

Management and supervision of men convicted of sexual offences

A thematic inspection by HM Inspectorate of Probation and HM Inspectorate of Prisons January 2019



This inspection was led by HM Inspector Wendy Martin, supported by a team of inspectors and operations, research, communications and corporate staff. HMI Prisons' Inspector Sandra Fieldhouse led the work completed in custody. The manager responsible for this inspection programme is Helen Davies. We would like to thank all those who participated in any way in this inspection. Without their help and cooperation, the inspection would not have been possible. Please note that throughout the report the names in the practice examples have been changed to protect the individual's identity.

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Published by:

Her Majesty's Inspectorate of Probation 1st Floor Civil Justice Centre 1 Bridge Street West Manchester M3 3FX

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Foreword

The number of men convicted of sexual offences has grown significantly since we last undertook a thematic inspection of the work in 2010. The number of registered sexual offenders currently exceeds 58,000. Sexual offenders represent approximately one in five cases of the overall National Probation Service (NPS) caseload. Despite this focus and the passage of time, insufficient progress has been made since we last reported, on the then probation trusts in 2010.

We expect prison and probation services to work with sexual offenders to reduce the risk of them reoffending and to protect the public from harm. In the cases we inspected, not enough work was being done, either in prison or after release, to reduce reoffending or to protect the public.

There are robust and well-respected theories that underpin effective work with sexual offenders, which should be used much more widely in both prisons and the community. We found that the current accredited programmes for sexual offenders are underused in the community and in prisons. In too many cases in prisons, we found that little, if anything, was done to reduce the likelihood of reoffending, particularly in cases that were not suitable for an accredited programme. We appreciate the pressures on prison leaders and all those working in prisons, but this makes little sense to the public or to the public purse.

We found that the theories underpinning effective practice are not understood by staff sufficiently well, and the methods and tools are not embedded into practice. Consequently, many staff committed to doing their best when working with these offenders struggle to balance a positive, forward-looking approach with one focused on public protection. This is an enduring requirement throughout probation, but it is so often in stark relief when supervising sexual offenders.

Conversely, there is an over-reliance by the NPS and HM Prison Service on electronic communication that leaves staff unable to see the wood for the trees. They feel bombarded and are not getting appropriate support and training for this sensitive and complex work. At a strategic level, work is being undertaken to address identified gaps in practice, but this needs to be streamlined and better focused, in our view, to get through to the field and to be effective. An offender's transition from prison to the community can never be seamless, but for this group of offenders we found it was managed badly, overall. Planning for release is nowhere near good enough, and 'too little, too late'. The implementation of new arrangements (the Offender Management in Custody (OMiC) model) is in development. They have the potential to manage each offender's progress and transition more effectively. We do not underestimate how challenging this project will be to implement fully.

More immediately, the needs of children and victims should be given greater priority, to protect them better. Here, we were pleased to see good work with victims by victim liaison officers. It would be beneficial if they were able to work more closely with responsible officers at key stages, and especially when release is imminent.

The detail provided in this report will enable HM Prison and Probation Service, the NPS and HM Prison Service to identify what is working well and where improvements are needed. Our recommendations focus on what we see to be the key priorities.

Dame Glenys Stacey HM Chief Inspector of Probation

Peter Clarke CVO OBE QPM HM Chief Inspector of Prisons January 2019

Key facts



- ¹ Office for National Statistics (2018). Sexual offences in England and Wales: year ending March 2017.
- ² Ministry of Justice (2018). Offender Management Statistics Quarterly: January to March 2018.
- ³ Ministry of Justice (2018). *Multi-Agency Public Protection Arrangements Annual Report 2017/18*.
- ⁴ Ministry of Justice (2018). Unpublished data for 31 March 2018.
- ⁵ Ministry of Justice (2018) *HMPPS Annual Digest 2017/18*. We note that data on starts and completions of accredited programmes in the community is incomplete and has not been published for the 12 months to March 2018.

Inspection context

The definition of a sexual offence has changed over time, although it can generally be split into four categories (Sanders, 2017):



The *Sexual Offences Act 2003*, as amended by a series of other acts, including the *Anti-Social Behaviour, Crime and Policing Act 2014* and *Serious Crime Act 2015*, remains the primary legislation in this area.

Roles and responsibilities of probation services

In June 2014, under the government's *Transforming Rehabilitation* programme, 35 probation trusts were replaced by 21 Community Rehabilitation Companies (CRCs) and a new public sector NPS, delivered through seven probation divisions. The first edition of the new NPS operating model was published in July 2016.

The NPS is responsible for managing all registered sexual offenders (RSOs) serving current sentences. The NPS is also responsible for providing information to courts to help inform sentencing decisions and for completing necessary checks with police and children's services. It manages all cases involving a high or very high risk of harm, and those managed through MAPPA. All RSOs are managed under MAPPA; 98 per cent are currently managed at Level 1 (single agency, i.e. probation or police). The NPS also facilitates the statutory Victim Contact Scheme (VCS) for victims of offenders who have received a custodial sentence of 12 months or more.

CRCs manage cases assessed at sentencing as posing a low or medium risk of harm to others. A small number of non-RSOs are supervised by CRCs. These are mostly people who committed sexual offences before the legislation on registration of sexual offenders was introduced in 1997. Such cases amount to less than one per cent of the CRC workload and do not include those assessed as a high risk of harm.

NPS involvement with victims⁶

The VCS became a statutory responsibility for the then Probation Areas under the *Domestic Violence, Crime and Victims Act 2004*. The scheme was designed to ensure that victims were given regular updates about an offender, and were able to make representations about an offender's release arrangements and receive information about licence conditions. Responsibility for providing continuing support to victims remains with victim support services. The basis of the scheme has remained fundamentally the same since its inception, with a focus on initial contact, annual updates and contact at key decision points throughout the sentence.

The VCS has been subject to scrutiny following the case of John Worboys. In 2018, HMI Probation completed a fact-finding exercise in relation to this case. It found that, while the NPS had complied with the current instructions, it was clear that these instructions had not always met the needs of the victims involved in that case. Furthermore, it found several examples of poor-quality correspondence and outdated information leaflets. In response, the NPS has revised the training for victim liaison officers and updated the template letters.

Sexual offender interventions

The NPS is responsible for providing sexual offender programmes to men in the community. Programmes of work delivered to prisoners are the responsibility of HM Prison Service. Sexual offender accredited programmes have gone through a time of significant change over the last 18 months. The suite of sex offender treatment programmes (SOTP), which ran from 2001 in both custodial and community settings, has recently been replaced.

An evaluation of the core SOTP programme's effectiveness in custody found that more sexual offenders went on to commit at least one sexual reoffence during the follow-up period than similar offenders who did not receive this intervention (MoJ, 2017). Following the evaluation, HM Prison and Probation Service (HMPPS) withdrew this programme. A decision was also made to remove the extended programme in custody, followed by the legacy community programmes.

While there are a small number of legacy programmes being concluded in the community, these have been replaced in both custody and in the community by Horizon. HM Prison Service has also introduced Kaizen for high-risk and high-need prisoners. Both are rooted in the 'strengths-based' approach to reducing offending and unlike SOTP are available to those who deny their offences.

⁶ We recognise that people who have been victims of crime, including sexual offences, may identify either as a 'victim' or as a 'survivor'. Often criminal justice agencies use 'victim' as it is the legal term, and we have adopted this convention in our report while respecting that individuals who have experienced sexual abuse can use both terms when talking about their experiences.

Roles and responsibilities of HM Prison Service

The provision of resettlement services in prisons changed in 2014 with the introduction of *Transforming Rehabilitation*. Out of 121 prisons, 87 were designated as resettlement prisons, which introduced CRC-led resettlement and Through the Gate services for all prisoners.

HMPPS is currently undertaking two major projects in the custodial estate: Prison Estate Transformation (PET) and Offender Management in Custody (OMiC).

PET aims to redefine the function of each establishment, categorising each one as a reception prison, a training prison (including some specialist sites) or a resettlement prison. The aim is to make the movement of prisoners, including those convicted of sexual offences, easier. There are also plans to increase the number of open prisons that would hold sexual offenders, which is currently limited to three.

The OMiC project is introducing a new offender management model, as well as a new keyworker role in each male closed prison. The project aims to promote better offender management and effective risk management.

There are several Prison and Probation Instructions governing work with sexual offenders and targets set for the number of men completing treatment programmes.

Executive summary

Policy, strategy and leadership

While HMPPS's Sexual Offenders Management Board (SOMB) has overall strategic responsibility for delivering work with sexual offenders, many other groups and teams influence the strategic direction and operational delivery of the work. We found a disconnect between how these teams described how work with sexual offenders is being delivered, and what we found in practice. More should be done to draw the different strands of work together, to prevent a disjointed approach.

With no overall needs analysis of sexual offenders, HMPPS does not have a complete picture of the profile of this group of individuals.

There is a commitment to developing evidence-informed programmes which are then evaluated to become evidence-based. We found many NPS staff who do not yet understand the strengths-based approach to working with sexual offenders sufficiently well. As a result, it was not embedded into practice. We found that guidance and training, delivered electronically, is largely ineffective. The professional and emotional needs of the staff managing sexual offenders have seemingly been underestimated – they are not well provided for.

Senior probation officers (SPOs) have wide spans of control, some supervising cases or undertaking other roles, in addition to supporting responsible officers. Responsible officers view the support of their line managers positively, but they have little confidence in the employee support provision, PAM Assist. The roles and responsibilities of SPOs in custody were inconsistent.

Work delivered to sexual offenders in custody

Work in prison with men convicted of sexual offences was poor overall, and we were concerned that the risk to the public from those released was not being managed sufficiently well. Too little work was done to reduce either the risk of harm presented, or the risk of reoffending for those not participating in an accredited groupwork programme. In custody, accredited programmes are often seen as the only way of working with men convicted of sexual offences.

Planning for release, including the use of inter-departmental risk management team (IRMT) meetings and MAPPA, was not well managed. Joint work between NPS staff in the community and prison offender management teams was not done well in many cases, resulting in poor risk management and release plans. This was compounded by the lack of suitable accommodation for sexual offenders.

Moving sexual offenders around the prison estate to access appropriate interventions was difficult, and this affected men's ability to make progress. Further, opportunities to move to open conditions were limited because of a lack of available places.

Too few prison officers were trained and supported to identify risk of harm, or to deliver suitable interventions.

Reducing reoffending

The current process of assessing offenders using a multitude of tools is unwieldy. In too many cases, staff do not use assessment tools well enough, and in combination, to ensure comprehensive risk assessments. Initial OASys assessments in the community were generally good, and RM2000s accurate. However, the specialist sexual offender Active Risk Management System (ARMS) assessments were poor and rarely informed other assessments and the delivery of interventions. This meant that the overall assessment of men was insufficient in a third of cases.

