned by the manager. In some instances, a manager had altered the risk of harm classification without discussion with the case manager. This was not helpful in managing the cases and contributed to a perception amongst some case managers that the risk of dangerousness assessment was simply “a form which managers required to be completed”, rather than an essential tool in identifying risk of harm factors and working to reduce them.
- Changes in risk of harm had not been recognised appropriately in some instances; only half of the ten relevant cases showed sufficient evidence of work to identify and manage the risk and take any necessary action to reduce it. The risk of dangerousness form included no space for case managers to review risk of harm either in response to incidents or on a routine basis. Although this information was supposed to be included in the supervision plan reviews, case managers were unclear about what was required of them.
- There was limited evidence of inter-agency risk management arrangements working appropriately. Of the four cases where an inter-agency risk management plan should have been produced, this was assessed as sufficient in only two. There was no evidence of these risk management plans being carried out as expected or of them being reviewed. In the single child protection case in the sample, there was insufficient involvement in child protection arrangements by the case manager. In addition, only half of the high risk of harm offenders had been visited at home.

Conclusion: *We assessed the service as demonstrating poorer performance in relation to the recommendation concerning appropriate oversight of high risk of harm cases. Further work was needed to ensure that all staff understood what was required of them in managing risk of harm.*

SECTION D QUALITY OF INITIAL OUTCOMES

D1	Interventions are delivered with the	Original inspection	58%
	desired outcomes	Follow-up inspection	63%

Description:

Planned objectives are achieved and the risk of harm/likelihood of reoffending is demonstrably reduced.

- Alcohol and thinking skills difficulties were the factors most frequently identified as being linked to offending in the cases in the sample. There was evidence this time of greater progress by offenders in relation to the first and second priorities being tackled in supervision.
- Only 36% of offenders were assessed as showing a positive change in attitudes, beliefs and behaviour in relation to offending and an increased awareness of the effect of the offence on victims. This was worse than in the earlier inspection, though figures for the high risk of harm sample were slightly better.
- In two out of the five high risk of harm cases there was evidence of a reduction in the risk of harm posed.
- Just over a third of offenders showed evidence of learning acquired during supervision being more generally applied in their lives, although there was an improvement in their community ties and social circumstances in half of the cases.
- It was noteworthy that the five offenders in the high risk of harm sample had attended all their appointments and complied with every condition of their order or licence. However, these figures were lower in respect of the overall sample.

GOOD PRACTICE EXAMPLE

An offender, C, commented positively on the outcomes of his supervision. Initially uncommunicative and finding it hard to trust probation staff, he praised their support as he tried to rebuild his life. This included assistance with finding employment and he noted that staff "often go out of their way to help".

Conclusion: *We assessed the service as demonstrating some improvement in relation to this criterion, although more focus is needed on achieving planned objectives to reduce the risk of harm and likelihood of reoffending.*

D2	Improvements are sustainable	Original inspection	50%
		Follow-up inspection	66%

Description:

Results are capable of being sustained beyond the end of supervision.

- Case managers were now giving considerably more attention to long-term community reintegration issues, and there was also some improvement in ensuring offenders maintained contact with organisations outside the probation service that might help them avoid further offending after their order or licence had ended. This was done particularly well in high risk of harm cases.

GOOD PRACTICE EXAMPLE

X had a long history of offending and had not engaged well in previous supervision. Alcohol misuse had featured in her offending and the Alcohol Advisory Service had helped her tackle this. Her case manager had built on this success and supported X in sustaining her motivation and reinforcing her commitment to abstinence. X was now undertaking a full-time college course and working towards resuming care of her children.

Conclusion: *We assessed the service as demonstrating improved performance in relation to this criterion.*

D3	Outcomes of interventions are assessed and reviewed using available data	
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Description:

All available data are used to assess the effectiveness of interventions.

- Development work had continued on the computerised database and the system was capable of generating very useful management information. For example, the service was now aware from its LSI-R assessments of offenders that lifestyle and peer group influence was the biggest single factor in their offending, and it was considering how best to tackle this need.
- Whilst performance was monitored at individual case manager level, it was not yet evident how this information was being used to improve individual practice.
- A system was in place with the police to obtain reconviction data concerning offenders under supervision. This was a welcome development, but it was in its early stages and no results were available at the time of the inspection.
- Attitudinal change questionnaires (Crime-Pics) were now being undertaken on new community sentence cases. Given the commencement dates of our sample we did not see these in use, but it was anticipated that their review at the end of supervision would provide valuable evidence of the effectiveness of supervision in achieving change.
- Service user feedback was not sought routinely, but a customer satisfaction survey was due to be rolled out in the future and arrangements were in place for this to be analysed through the DHA.

Conclusion: We assessed the service as demonstrating improved performance in collecting outcome data. However, better use could be made of existing management information in order to increase effectiveness.

D4	Interventions demonstrate value for money	Original inspection	64%
		Follow-up inspection	68%

Description:

Interventions are delivered with efficient and appropriate use of resources.

- Resources were assessed as being used efficiently in only marginally more cases than in the original inspection. This, again, reflected concerns about the quality of some of the work inspected, as commented on in earlier sections.
- In 76% of cases the resources allocated to the case were consistent with the offender's risk of harm, a rise of 6%.

Conclusion: We assessed the service as demonstrating improved performance in relation to this criterion.

THE ROLE OF HMI PROBATION

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

Home Office Objectives

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

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

Role

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

Code of Practice

HMI Probation aims to achieve its purpose by:

- undertaking its work with integrity in a professional, impartial and courteous manner
- consulting stakeholders in planning and running inspections and regarding reports
- forming independent inspection judgements based on evidence
- the timely reporting and publishing of inspection findings and recommendations for improvement
- promoting race equality and wider diversity issues in all aspects of its work, including within its own employment practices and organisational processes
- developing joint approaches with other Inspectorate and Audit bodies to ensure a coordinated approach to the criminal justice system

The Inspectorate is a public body. Anyone who wishes to comment on an inspection, a report or any other matter falling within its remit should write to:

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