Accredited programmes for sexual offenders in the community are underused. Some men have difficulties accessing programmes, and some needs are not being met, including for those men with learning disabilities. Where men do not have a licence condition or requirement to complete an accredited programme, they were rarely considered by responsible officers, even though some individuals were suitable for them.

For those not participating in a programme, the delivery of individual work is not good enough. Too many offenders are completing their sentence without sufficient work having been undertaken to reduce their risk of sexual offending. A variety of legacy interventions and tools are being used in the community, with staff having little knowledge of, or confidence in, the one-to-one intervention Maps for Change.

Responsible officers do not review work delivered or risk levels regularly enough. As a result, significant new developments such as meeting a new partner, or behaviour in custody, were not always captured in assessments and subsequent plans.

Sexual offenders often have multiple responsible officers, and this impacts on their experience of supervision, both in custody and in the community, and how they are supported to change their behaviour. In custody, some offenders did not have a responsible officer at all.

Public protection

Sexual offenders in the community were largely managed at an appropriate MAPPA level to support public protection. However, MAPPA processes varied and the referral criteria were understood differently across both the NPS and HM Prison Service.

In too many cases, men who fell under MAPPA Level 1 (the majority of sexual offenders) did not have their risk levels and needs adequately reviewed. The MAPPA Level 1 process varies across the NPS. Where it was not being completed sufficiently well, opportunities were missed to identify changes in risk levels at an early stage.

We found some good strategic relationships between the NPS and the police and children's services. However, this was not always replicated at an operational level.

The inconsistent, limited use of the Violent and Sex Offender Register (ViSOR) meant that opportunities for systematic information exchange between partners, and therefore good multi-agency risk management, were missed.

The overall assessment of sexual offenders was inadequate in a third of cases and had not always considered the needs of victims and children. Some staff lacked the appropriate degree of professional curiosity when dealing with these men. In one in three cases, safeguarding checks were not made as needed throughout the sentence. Responsible officers carried out home visits in too few of the cases inspected, and this meant that they missed a key opportunity to gather information to inform risk assessments and reviews. Cases were sometimes seen by a duty officer or at a reporting facility, which meant that focused and planned interventions did not happen.

We found victim liaison officers delivering over and above the requirements of the VCS, and dedicated staff undertaking the work. As with responsible officers, these staff are not supported sufficiently well, given the emotional and challenging work they are undertaking.

Recommendations

HM Prison and Probation Service should ensure that for both custody and community cases:

- 1. staff are provided with a clear approach to working with those convicted of sexual offences
- 2. there are regular and comprehensive national analyses of offending-related risks and needs of those convicted of sexual offences
- it promotes closer working between CRCs, prison staff and the NPS so that there is continuity of resettlement support, effective public protection and oversight throughout the sentence
- 4. it provides evidence-informed interventions for offenders whose needs are not met by accredited programmes
- 5. the workforce is equipped to identify, assess and deliver appropriate interventions to manage the risk of harm presented by those convicted of sexual offences
- 6. IT systems are improved to enhance joint working arrangements and to be available to relevant staff in both custody and the community.

NPS divisions and HM Prison Service should:

- 7. improve the integration of assessment tools and the quality of assessments and plans to ensure that the public, particularly children and actual and potential victims, are protected.
- 8. ensure that those allocated to work with sexual offenders are offered the appropriate level of professional and emotional support to deal with the complex, often difficult, nature of their caseloads
- 9. ensure that MAPPA level setting is consistent, clearly communicated across the responsible authorities, and underpinned by robust assessment and regular reviews
- 10. ensure that accredited programmes are delivered in all appropriate cases
- 11. train staff to deliver individual work programmes for use with sexual offenders who are not subject to an accredited sexual offending group work programme
- 12. ensure that all convicted sexual offenders in custody have an allocated NPS responsible officer and prison-based offender supervisor who is actively involved in managing the case.

HM Prison Service should ensure that:

- 13. public protection procedures, including the monitoring of communications, are sufficiently robust and consistently applied
- 14. prisons make a more effective contribution in their role as a MAPPA responsible authority
- 15. all prisons have an active strategy to reduce reoffending, based on a current needs analysis, that sets out the steps to be taken with the population of convicted sexual offenders.

1. Introduction

1.1. Why this thematic?

Sexual offending by its nature is an emotive and complex subject, and the impact of such offending on victims can be profound. The level of media and public interest in how such cases are managed has increased in recent years, partly because of the number of high-profile cases reported.

The last thematic inspection of work with sexual offenders was completed by HMI Probation in 2010, jointly with HMI Constabulary (HMI Probation, 2010). Recommendations, to the then Probation Areas, included ensuring that sexual offenders could appropriately access treatment programmes, improving the use of information systems to support multi-agency working, and better alignment of agency plans. Further, a defensible process for the classification and management of MAPPA Level 1 cases should be put in place. Lastly, the report stated that there needed to be more focus on work delivered to individuals not on an accredited programme, and that staff working with sexual offenders should be better supported and trained to do so.

HMI Prisons inspections have found significant shortfalls in the quality of assessment and access to accredited programmes for sexual offenders. Resettlement and public protection arrangements in prison are variable and MAPPA levels are not always determined in good time before release.

We decided upon a joint inspection with HMI Prisons to assess the quality of services delivered both in prison and in the community.

1.2. Background

Since our last thematic inspection, the number of RSOs has increased by over 20,000, from 34,939 in March 2010 to 58,637 in March 2018 (MoJ, 2018).

In the same period, the number of offenders supervised under MAPPA Levels 2 and 3 has fallen significantly. The number at Level 2 has reduced from 1,856 to 609, and at Level 3 from 118 to 45.



The police recorded 150,732 sexual offences in the year to March 2018, compared with 56,652 in 2002/2003.

As at 31 March 2018, there were 13,580 prisoners serving sentences for sexual offences. This represented 19 per cent of the sentenced prison population.⁷ The number of prisoners serving immediate custodial sentences for sexual offences is now at its highest level since 2002.⁷ This is consistent with the latest Office for National Statistics data on the number of sexual offences recorded by the police in the year ending March 2018.⁸

This increase is believed to have resulted from both an improvement in the recording of sexual offences by police and an increased willingness of victims to come forward and report these crimes. HMI Constabulary found that sexual offences had been substantially under-recorded, by 26 per cent nationally (HMI Constabulary, 2014). This led to police forces reviewing and improving their recording processes. Additionally, the high-profile coverage of sexual offences, and the police response to reports of historical sexual offending (for example, through Operation Yewtree, which began in 2012) are likely to have encouraged victims to come forward to report both recent and non-recent offences.

Sexual offender assessment and interventions

Assessment

The NPS uses a number of different tools to inform assessments, assess risk and identify protective factors for those convicted of sexual offending.

OASys is the assessment tool used by the NPS for all offenders. It does not focus specifically on sexual offending, but provides the opportunity for responsible officers to gather a wide range of information about an individual and their needs and risk factors.

The ARMS tool was introduced in 2015 (NOMS, 2015). While it is used as a risk assessment tool by police, it is used by the NPS to aid the understanding of dynamic risk and protective factors for men who have committed sexual offences. The NPS is responsible for completing ARMS assessments for those RSOs subject to probation supervision, where the NPS is the lead agency. It is only suitable for use with men who have committed sexual offences.

Risk Matrix 2000 (RM2000) is a tool used to predict the risk of reconviction for adult men convicted of sexual offences. It uses static information about an individual and their offending to provide an actuarial assessment of their risk of reoffending.

Actuarial risk assessment is the most prominent and common approach to the assessment of sexual offenders in both research and practice; however, without a clinical input, such assessment can become mechanical. Grove et al (2000) found from a meta-analysis of 136 studies that actuarial risk assessment greatly outperforms sole clinical judgement in predictive terms.

Hanson and Morton-Bourgon (2005) found that the strongest predictors of sexual reoffending were sexual deviancy, anti-social orientation, criminogenic attitudes and intimacy deficits. Adverse childhood experiences, general psychological problems and

⁷ Ministry of Justice (2018). Offender Management Caseload Statistics.

⁸ Office for National Statistics (2018). *Crime in England and Wales: Bulletin Tables, Year Ending June 2017.*

clinical presentation had no predictive value. The strongest predictor of non-sexual reoffending was an anti-social orientation.

Interventions

Accredited programmes

It is generally accepted that accredited programmes can have a big part to play in the process of desistance. They can provide people with human capital, that is, the skills, abilities and attitudes they need to live a crime-free life (Maruna and LeBel, 2010). Programmes are accredited through the Correction Services Accreditation and Advice Panel (CSAAP) of independent, international experts. The accreditation criteria require:

- (i) a clear explanation of how the programme will deliver its intended outcomes, with the rationale being based on an understanding of the evidence on the causes of crime and desistance; and
- (ii) a research and evaluation plan.

At the point of reaccreditation (five years later), the evaluation or outcome study should clearly show what changes occur.

Historically, each probation trust, and many prisons, ran the SOTP-accredited cognitive behavioural psychological interventions designed by HMPPS for men who had committed sexual offences. After December 2015, they were restricted to men classified as medium risk RM2000 or above, after research indicated that treatment for low-risk men could be counter-productive.

These programmes were due to be replaced with new interventions that incorporated the bio-psycho-social model and would run in both custodial and community settings. Following the negative evaluation of the SOTP programmes in custody (MoJ, 2017), HMPPS deemed them unsuitable for re-accreditation and advised that they should no longer be commissioned in the community either. A new strengths-based approach to work with sexual offenders would follow. This approach focuses on improving wellbeing, recognising protective factors and giving men a positive outlook for their future away from re-offending. It builds on existing strengths and helps develop new skills to enable participants to overcome risk factors for offending.

More positive findings of the efficacy of sexual offender programmes – particularly in community and hospital settings – were reported in a systematic review of 27 studies involving approximately 10,000 offenders (Schmucker and Lösel, 2017). This research revealed that there was a significant reduction in reoffending rates (10.1 per cent treated sexual offenders reoffended compared with 13.7 per cent untreated). A recent study supports existing research that programmes alone will not enable significant change in sexual offenders. Men require ongoing practical help and support, tailored to their individual needs (Wakeling and Saloo, 2018).

The replacement programme, Horizon, was rolled out across the NPS and HM Prison Service. i-Horizon has recently been introduced in the community for those who have committed internet offences, but is not available in custody.

Both Kaizen and Horizon include the 'New Me MOT' as part of their accreditation. The 'New Me MOT' is a toolkit that can be used by probation officers to provide ongoing support to programme completers. It is grounded in both the principles of effective probation supervision and in the need to offer programme completers the opportunity to consolidate their learning and generalise this to other contexts.

A decision was made not to pursue immediate roll-out of Kaizen in the community due to evidence-driven concerns that a programme for high-risk and high-need offenders might not be warranted in the community setting. A pilot exploring the viability of implementing Kaizen in the community has been undertaken in the West Midlands, but the results of this are not yet available. The aims of this pilot were to explore both the need for Kaizen in the community and how it could most efficiently and practicably be operationalised.

Other interventions

The *Offender Management Act 2007* allowed for a polygraph testing condition to be added to the licences of sexual offenders released from sentences of 12 months or more. The condition can only be applied to those offenders assessed as both high risk of harm and high risk of reoffending. An evaluation in 2012 (Gannon, 2012) found that offenders in the polygraph test group were significantly more likely to make a clinically significant disclosure than those in the control group and that offender managers of the test group were more likely to initiate preventative actions to protect the public than those managing the control group.

There are a number of legislative provisions that aim to manage the risk presented by sexual offenders. These include Sexual Harm Prevention Orders (SHPOs), which were introduced in the *Sexual Offences Act 2003*. They allow courts to provide limitations to, and requirements of, those convicted or cautioned for sexual offences who are assessed as presenting a risk of sexual harm to the public.

Sexual offenders released on licence and subject to supervision by the NPS may have restrictive conditions attached to the licence. These include exclusion zones, which prevent an individual from entering a certain area, and conditions to prevent contact with certain individuals or groups to whom they may pose a risk.

1.3. Aims and objectives

Our inspection focused on the work delivered by the NPS both in the community and in custody, and that of HM Prison Service in custodial settings. We set out to address the following:

- 1. How do the strategic management and leadership of HMPPS and the NPS support and promote the delivery of a high-quality, personalised and responsive service for perpetrators and victims of sexual offenders?
- 2. How are staff in both organisations empowered to deliver a high-quality service for perpetrators and victims of sexual offenders?
- 3. Is a comprehensive range of services and interventions in place to undertake work with sexual offender cases, both in custodial and community settings?
- 4. How well do practitioners in the NPS and HM Prison Service support desistance from sexual offending behaviour?
- 5. How are victims and their children supported and protected?
- 6. How are arrangements with statutory partners, providers and other agencies established, maintained and used effectively to deliver high-quality services?

In custodial settings, we focused on the following areas:

- 1. National strategy: Is there a national strategy for the management of convicted sexual offenders? Do prisons have a local strategy for the management of convicted sexual offenders that is it based on a comprehensive needs analysis?
- 2. Work undertaken in custody: How proactive is the management of sexual offenders in custody? How many are eligible and suitable for accredited programmes? What is offered to those not suitable for accredited programmes?
- 3. Risk management: Are comprehensive multi-agency risk management release plans put in place well enough ahead of release? Are these developed in conjunction with the prison? Is the community-based NPS responsible officer actively involved in the months leading up to release and is the prisoner engaged in the development of his release plan?

Chapter	Content	
	How strategic leadership supports the delivery of work with men convicted of sexual offences.	
2. Policy, strategy and leadership	How staff and managers are empowered to deliver a good-quality service to those men, to enable them to reduce their risk of harm and address their offending behaviour.	
	The quality of work delivered to sexual offenders in custody, including interventions and release and resettlement planning.	
3. Work delivered in custody	How prison staff and managers are empowered to deliver a good-quality service to those men, to enable them to reduce their risk of harm and address their offending behaviour.	
4. Work to reduce reoffending	The quality of assessment planning and interventions – both accredited groupwork programmes, and work delivered on an individual basis.	
E Dublic protoction	The effectiveness of MAPPA and other partnership work.	
5. Public protection	How well the NPS considers the needs of children and victims.	

1.4. Report outline

2. Policy, strategy and leadership

In this chapter, we report on the strategic approach taken by HMPPS, HM Prison Service and the NPS to the work delivered with men convicted of sexual offences. We include our findings on the relevant operating models, projects and policies used across the agencies.

2.1. What we found

National strategy and leadership

Nationally, there are a number of different teams and boards responsible for a variety of strands of work with sexual offenders. HMPPS, NPS and HM Prison Service all have teams that are responsible for this area of work.

The HMPPS Sexual Offending Management Board (SOMB), which reports to the HMPPS Executive Management Board, has overall strategic responsibility for sexual offenders. It was relaunched in February 2018 when a new chair was appointed, following a recognition that a more joined-up approach to the work was required. Its role is to ensure that HMPPS protects the public and reduces reoffending of sexual offenders. The board provides advice and guidance to support the delivery of services to sexual offenders, and keeps organisations informed of new research and approaches. It promotes the development of a theoretical base to the work, and advises on appropriate risk assessment tools and interventions.

There are a number of other groups and teams with responsibility for sexual offender work. These include HMPPS's Head of Public Protection meetings (incorporating the National Sexual Offending Reference Sub Group), the Ministry of Justice Sexual Offender Policy Team, the Responsible Authority National Steering Group and the HMPPS Interventions Group. These groups all have roles to play in how sexual offender work is implemented and delivered in both the community and in custody. It was not always clear how responsibility for strategic initiatives was formally communicated across these groups. We found some overlap in roles and responsibilities and it will be for the SOMB to coordinate the work effectively.

NPS leadership

The NPS's Effective Probation Practice Division (EPP) was set up some 18 months ago. It is responsible for supporting the NPS in improving the quality and effectiveness of probation practice by overseeing performance and directly managing projects relating to learning, assurance and professional development.

The EPP develops evidence-based practice and tools for use by the operational divisions. For example, it has produced seven-minute briefings on various aspects of sexual offending practice. It is then for divisions to decide how best to communicate and implement this guidance. Some areas had briefings, others used team meetings and others relied on email. The seven-minute briefings for staff were particularly good, and it was disappointing to find that many staff did not know about them. Managers and other staff said that they felt bombarded with information. They found it difficult to keep up with who was sending what, and to decide how to prioritise the messages received. This meant they often missed important information.

The EPP is also responsible for advising HMPPS's Learning and Development Team on the NPS's training needs. The majority of NPS training and guidance was circulated electronically and many staff told us that this did not meet their needs and that they wanted more face-to-face training.

The NPS operating model relies heavily on the use of Excellence and Quality in Process (EQuiP) to disseminate process and policy information. EQuiP is not meeting the needs of all staff, and NPS statistics on its use indicate that only about half of staff access it regularly. While EQuiP is a 'work in progress', it cannot, and indeed is not designed to, replace good management oversight and support. Furthermore, there appear to be some omissions in what is available to staff on EQuiP, including the MAPPA Level 1 review process.

During fieldwork, we found some uncertainty about lines of accountability at an operational level. For example, an NPS manager might have a divisional lead role for an area of work, such as the ARMS, but might not ultimately be responsible for delivering it. It was clear that in some areas staff and managers were confused about who was responsible for what.

The NPS operating model, as delivered locally, allows staff to personalise work with those who are subject to supervision. We found that local senior managers did not always have a shared understanding of how the model should be applied to their teams' work with sexual offenders.

The NPS commissioned Jackie Craissati to evaluate the training and support needs of NPS staff who work with sexual offenders (Craissati, 2017). This was a helpful and welcome piece of work. It identified the need to provide training to staff in the strengths-based approach and to better support them in this work. During fieldwork, we found evidence to support many of the findings of this report. Work has commenced to address the issues raised.

The NPS has issued guidance on tiering (HMPPS, October 2017), setting out how PSOs can assist in managing sexual offenders, where these staff are appropriately trained and supported to do so. In the areas we visited, we found that implementation was at an early stage, with reservations of staff and difficulties in getting PSOs trained cited as the reason for the delays. Managers said they thought that PSOs had a role to play in the work, but that it needed to be carefully managed and overseen.

Before *Transforming Rehabilitation*, officers formerly employed by probation trusts could choose not to work with sexual offenders if they felt uncomfortable doing so. Given the profile of the NPS caseload, it would now be more difficult to accommodate staff who wish to 'opt out' of this type of work.

HM Prison Service leadership

Overall, strategic management of the sexual offender populations within each prison inspected was insufficient. None of the prisons had developed a strategy specifically for managing sexual offenders, although two of the five had started the process.

Most of the prisons we visited had undertaken some analysis of the general resettlement needs of their whole population, but some of these were not sufficiently robust, relying mainly on findings from prisoner surveys. Three sites were currently delivering accredited programmes for sexual offenders and each had undertaken a needs analysis to set out the type and number of groups needed. Of the five prisons where we inspected, only one (HMP Brixton) had completed a comprehensive

analysis of the wider resettlement needs of prisoners who had been convicted of sexual offences. They had started to use the information to highlight key problems and potential solutions.

In many respects, this reflected the absence of a national HMPPS needs analysis for those serving both custodial and community sentences. This was a concern given the increase in the population of sexual offenders across England and Wales, and their changing profile. For example, the increase in the number of prisoners convicted of historical sexual offences means that it is no longer unusual for prisons to hold men aged over 80. With this comes the need for appropriate health and social care provision. Without comprehensive needs analyses, it was difficult to see how HMPPS could respond with confidence to the distinct risks and characteristics of the diverse range of sexual offenders in prison.

The new case management model (OMiC) is due to be introduced over the next 18 months. It will see the introduction of core and specialist provision. All prisoners will receive the core service, such as categorisation reviews and home detention curfew approval. Others will be allocated to a prison responsible officer, who will be responsible for the overall management of cases up to an agreed point of handover to a community-based responsible officer. This includes all NPS cases with over 10 months left to serve in custody.

Prisoners should be released from a local resettlement prison. In this inspection, we found difficulties in transferring sexual offenders to the resettlement prison in their area of release, because of a lack of spaces for vulnerable prisoners at those sites and often because of the very specific social care and medical needs of the individuals. This meant that some convicted sexual offenders were being released from training prisons that did not have CRC resettlement and Through the Gate services.

Empowering practitioners

Overall, the NPS staff we met were enthusiastic and committed to their work. Many said that they viewed their role as a vocation, but added that they often did not have the appropriate tools, capacity and support to enable them to undertake this work effectively.

Before *Transforming Rehabilitation*, typically a responsible officer's caseload might have included a small number of sexual offenders; now sexual and violent offenders form most of the NPS's work. Latest figures show that sexual offenders constitute approximately one in five of the overall NPS caseload; however, many of the responsible officers we spoke to managed higher proportions.

We found that many NPS staff, of all levels, were struggling with the perceived dichotomy between the new strengths-based approach and an approach based on an understanding of public protection and the 'best predictor of future behaviour being past behaviour'. In the absence of strong direction from the centre, staff were left having to make their own decisions on the hypotheses they should employ to underpin their work. There was pressure on staff to prioritise both strands of the work, and while there has always been a tension between control and rehabilitation, we found that this was heightened given the risk profile of the NPS caseload.

We found inconsistent practice, with responsible officers plugging gaps as they saw fit, based on their previous experience and understanding. Their focus was more likely than not, and perhaps understandably, on public protection. This felt more 'right' to them than focusing on a strengths-based approach that many felt did not include a deep exploration of the individual's offending history.

We found that responsible officers had not had sufficient time or support to enable them to absorb and reflect on the change of approach and the associated tools they are now being asked to use. Staff said that they had received limited training on and input into the strengths-based model, Maps for Change and the Horizon programme. This led to many staff being ill-equipped to work with this cohort of offenders. A number told us that they were learning from the men they were supervising about what was being delivered, rather than from any other source.

Many were anxious about the work they were doing and were concerned about the potential for "*things to go wrong".* A number told us about their anxiety that the offenders they manage would commit further offences and about the subsequent serious further offence (SFO) process. Some staff said that they tended to increase levels of risk as a way of mitigating for this happening, which was of concern.

In some instances where staff said they felt competent, the practice did not always reflect this. Others acknowledged that they did not have the skills and knowledge that they needed. One said: "*I don't know what I don't know"*. Others said: "*I have no idea what to do in supervision"*, "*I have had to find my own way"* and "*I am making stuff up"*.

A number reported the challenges of talking to men about very intimate topics linked to their sexual and offending behaviour.

Prison offender supervisors received little or no training or supervision in the management of sexual offenders. Most said they had only ever received OASys training. Very few had received training in assessing and managing the risk of harm to others or training specific to managing the risks associated with those who have committed sexual offences. More positively, HMP Doncaster had provided training on child sexual exploitation offences.

Only one site had provided prison-based offender supervisors and probation officers with individual counselling to help them manage the potential emotional impact of this work. Some offender supervisors gave examples of how the nature of their work had affected their personal life or their view of others.

Line management by SPOs in the community was viewed positively by most responsible officers. Some also commended the support and guidance they received from quality development officers. That said, we found that SPOs within offender management teams had wide spans of control, with some supervising cases as well as managing responsible officers. Some SPOs themselves had no direct experience of working with sexual offenders.

In several areas, SPOs were responsible for chairing MAPPA Level 2 meetings, and some were responsible for managing victim teams. We question whether, with such a challenging workload, they can reasonably be expected to manage the risk of the cases that they have oversight of. We found that only one in three cases had sufficient management oversight. Supervision sessions between SPOs and responsible officers often focused on discussing the cases raised by the responsible officer, rather than a systematic review of the overall caseload.

Probation staff, including VLOs, did not feel appropriately supported by the NPS, given the distressing and disturbing content, and the high numbers of violent or sexual offenders, in their caseloads. We found a wide range of staff welfare issues, including difficulties in their personal lives and relationships, as well as work-related

stress and anxiety. One officer described the work as "*taking its toll"*, and another said, "*I find it difficult to cope"*.

The NPS has introduced some provision through the MoJ employee assistance programme PAM Assist for confidential individual and group staff support. This provision is relatively new, and we found that both officers and managers lacked confidence in what was on offer, and found it too generic. It failed to recognise the specialist work undertaken with sexual offenders by probation staff, and the support they required. Some staff told us that they felt that accessing the service would "*be seen as a weakness"*. One responsible officer said that staff had "*a complete lack of trust in in-service support"*. We found that there had been some delays in accessing the service.

We spoke with trainee probation officers (PQIPs), who felt that the training that they had undertaken, or were in the process of undertaking, did not sufficiently equip them to work with sexual offenders. There was a sense of having to work with this group of offenders too early on in their probation careers, before having the core skills and experience to do so. Some welcomed the opportunity to co-work or to be mentored through cases, but this was not always possible given staff resources. Experienced officers felt that the PQIP training did not enable colleagues to deliver the work competently, and that they were often left to support staff to fill the gaps in their learning.

Many victim liaison officers talked of difficult experiences meeting with victims of sexual offenders and their families. HMI Probation's fact-finding report in relation to the case of John Worboys (HMI Probation, 2018) found that these staff would benefit from additional training. While training has been rolled out as a result, some staff reported having not yet received it.

The recent roll-out of individual laptops for NPS staff was largely welcomed, in that it allowed for more agile working arrangements. However, many responsible officers said that they felt that it blurred the lines between home and work life. Responsible officers and managers said that they were regularly working long hours on their laptops at home during evenings and weekends "*just to keep afloat"*, and there were reported instances of staff taking laptops on holiday with them. Staff also said that it was becoming difficult to separate work and home, and the content of the work was sometimes distressing in the home and family environment. One said, "*when I take my laptop home it is sometimes hard to sleep after reading some of the work"*.

Good practice example – Newcastle

At the time of inspection, the North-East division was in the process of launching a web-based package of information and guidance for staff who work with sexual offenders. This will act as a 'one-stop shop' to provide all information in one easy-to-use portal.

While we are unable to evaluate its effectiveness, we were able to see a demonstration of the package and we welcomed the approach the division had taken.

National NPS staff survey findings

As part of our inspection, HMI Probation issued a national survey to NPS staff. Almost 300 staff completed the survey, which focused on how NPS staff work with men convicted of sexual offences. Most responses were from responsible officers with more than five years' experience in their roles, who represented all NPS divisions. The majority of responses were echoed in our inspection findings.

A quarter of staff felt that their training had not prepared them well enough to assess and work with sexual offenders. Over half said that there were significant gaps in their knowledge of the strengths-based approach, with some saying that they had very little understanding of this shift in approach.

Most staff were satisfied with the support provided by their line manager, and many said how support from colleagues was crucial to their management of the work. They were much less satisfied with the other support available for staff in relation to the work. 60 per cent of respondents said that they were 'not so' or 'not at all' satisfied with the emotional and professional support they were provided with.

Confidence levels of staff in dealing with this work received a more positive response, with staff saying that they felt confident in assessing risk and delivering work to sexual offenders in a significant majority of cases.

2.2. Conclusions and implications

It is over four years since *Transforming Rehabilitation*, and we found that the NPS has not developed quickly enough to the profile of its workload. We were told that there were several ongoing projects to improve the delivery of work with sexual offenders, for example conferences and face-to-face training, and this is to be welcomed. There is currently little evidence that the national work is leading to improvements in divisions, and more needs to be done to smooth the disconnect between the strategic approach and operational delivery.

We found a lack of understanding of the strengths-based approach, and associated tools and programmes. As a result, the work delivered was not consistent. Probation staff require more face-to-face training to tackle this complex area of work effectively. The PAM Assist counselling provision is not meeting their needs, when the emotional impact of the work is palpable. Without adequate support, there is a risk that the organisation will lose committed, skilled staff.

3. Work delivered in custody

In this chapter we report on our findings about the work delivered in custody with men convicted of sexual offending. We consider the strategic and operational delivery of the work across the five establishments we inspected.

3.1. What we found

Assessment and planning

For those prisoners judged to pose a high risk of harm to others, the OASys assessment should be completed by the NPS responsible officer. Those judged a low or medium risk of harm would have their OASys assessment prepared by the offender management unit (OMU) in the prison.

We asked each prison to evidence how many initial OASys were missing. The proportion varied from prison to prison and ranged from 11 per cent to 29 per cent. Further, some men had been sentenced without an OASys at court and many did not have a full pre-sentence report prepared. The prison had little information about the individual, making it difficult to assess risk and identify appropriate interventions.

In some cases, the initial assessment was not done or was done far too late into the custodial sentence to be fully effective. Some OMUs made every effort to encourage the NPS responsible officer to complete the initial OASys and sentence plan. HMP Littlehey had, over several months, made significant efforts to get the community responsible officer to complete an OASys assessment.

For sexual offenders, a lack of OASys at the start of custody led to delays in accessing accredited programmes, and in some cases progression to another prison. It could further present difficulties in applying appropriate restrictions on contact with children.

HMPPS no longer expects annual reviews of OASys, but in our view, it is good practice to do this during the custodial sentence, to evidence changes in risk and needs and demonstrate progress made. According to the data from one prison, 35 per cent of OASys assessments had not been reviewed in the last 12 months.

OASys assessments and plans should be reviewed following a significant change (such as recall to prison). However, only one in three custody cases had been reviewed following such changes.

Poor practice example

Caleb received a custodial sentence for raping a child in what was described as group-affiliated offending. He was released in August 2017 but recalled in March 2018 following his involvement in child sexual exploitation.

There was no OASys assessment completed since his release in 2017, even though he had been recalled and posed a high risk of harm to others. The offender supervisor had only received one email from the community-based responsible officer in the five months since the recall. The quality of assessments was variable. Too many simply duplicated information from the previous assessment and had not been updated to reflect progress made or issues arising. Too many assessments demonstrated a lack of confidence in identifying the specific issues linked to sexual offending behaviour and risk of harm, or a clear risk management plan.

Prisoners should be engaged in the development of a meaningful plan for their time in custody. They should know what they must do to progress and reduce their offending-related needs. Only eight out of 29 cases in our sample had a current sentence plan and only three were of sufficient quality. Many plans included out-ofdate objectives or objectives that were no longer relevant, which rendered the plan meaningless. Too few prisoners were directly involved in a sentence-planning board with their prison-based offender supervisor/probation officer and community-based responsible officer, although we did find some examples of this happening.

The RM2000 assessment is used as an indicator of eligibility for the Horizon and Kaizen accredited programmes. We found too many cases where this had not been completed and, as a result, prisoners could not be assessed for an accredited programme, which stalled their progress.

Models of offender management

We were concerned to find that some cases (including high risk of harm cases nearing release date) did not have the active involvement of a community-based responsible officer. We found 13 of 53 cases due for release that were either not allocated to a responsible officer or were allocated in name only.

In three of the prisons we visited, the OMU included probation officers working alongside uniformed offender supervisors. Probation officers tended to manage the higher risk of harm and more complex cases, but in some of the sites uniformed offender supervisors also managed high risk of harm cases. In one prison, offender management was contracted out; one of the others had moved to having probation officers working alongside non-operational offender supervisors rather than uniformed offender supervisors.

HMI Prison inspections routinely note that uniformed offender supervisors in custody experience frequent cross-deployment to operational duties across the prison. We found examples of this in our inspection. Frequent cross-deployment undermined the effectiveness of offender management, as those offender supervisors lacked time and opportunities to attend sentence-planning boards or undertake individual work.

Some offender supervisors said that they did not always know who was on their caseload, and a few told us that they had never met some of their prisoners. Staff shortages were an ongoing problem for some OMUs. They were often carrying vacancies and having difficulty recruiting to the posts, particularly prison-based probation officers. Subsequently, offender supervisor caseloads were high, regularly in excess of 60 complex cases.

In one prison we visited, there were delays in allocating prisoners to a prison-based offender supervisor or probation officer. We found evidence that some high risk of harm cases due for release did not have an allocated offender supervisor and were simply being 'overseen' by the prison SPO.

Quality of offender management

Given persistent cross-deployment and high caseloads, it is not surprising that the quality of offender management was often poor. OMU staff at most sites described their approach as "*firefighting"*, and "*reactive rather than proactive"*.

Many said they were only able to respond to events, such as a recategorisation review or a request for a MAPPA report, rather than being able to get to know the prisoner and deliver meaningful work. The quality of case management at the two sites with dedicated, non-operational case management staff was better. In HMP Doncaster and HMP Brixton, we could see evidence of more frequent contact and good attempts to engage prisoners.

Poor practice example

Jonathan, a young man, had been sent to prison for just over four years in 2016. His offences were very serious in nature and had all been committed when he was a child.

He had kept the same community-based responsible officer for much of his time in custody, but this changed just a few weeks before his release, when a new responsible officer in the community was allocated. This upset Jonathan and he wrote a very disheartened letter, almost begging for contact and reassurance from his new responsible officer. It was evident that he was unclear about his release plan.

He ended the letter by saying "*please write back to me"*, but despite this there was no evidence that the new responsible officer had tried to get to know him before his release.

Good practice example – HMP YOI Aylesbury

Peter's case had been particularly well managed. The responsible officer in the community and prison-based probation officer had worked closely together in the months leading up to release, to establish a robust release plan. This included Peter going to a drug rehabilitation clinic in the community, as drug use was linked to his sexual offending behaviour.

Information exchange

Good and regular information exchange between the NPS responsible officer and the prison-based offender supervisor is critical to effective risk management.

Not all OMUs had access to nDelius, which undermined good information exchange. This was more worrying when release was imminent.

The ViSOR multi-agency database was introduced under the *Sexual Offences Act 2003*. Its purpose is to provide a system to gather and share information on RSOs, violent offenders who have been sentenced to more than 12 months in custody, and others thought to be at risk of violent and sexual offending. The system has a key role to play in how agencies work together, and share information on risk.

The use of ViSOR in custody varied considerably. Some OMUs did not have access at all so were not using it; other sites had limited access. Most sites only used it to

complete the minimum data entry required by prisons rather than as an active case management tool to gather and share information. The lack of access to ViSOR in many of the OMUs meant that the minutes of MAPPA meetings were not always easily accessible to the prison-based offender supervisor or probation officer.

Categorisation and moving on

Reviews of prisoners' categorisation determine whether individuals can progress to a lower-security prison. We found that these were undertaken at the expected intervals set down by HMPPS. Most reviews were clear and provided a defensible recommendation, but in a few, recategorisation had been denied because the prisoner had not completed an offending behaviour programme. However, in some of these, the prisoner had been deemed unsuitable for a programme and the recategorisation review did not identify alternative evidence of progression. The lack of alternative offending behaviour work meant that many prisoners could not evidence a reduction in risk and therefore struggled to progress.

Some prisons found it difficult to move men on to their local resettlement prison for the last few months of their time in custody, and we were told that some resettlement prisons were reluctant to take sexual offenders. For other prisoners, moving on was hindered by the limited provision to accommodate medical and social care needs.

Those approved for placement in an open prison often had to wait too long to move due to the limited number of places. Delays resulted in the prisoner running out of time to make the move, which was a missed opportunity to help them prepare for release.

Public protection in prison

Prisoners who present risks to children (PPRC – Persons Presenting Risks to Children) or a known adult (HPPM – Harassment Public Protection Measures) should be assessed on arrival in prison and where relevant should not be able to contact any child or specified adults.

The initial assessment considers current and previous convictions. Where risks to children or a known adult are evident based on convictions, the prisoner is informed that he will not be able to have contact unless he makes an application and the risks are assessed by the prison, children's services and the NPS. We found some weaknesses in this important area of offender management, and risks to others were not always identified correctly.

As before, a lack of OASys undermined prison staff's ability to undertake a thorough assessment of risk to determine if contact should be allowed. In some prisons, initial assessments of potential PPRC prisoners were weak. The public protection manual does not make clear which factors should be considered when identifying PPRCs. In one prison, the assessment was limited to current and previous convictions only, and did not consider wider information about potential or ongoing risks.

Poor practice example

Trevor had been able to contact a victim by using another prisoner's phone account, and the prison's response was too slow to prevent further victimisation. Contrary to expectation, mail and telephone monitoring of PPRC and HPPM cases after arrival in that prison had ceased, which left victims and potential victims open to further abuse.

In four prisons, mail and phone monitoring was used appropriately and with the correct authorisation. The prisons also regularly reviewed the need to continue monitoring. However, in one prison, reviews were being undertaken by case administrators rather than offender supervisors or probation officers. This was not a defensible position, as a professional risk assessment was required. In another prison, monitoring was not done at all.

Applications made by prisoners for contact with specific children were dealt with appropriately, but some took too long to be completed because of delays in responses from children's services and the NPS.

Risk management and planning for release

The public protection manual issued in 2016 states that prisons must ensure that information about risk assessment and risk management is shared between departments within the establishment, and that information about high-risk offenders is coordinated through inter-departmental risk management team (IRMT) meetings.

The MAPPA guidance of 2012 (updated in November 2017) confirms that the prison must ensure that information from the IRMT is passed to the responsible officer in the community and is incorporated into the sentence planning process. The prison must also inform the police.

Each prison had an IRMT, but at each site we visited we found weaknesses in the meeting arrangements. Only one IRMT reviewed all high-risk cases due for release; others only reviewed those managed at MAPPA Levels 2 and 3. This meant that the IRMT did not manage high-risk cases at MAPPA Level 1 and those not allocated a MAPPA management level.

Attendance at most of the IRMTs was poor. Few departments from across the prison sent a representative, which undermined the IRMT's function as a prison-wide information-sharing body. Community-based responsible officers were not routinely invited to participate in the IRMT and minutes of the meeting were not routinely sent to them. Overall, the IRMTs were not effective. We could not find evidence of the meetings making a difference in terms of risk management planning.

With a few notable exceptions, planning for release was poor. Only seven out of the 29 cases inspected had a clear risk management plan prepared for release, and only three of these were comprehensive. Too few responsible officers were sufficiently involved in planning in the last six months prior to release. Many had not been involved in a pre-release meeting with the prisoner and the offender supervisor.

Structured offending behaviour interventions

Identifying the best offending behaviour treatment pathway

A well-developed treatment pathway should include a range of constructive and restrictive interventions aimed at reducing the risk of harm or likelihood of reoffending. We found an over-reliance on the use of accredited programmes for managing convicted sexual offenders in prison, with little consideration given in individual cases to how other activities in prison could contribute to reduced risks on release. While some sentence plans included objectives related to education, work or training, it was often difficult to see how these activities would contribute to reducing risk of harm in the future.

Without an up-to-date OASys assessment and sentence plan, it was difficult to establish the best treatment pathway for some men. Some prisoners could spend their entire time in prison without doing any structured interventions to address their offending behaviour, such as developing personal strengths, setting positive goals for the future and making the link between their attitudes, thinking and behaviour and their offending.

Accredited programmes for sexual offenders in custody

Accredited programmes are targeted at prisoners who have a medium or high risk of reconviction, using RM2000. Those judged to have a low risk of reconviction would not be eligible for a programme unless there were well-evidenced reasons to override the RM2000 classification.

Three of the five sites visited were delivering some of the new suite of sexual offending programmes. Waiting lists at these prisons were not excessive and cases were prioritised appropriately.

At the time of this thematic review, two prisons were not delivering accredited programmes to sexual offenders, despite holding a large proportion of prisoners convicted of those crimes. One had been designated as a dedicated resettlement prison, so should not have to deliver these programmes, but 20 per cent of the prisoners there needed one. The other prison was planning to start running Horizon shortly after we visited, but the data provided to us showed that two-thirds of the prisoners convicted of a sexual offence would not be suitable for this programme due to being assessed as low risk of reconviction.

One prison did not have programmes for those with learning disabilities and learning challenges, despite holding a large proportion of prisoners convicted of sexual offences who had such difficulties.

Staff delivering accredited programmes paid good attention to assessing individual treatment needs. They carried out a programme needs assessment (PNA) for high-and very high-risk prisoners to determine which programme was most suitable, and encouraged a move to another prison where a programme was available.

We found a substantial proportion of sexual offenders in our sample who were assessed as having a low risk of reconviction, based on RM2000, and therefore deemed unsuitable for an accredited programme. Other reasons for prisoners being deemed unsuitable included not having enough time left to serve in custody, being unwilling to take part in the group or having health or other personal issues that prevented them from participating.

Alternative interventions

Offender supervisors and custody probation officers had little time to deliver structured individual work aimed at reducing risk of harm and likelihood of reoffending. Most uniformed and non-operational offender supervisors did not have any specific training to undertake such work. Case records showed too little work taking place with those not suitable for programmes, little work aimed at motivating the prisoner and little focus on reinforcing the lessons learned on accredited programmes.

Very few resource packs were available to support practitioners in delivering individual interventions. Some prison-based probation officers knew about the Maps for Change toolkit, and used it occasionally. Few practitioners were aware of a toolkit available through HMPPS called Identity Matters. This is a programme aimed at people who have committed a crime through their group affiliations. Although it is not specifically designed for those convicted of sexual offences, it may be relevant to some people.

To address the lack of alternatives to accredited programmes, HMP Littlehey had developed a useful guidance document supported by a locally developed toolkit to structure more meaningful work with those convicted of sexual offences.

Two sites delivered the Offender Personality Disorder (OPD) Pathway, a joint HMPPS and NHS project. At HMP Aylesbury, the 'pathways' project provided an excellent range of structured offending-related interventions for those who were not suitable for accredited programmes or to further engage those who were doing or had done one.

Poor practice example

Lawrence was a high-risk, long-term prisoner who was unclear about his release plan. He was frightened and worried about being alone in the community. He explained that he just wanted to be supported and helped in a practical way. One of his biggest frustrations was the lack of discussion about his release plan. He explained that "*no one sits down and talks to you*" and "*it's worrying me to death*".

Resettlement support

In four out of five of the prisons we visited, CRC resettlement provision was funded by Through the Gate projects. This aimed to provide sexual offenders with a resettlement plan on arrival in custody, a review of the plan 12 weeks before release and access to basic resettlement help.

The quality of provision varied greatly. Most CRCs had staff shortages, which made it difficult for them to keep up with the number and timeliness of resettlement plans.

At one site, the CRC contract was limited to making referrals within the prison at 12 weeks before release. This prison recognised that this model was not effective as, by the time somebody is this close to release, they have accessed a range of provision within the prison, including mental health support and substance misuse help.

Provision made available to RSOs was limited by contractual agreements. For a prisoner to receive help beyond the very basic resettlement support, they needed their NPS responsible officer to buy this from the CRC. Responsible officers rarely bought these additional services, which led to some resettlement needs being unmet.

There was a lack of communication between CRCs and offender supervisors. At one prison, the CRC caseworker interviewed prisoners assessed as high risk of harm to others without any knowledge about their offence or the risks they posed.

Some CRCs provide a resettlement programme, but this was not delivered to sexual offenders in the sites we visited.

Accommodation on release

The lack of suitable accommodation for prisoners released from custody is a problem nationally. Given the increase in men convicted of sexual offences, there are now insufficient places in approved premises (APs) for all of them to be housed on release. HMI Probation's recent inspection of the role and use of APs concluded that there was an estimated shortfall of 25 per cent (HMI Probation, 2017). Three of the five prisons visited reported a shortage of approved premises places and referrals that had been made so near to release that a place was not available. Further, there were too few places for those with social care or disability needs. Finding care homes to manage the release of men with high-level social care needs was a growing problem, given the ageing population in prison. This is beyond the direct control of HMPPS and requires a national, joint agency and governmental response.

In one high risk of harm case, the prisoner was found last-minute accommodation in a night shelter, but only for two nights. We further saw two examples of men convicted of sexual offences being released to budget hotels or other temporary accommodation. We found it hard to see how such accommodation could be defensible in terms of protecting the public. Other hotel residents are likely to be transient and close monitoring of the offender problematic.

Poor practice example

Jack, a man with significant disabilities, had served four years in prison and was due for release. The responsible officer had never met Jack but did arrange a place in an approved premises, given his high risk of harm to others. This placement fell through when, just three weeks before release, the responsible officer realised the room available did not meet Jack's disability needs. He was instead released to a budget hotel.

After Jack's release from prison, the case record shows that he had been visited at the budget hotel by an NPS member of staff. He reported not having any money and being hungry. Two weeks after release he was due to move out of the budget hotel only to be moved to another one, because more appropriate accommodation had still not been found.

3.2. Conclusions and implications

Much of the work delivered to sexual offenders in custody was poor.

Staff working with sexual offenders in custody are not trained and supported sufficiently well to deliver a service that protects the public and reduces risk of harm. Moving sexual offenders around the prison estate to access appropriate interventions was problematic, and this affected men's ability to make progress. Opportunities to move to open conditions were limited because of a lack of available places. Where men had not accessed a sexual offending accredited programme, insufficient individual work was being undertaken. Consequently, it is possible to complete a prison sentence without undertaking work before release.

Planning for release, including the use of IRMT and MAPPA, was not well managed. Joint work between NPS staff in the community and prison offender management teams was not done well in many cases, resulting in poor risk management and release plans. Resettlement was hampered by the lack of suitable accommodation for sexual offenders.

The OMiC project will address some of the issues and areas for improvement raised in this report, but will not address all.

4. Work delivered by the NPS to reduce reoffending

In this chapter we report on how the NPS identifies, assesses, plans and delivers work for men who have been convicted of sexual offending.

4.1. What we found

Assessment of men who have been convicted of sexual offending

NPS court staff or pre-sentence report authors complete Risk Matrix 2000 (RM2000) assessments, prior to men being sentenced for their offences. Responsible officers are then required to complete OASys within 15 days of sentence, and ARMS within 6 weeks, and then to review the OASys assessment after completing ARMS. The responsible officer should then regularly review OASys and ARMS to ensure that information remains meaningful and accurate in the light of changing circumstances.

Almost all the specialist RM2000 assessments that we inspected had an accurate risk level recorded. We found some assessments where information used to inform the overall rating was inaccurate; however, these errors did not affect the assessed risk level.

When assessed in isolation, the initial OASys assessments were sufficient in 82 per cent of cases. Some assessments did not focus sufficiently on sexual offending and in others the men had not been involved in their completion.

ARMS assessments had been completed by the NPS in three-quarters of cases inspected. Just over half had been completed in a timely manner. The quality of ARMS assessments varied significantly, but were generally not sufficiently comprehensive. There was no quality assurance tool in use, nor any standardised monitoring of whether assessments had been completed. Many we saw were superficial and lacked evidence that officers had fully explored areas such as sexual preoccupation, opportunity to reoffend and commitment to desisting from offending.

For many responsible officers, the task of completing an ARMS assessment is considered an "*add-on"*, a "*police task"* or "*a box to tick"*, rather than being integral to good-quality risk assessment. We found many staff who felt that there was a significant amount of duplication, having already completed the OASys assessment.

Where staff fully understood the relevance of ARMS, they had a better understanding of the triggers of, and factors linked to, the individual's sexual offending. Overall, however, we found that ARMS had been completed in isolation, and in just under three-quarters of cases it had not been used to inform other assessments or the delivery of work.

The completion of ARMS assessments, and debates about which agency was responsible for what, had affected working relationships with the police. Staff from both police and probation expressed their frustrations with the process.

The use of multiple assessment tools, at different times, was cumbersome. ARMS, where completed, rarely led to a review of the OASys assessment, as required. Overall, when we considered assessments using all three tools, we found them to be insufficient in a third of cases.

Planning of work to be delivered to men who have been convicted of sexual offending

Overall, we found that plans were good enough to support desistance in the majority of cases. This did not, however, always lead to appropriate interventions being delivered.

Over a third of inspected plans did not sufficiently focus on the interventions, activities and services most likely to reduce sexual offending. In a quarter of cases, they were not sufficiently clear about the nature, pattern and type of contact required to deliver the work.

We found limited evidence that plans had considered the prioritisation of interventions. In a third of cases, both plans and assessments failed to sufficiently engage men in the process, and many did not consider restrictive elements and external controls. In too many cases, plans did not consider needs related to diversity and personal circumstances of men, nor their levels of motivation and readiness to change.

Responsible officers tended to prioritise community cases above those due to be released from custody, and this reflects our findings in prison. Information from the prison was rarely included in release and sentence plans. This is a missed opportunity to appropriately identify both the individual's progress and any concerning behaviour.

Responsible officers in the community described an inconsistent experience of offender supervisors in custodial settings, and difficulties in contacting the correct person. This mirrors the view expressed by custodial staff and highlights considerable difficulties with this key relationship.

Poor practice example

Neil was sentenced to imprisonment for sexually assaulting a child under 13. He was released to live with his mother in October 2017 and was managed at MAPPA Level 1. His family colluded with his denial of the offence and there were concerns about his access to children.

Although assessed as posing a high risk of harm, the planning of work to be delivered and management of the case relied too heavily on his self-disclosure and cooperation with appointments. OASys and ARMS were completed, but the risk management plan did not include the work of other agencies.

Neil ultimately breached his licence condition not to have unsupervised contact with a child under 16. The breach resulted in a warning and no further action.

Good practice example – Bedford

Kevin was sentenced to 30 months' imprisonment for four counts of sexual assault. He has no previous convictions and denies his offending.

Before Kevin's release from custody, the responsible officer had completed a significant amount of pre-release planning, including some face-to-face prison visits, to explain what was expected of Kevin on his release.

On his release from custody, Kevin's case was well managed and all risk and need factors were identified and addressed by actions on both his risk management and sentence plan. Appropriate referrals were made to children's services. There was a joint visit with the police and appropriate interventions took place, despite Kevin's resistance and continued denial.

Interventions delivered to men convicted of sexual offences

Given the identified gaps in assessments and plans, it is not surprising that the delivery of interventions, both in groups and individually, was lacking in many cases. We found that in 40 per cent of cases there had been no work focused on reducing the risk of sexual offending at all, and in just under two-thirds of cases insufficient progress had been made. Too many men had not had the opportunity to reduce their risk of sexual offending or to explore the factors in their life that were likely to prevent them from offending in the future.

Accredited programmes

The most recent information available from the NPS about the number of completions of sexual offending programmes is for 2016/2017 and this relates to the SOTP programme. Data regarding the completion of accredited programmes, including sexual offending programmes, for 2017/18 is incomplete and has not been published.

Horizon was being delivered at all the sites we visited, and some areas were still completing the last of the legacy programmes. Access to programmes was an issue for some men. In some areas, we found men having to choose between work and attending the programme. Furthermore, the programme for those with learning disabilities had not been rolled out in all areas.

Of the cases reviewed, 42 had a licence condition or a requirement to complete an accredited programme. In 26 cases, Horizon was named, while in 16 cases the programme was not specifically referenced. We found only 17 cases where an accredited programme had commenced.

Where men did not have a licence condition or requirement to complete an accredited programme, responsible officers rarely considered making a referral, despite the likelihood that many cases would have been suitable. Most programmes teams did not have a process for reviewing potentially suitable cases, and relied solely on referrals being made by responsible officers. While the use of clinical overrides by treatment managers is tightly managed, we saw some cases where it would have been appropriate and where men could have benefited from participating in a programme.

Under E3, the staffing profile of the accredited programmes team was reviewed and in most cases the number of programme tutors reduced. This has meant that fewer NPS staff have undertaken the training to deliver sexual offending programmes than previously would have been the case. The impact has been an overall reduction in the knowledge base for delivering sexual offender programmes across the organisation.

Programme teams often described working in isolation. They reported that there was less co-working with offender management teams than had been the case with the former suite of accredited programmes, and staffing profile before E3. Programme staff had a much better understanding of the strengths-based approach than responsible officer colleagues. However, many had reservations about the programme material, and in our view, would benefit from further input on the approach.

We met some committed, skilled programme facilitators in some areas, but in others we found a lack of facilitator skill. It was clear that they are increasingly working distinctly from offender management teams, rather than with them.

Programme staff were concerned that their individual skills and knowledge of sexual offending could diminish over time, given that Horizon, unlike SOTP, does not include sexual offending focused exercises. They spoke of no longer being able to deliver individual work to sexual offenders to support responsible officers, and said they were no longer able to provide guidance and training to colleagues.

Some programme staff said that they adapted the programme to better suit the needs of the men they were working with. This included disclosure of offending in some instances, which has the potential to undermine the strengths-based approach of Horizon, if not done sufficiently well.

Given the relatively short time Horizon has been running in the community, there has been no formal impact evaluation of it, although there is a published process evaluation.

Video recording of programme delivery was problematic in some areas because there was no appropriate equipment, although in all areas some monitoring was being undertaken by treatment managers, often by direct observation.

Individual interventions

Where staff were delivering individual work with sexual offenders, the variety and quality of it varied significantly. Responsible officers were employing a mix of tools, often legacy packages, and used these largely in a reactive rather than a considered and planned way. Some responsible officers lacked professional curiosity, accepting men's reports of circumstances and events without checking other sources. Some were dealing with a variety of crises or other issues more often than focusing on sexual offending and risk management, in supervision sessions.

When asked why they used particular tools, they said, "*because I always have*", and "*it has worked for me in the past*".

Maps for Change is an individual intervention, underpinned by the strengths-based approach. It is for cases where the assessed RM2000 score is low, but it can also be used for medium and high-risk cases. It was introduced with limited training for staff, and we found no national monitoring of the toolkit, nor any identified evaluation process. Managers in North Wales did monitor use of the tool; however, they were yet to extend that to include quality assurance. Overall, in the cases we inspected, we found that Maps for Change had been used in less than one in six. We were told that there is a new measure that will monitor usage of the tool, which is to be welcomed. We were told by the HMPPS Sex Offender Policy team that Maps for Change is to be updated and re-launched, with more guidance on each exercise for staff to follow. However, this will not include any training for staff, and in our view, such a relaunch needs to do more to train and inform staff about the toolkit and the underpinning strengths-based evidence.

Where men were in denial, or partial denial, about their offending (something not uncommon for sexual offenders), many responsible officers lacked confidence in working with them, often doing nothing at all.

We saw many cases where staff had not maintained electronic records sufficiently well. Content varied in quality, even within the same case record. Almost one in three were insufficient. In these cases, it was difficult to demonstrate defensible decision-making. Staff said they were often left with a choice of whether to "*do the work or record it*".

The relationship between men and the staff working with them is key to making progress throughout their sentence (Weaver, 2016). In both community and custody, a lack of continuity in responsible officers and supervisors was a hindrance to managing cases effectively. We found some cases in which the prisoners had up to five responsible officers while they were in custody over the last 12 months. Almost a quarter of the community cases reviewed had three or more supervising officers within a 12-month period, and this is excessive.

As with our findings in custody, we found evidence of cases being 'stacked', and in one area we saw written local guidance supporting this practice. This happens when longer-term custody cases are held by an SPO or another member of staff in name only on nDelius and allocated to a responsible officer 10 months before the prisoner is released. When these cases are allocated, responsible officers find themselves having to quickly get to grips with a new case. For longer-term prisoners, this is likely to take some time, when planning for release should take priority. While it is for individual areas to manage their workloads as they see fit, it is simply not acceptable for offenders to be managed in this way. This issue was raised in HMI Probation's inspection of London NPS in 2017 (HMI Probation, 2018a), and yet the practice remains in place in that and other divisions.

Where sexual offending cases are managed under the Offender Personality Disorder (OPD) Pathway, clinicians provide responsible officers with case formulations. Some individual work is delivered across England and Wales to sexual offenders through forensic psychology teams. We found that the pathway was underused with this cohort of offenders, with less than a third of the cases inspected having been screened as to their suitability for it. Fewer still had been considered suitable for the pathway and only seven had a case formulation that informed the delivery of interventions. OPD pathway staff said that some responsible officers did not 'buy in' to the pathway, and this prevented their cases getting access to the potential benefits of the provision.

OPD pathway clinicians were available to provide more generic support to staff in some areas, both for individual cases (not necessarily those demonstrating PD traits) and for more generic staff support needs. This is an example of where other services have plugged the gap in the emotional and professional support available for staff.

Fourteen cases in our sample had a licence condition to undertake polygraph testing. Seven had been completed in good time. One was excused on the grounds of illhealth, one completed it unacceptably late and five had not been done. Both the OPD pathway and polygraph provision are helpful resources. More should be done to promote their use to responsible officers working with sexual offenders, as this would ultimately support them in the delivery of their work.

Reviews of work delivered and enforcement action

In many cases, an appropriate OASys review was not completed when it should have been or in response to a change in circumstances. Some plans had been 'pulled through' from previous assessments on OASys rather than being a considered update of work undertaken.

Risk management plans were not updated sufficiently well, particularly when new information, including from other agencies, was received.

Responsible officers said that, in the context of a busy and demanding workload, reviews were much less of a priority than other work. Officers often spoke of a tacit acceptance by managers that reviews would not be completed.

The majority of cases in our sample had not re-offended throughout their sentence period, although nine had done so and been returned to custody. One case should have been recalled earlier than was the case. Fifteen cases had breached a licence condition, with 12 having breached a restrictive order such as an SHPO.

We found that, in 42 cases, enforcement action was required for a variety of reasons, including non-attendance at appointments, breach of licence conditions, or a subsequent offence. In almost half of those cases, appropriate action, for example the issuing of a warning, had not been taken by the responsible officer.

Poor practice example

Sean had no work delivered to reduce the risk of his reoffending. In one session, the responsible officer had tried to deliver one of the sessions from Maps for Change, but Sean had become challenging, and therefore it had been stopped and not returned to again. Sean's appointments were frequently held at the reporting centre or he was seen by a duty officer. There was no consistent sequence of appointments where he was seen by his own responsible officer.

Good practice example - North Wales

Arun was imprisoned for sexual assault on a child under 16. He has a history of poor mental health, drug use, and chaotic behaviour. When he was released to an approved premises, there were concerns about his vulnerability and his risk to potential victims of all ages, which presented a significant challenge to manage effectively.

His responsible officer secured mental health support and drug services for Arun and worked well with children's services and the police to manage the risk presented.

Despite the responsible officer's best efforts, Arun breached the terms of his sex offender registration and was appropriately recalled to prison.

4.2. Conclusions and implications

The current process of assessing offenders using a multitude of tools is unwieldy. It results in duplication and in assessments being completed in isolation as opposed to having one accessible and comprehensive assessment.

Responsible officers used both OASys and RM2000 well in the majority of cases. However, we found significant shortfalls in the completion of ARMS, the specialist sexual offender assessment. The benefits of completing these assessments was not well understood and those that had been done were rarely incorporated into the overall assessment.

Planning was often not sufficiently detailed, focused on desistance or clear as to the roles and tasks to be undertaken by men and those working with them.

Accredited programmes for sexual offenders in the community were not used often enough. Where offenders did not participate in these programmes, individual work being delivered was inconsistent at best and non-existent at worst. Staff are using a variety of tools to deliver individual work and this does not necessarily fit with the strengths-based approach.

Reviews of the delivery of work with sexual offenders were also insufficient, and took place in too few circumstances. As a result, significant new developments such as meeting a new partner were not always being captured in the assessment and subsequent plan.

5. Public protection

In this chapter we report on how well MAPPA arrangements support public protection at both a strategic and operational level. We also present our findings on the work undertaken by the NPS to protect victims and safeguard children.

5.1. What we found

MAPPA

While this was not a full inspection of the delivery of MAPPA arrangements, all RSOs fall under the umbrella of MAPPA, due to the nature of their offence and subsequent registration.

The *Criminal Justice Act 2003* provided for the establishment of MAPPA in each of the criminal justice areas in England and Wales. They require the local criminal justice agencies and other bodies dealing with offenders to work together in partnership to manage these offenders.

The responsible authorities for MAPPA are the police, the NPS and HM Prison Service. The three services should work together to ensure that appropriate resources are available to manage the risks posed by sexual, violent and other dangerous offenders in the community, and ensure that the public, including victims and children, are protected as far as possible.

There are three levels of MAPPA management, and the guiding principle is that cases should be managed at the level necessary to manage the risk. The three levels are:

Level 1: ordinary agency management

Level 2: multi-agency management

Level 3: enhanced multi-agency management.

Although there is some correlation between the level of risk and the level of MAPPA management, they are not necessarily equivalent. It is important that risk levels are not conflated with MAPPA management levels. For those offenders largely managed by one agency, the case can normally be managed effectively at MAPPA Level 1.

MAPPA in custody

HM Prison Service should always contribute to Level 2 and 3 meetings when the offender is still in custody. We had concerns about the operation of MAPPA in custody cases. Not all cases we reviewed had an up-to-date OASys or RM2000 assessment, which made defensible decision-making about the most appropriate MAPPA management level difficult. Communication between the prison and the NPS to set the MAPPA management level prior to release was inconsistent, and in many cases did not happen.

Only eight of the 29 custody cases inspected had evidence of the responsible officer confirming the MAPPA management level prior to release. Some cases had been allocated to MAPPA Level 1 even though, in our judgement, they should have been managed at Level 2 to ensure an active multi-agency approach. Not all MAPPA cases managed at Level 1 had an up-to-date risk management plan and we could see little evidence of Level 1 reviews having taken place.

Notification of community MAPPA meetings sometimes arrived too late for the prison to provide a comprehensive report or ensure somebody could attend. One case was due for release three months after this inspection. The prison only found out that the case was managed at MAPPA Level 2 when they received a request for a report, despite some Level 2 meetings having already taken place.

MAPPA in the community

The majority of community cases were managed at an appropriate MAPPA level to support public protection. However, we found that the criteria for each level were understood and applied differently across the inspected areas. In one area, there is a blanket policy to supervise all life sentence prisoners and those imprisoned for public protection (IPP) cases at MAPPA Level 2 for 12 months after release, regardless of the presenting management need. In other areas, we found that staff were reluctant to refer anything to MAPPA Level 2 because they knew it would not be accepted, regardless of the presenting issues, due to the 'high bar'.

In one area, MAPPA Level 2 meetings were held on cases where there did not appear to be any justification for this, either in relation to active multi-agency management or the effective management of risk. Responsible officers appeared to be using MAPPA Level 2 meetings as a safety net to manage their case. This had resulted in a high caseload of MAPPA Level 2 cases, and delays in getting cases discussed at MAPPA meetings. As a result, appropriate MAPPA Level 2 cases may have faced delays in accessing resources.

The MAPPA Level 1 review process was inconsistent. A good process should include a six-monthly review, including ARMS and OASys, which is then documented on nDelius or on a proforma.

In some areas, cases were reviewed at the beginning of a sentence and then not reviewed after this. Other areas had a more formal MAPPA Level 1 process, although in practice these were often not being undertaken. An appropriate review had not been completed in over 40 per cent of MAPPA 1 cases in our sample. Where MAPPA Level 1 reviews were taking place, they were almost always an NPS-only exercise. They did not consider information from other agencies, particularly from the police.

We met with members of the MAPPA Strategic Management Board (SMB) in all areas inspected. Accommodation of sexual offenders was a key challenge in all areas, and an example of where SMBs should have had more impact. However, we found only one area where senior housing managers were engaged by the SMB to address this issue.

There are challenges for local authorities in prioritising sexual offenders for limited housing stock. However, this needs to be understood as part of a wider risk management model, with SMBs influencing decision-making. In one area, a police SMB Chair stated that MAPPA performance indicators focused on attendance at meetings rather than their effectiveness. He described the SMB as a "*talking shop"* with few worthwhile outcomes. Overall, SMBs needed to do more to drive improvements in the multi-agency management of sexual offenders.

Attendance at MAPPA meetings by professionals from all agencies was generally good, with the right agencies being around the table to discuss individual cases.

Poor practice example

Michael was sentenced to imprisonment for child sexual exploitation offences. He was released to an approved premises. Over five responsible officers had worked on the case and the current officer had been allocated just three weeks before Michael's release.

The officer was relatively inexperienced and had not dealt with similar cases in the past. There was no evidence of any management oversight in this case, which was managed at MAPPA Level 1.

No offending behaviour work had been completed. The sentence and risk management plan did not sufficiently consider the need to protect the current victim on release. There was no liaison with the local specialist child sexual exploitation team, and the officer was unaware of the nationally issued resource pack that includes guidance on working with this type of offender.

Michael moved from the approved premises, back to his family home address, despite presenting a potential risk of harm to children. He was later recalled to prison.

Good practice example: Rochdale

Darren was sentenced to imprisonment for the rape of a child under 16. He has a history of other violent offences and of not complying with licence conditions. When first released, he was recalled after he failed to report to an approved premises as directed. Before he was recalled, he tried to take his own life.

Impressive work was undertaken by the responsible officer both before and after release, to engage mental health services. After release, coordinated work was undertaken with the approved premises staff, drug agencies, the police and mental health staff.

As a result, Darren has taken significant steps in addressing his mental health, drug and personal issues, all of which help to reduce his risk of reoffending.

ViSOR

As in custody, ViSOR had not been used to share information effectively in the community. We found that this had been done well in only one out of ten cases.

Most NPS staff do not have regular access to the ViSOR system, and the informationsharing process relies on staff emailing information to ViSOR administrators and/or using nDelius to transfer information. Both routes have the potential for data to be missed or key information not to be communicated.

We found many cases in our sample where the relevant ViSOR marker on nDelius had not been 'checked'. Some staff were unaware that there was a process whereby information from nDelius could be readily shared electronically with the ViSOR administrator, where the appropriate markers were in place. Where the system was used, the entries were not always regular enough or sufficiently detailed. NPS staff are currently undertaking vetting and training to enable them to access the system directly, and there are a number of technological challenges that still need to be resolved.

Managers said that the vetting of staff to access ViSOR has been a challenge. Some staff were reluctant to complete this process. Access to training had been problematic and a combination of the two factors had led to delays. None of the inspected areas had fully implemented ViSOR 'read only' access for staff. This will not in itself address the outstanding ViSOR issues, as much is related to how the NPS provides information to other agencies using the system, rather than their own access to information.

The implementation of Windows 10 technology across NPS divisions has presented challenges in accessing ViSOR. Many staff and managers were simply unaware of how this could be done.

Inspectors accessed ViSOR via alternative means, for example at a police station, and were able to review records on all but five cases in the community. We found a lack of NPS information on most cases. Where it was included, this had largely been added via email correspondence. Many NPS risk management plans had not been included on ViSOR, and ARMS assessments were not always available even if they had been completed.

Wider partnership working

We found that strategic relationships across agencies were positive. We received good feedback from partners, including police and children's services, and found good examples of working together to address matters such as child sexual exploitation.

These relationships are key in the delivery of work with sexual offenders, and close working arrangements are important. What is also important is how these strategic relationships filter to operational delivery, and it was in this area that we found a less positive picture.

In our national survey, over three-quarters of officers said that they were either quite or very satisfied with their local area's multi-agency approach for working with sexual offenders. This viewpoint was supported by a similar percentage of responsible officers, when we interviewed them about their cases. However, this contrasted with our findings in the cases themselves. In too many cases, responsible officers had not worked effectively with the police and children's services.

The thresholds for accessing services were high in many partner agencies, particularly social care. Many officers spoke of having to repeatedly contact partners to access services for their cases. In one area, public protection police and social workers were not allocated to men prior to release. This had the potential to affect multi-agency working and the ability to demonstrate clearly to men at an early stage of their supervision period that agencies were working together to manage their risk.

We found limited use of specialist third-sector organisations to support both workers and sexual offenders. More could be done to explore opportunities with these groups to enhance the services and support available.

Good practice example – Bedford

A rent deposit scheme had been commissioned jointly by the Police and Crime Commissioner, NPS and CRC. It provided rent deposits for offenders to gain access to privately rented housing. While the project was not solely for sexual offenders, it demonstrated how agencies could work together to provide for those who struggled to access housing due to the nature of their offending.

Good practice example – Rochdale

Much work had been undertaken at a strategic level with child sexual exploitation cases, and the MAPPA partnership's response to this high-profile work. Strategic managers from children's services noted that the NPS had been key in assessing the impact of a television drama focused on child sexual exploitation in the area. The NPS senior manager had convened and hosted meetings with the senior leaders of 15 local organisations to ensure measures were put in place to protect the victims, NPS service users and families involved. This made a significant contribution to ensuring community cohesion.

Protecting victims and children

Overall, assessments and plans were more likely to give due consideration to the potential risk of harm to known adults and the public generally than children.

In over a third of assessments, responsible officers failed to consider information from other agencies, including children's social care. Had they done so, they would likely have been able to complete a more holistic and comprehensive assessment and subsequent plan, appropriately addressing safeguarding factors.

We were concerned to find that a third of assessments did not sufficiently analyse specific concerns and risks related to identifiable or potential victims. Individual offenders' accounts were accepted in too many cases.

Poor practice example

James was given a suspended sentence order for offences of violence, sexual assault and possession of drugs with intent to supply.

Both the initial assessment and plan were poor. There was no acknowledgement of the potential risk to future partners, children or staff.

During the past 12 months, no offence-related work had been carried out. There were no safeguarding measures in place for previous victims or potential new victims. When James started a new relationship, it did not trigger a review, communication with other agencies or a home visit. Furthermore, there were no safeguarding measures in place for James's own child, who he was in regular contact with.

One in three intervention plans paid insufficient attention to keeping children safe. Furthermore, almost one in five plans failed to sufficiently address the need to keep the public, known adults and staff safe. In a third of cases, both plans and assessments failed to engage men sufficiently in the process, and many did not consider restrictive orders and licence conditions. Reviews of the risk of harm posed were good enough in less than half of the sample.

Overall, three-quarters of cases had sufficient contact with their responsible officers. However, some cases had their contact levels reduced too soon with either no or limited justification for this. Similarly, we saw examples of cases regularly being seen by a duty officer for no more than a 'check-in'. Home visits had not been completed in over a third of the inspected cases, and this was a missed opportunity for the NPS to gather crucial information to inform risk assessment and management of these men.

Legacy programmes focused on helping sexual offenders to demonstrate empathy for the victim of their offending. The strengths-based model has shifted this stance away from an approach that elicits shame (Tangney and Dearing, 2003). It is nuanced in what it suggests about delivering work on victim empathy to sexual offenders. Instead of focusing on the specific victim of the offence, Horizon and strengths-based approaches look at 'general blocks to empathy'. It assumes people have empathy and can use this, and explores what could stop them having empathy with people in the future. Despite this, we found practitioners still delivering old-style victim empathy work. In some prisons, victim awareness booklets were still used with those convicted of sexual offences, even though nationally there has been a move away from including victim awareness as a treatment target.

Victim liaison officers

We found that VLOs generally went above and beyond the requirements and guidance of the Victim Contact Scheme (Probation Circular 11/2008) and provided good support to victims of sexual offences. This was despite large caseloads and vacancies in some areas. Many spoke of the impact of the fact-finding exercise in the case of John Worboys (HMI Probation, 2018b), and said this had focused minds on what needed to be done.

VLOs said that their relationship with the responsible officer in cases was paramount, and the quality of this relationship depended on individual officers and the stage the case was at.

We accessed the Victim Contact Management System (VCMS) for all our community sample and largely found that it was used effectively to support and protect victims. VLOs were regularly, and appropriately, involved in the MAPPA process.

VLOs were even less likely than responsible officers to be aware of sexual offending interventions, and were largely unaware of the shift to the strengths-based approach.

5.2. Conclusions and implications

Overall, sexual offenders were allocated to the correct MAPPA level. However, the system was not working well in custody, where we found delays in allocating a MAPPA level to prisoners due for release. The MAPPA Level 1 review process was inconsistent, and this meant that changes in circumstances were not always noted. ViSOR was not being used as intended to exchange information with partners and better protect the public.

Home visits are not completed often enough, and this is a missed opportunity to gather vital information to inform risk assessment.

The NPS was well regarded by partner agencies, and we found good work at a strategic level. However, these relationships were not always translating to effective practice on the ground.

The NPS uses a number of sexual offending assessments, and these are not always appropriately integrated, particularly ARMS. We found cases in all five areas inspected where there were some safeguarding concerns, most often in relation to children. Given that the NPS is tasked with managing the highest-risk cases in the community, it needs to do more to ensure that this risk is appropriately managed.

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Annex 1: Glossary

Accredited programme	A programme of work delivered to offenders in groups or individually through a requirement in a community order or a suspended sentence order, or part of a custodial sentence or a condition in a prison licence. Accredited programmes are accredited by the Correctional Services Accredited Panel as being effective in reducing the likelihood of reoffending
ARMS	Active Risk Management System (ARMS) provides a framework for working with all-male sexual offenders who are subject to statutory supervision. It aids the assessment of dynamic risk and protective factors (see Probation Instruction PI 15/2015)
BLB	Better Lives Booster. Part of the outgoing suite of sex offender treatment programmes. Completed after a core or extended programme as a relapse prevention-style programme. Based on the Good Lives Model
Child protection/safeguarding	Work to make sure that all reasonable action has been taken to keep to a minimum the risk of a child coming to harm
Clinical supervision	Practitioners discuss their practice with skilled supervisors. The purpose is to ensure reflective practice, improved practice and safeguard the wellbeing of the practitioner
Core SOTP	Core Sex Offender Treatment Programme. Part of the former suite of sex offender treatment programmes for men scoring medium or high on RM2000, and with relevant scores on a TNA in order to take part
CSE	Child sexual exploitation. Type of child sexual abuse whereby children are exploited by perpetrators for sexual means, e.g. trafficking, prostitution
E3	E3 stands for "Effectiveness, Efficiency, and Excellence". This was the NPS operating model created following the <i>Transforming Rehabilitation</i> programme in June 2014.

EQuiP	Excellence and Quality in Process: a NPS web- based national resource providing consistent information about the processes to be followed in all aspects of the NPS's work. The process mapping is underpinned by quality assurance measures
Horizon	A nationally accredited groupwork programme designed for medium-risk male sexual offenders
Indecent images	Images of children that are deemed illegal as defined by Section 1 of the <i>Protection of Children Act 1978</i> and Section 160 of the <i>Criminal Justice Act 1988</i>
I-Horizon	Internet Sexual Offender Treatment Programme: aimed at those convicted of offences committed via the internet. It tends to include offenders who exhibit low-level deviancy
MOSOVO	Management of Sexual Offenders and Violent Offenders. Team within the police service that manages registered sexual offenders in the community. Previously called SADO and PPU
Non-contact offences	Illegal sexual behaviour that does not involve physical contact with the victim. This covers, for example, indecent exposure, possession or manufacturing of illegal pornography, and unwanted obscene suggestions made in person or through other media
OASys	Offender Assessment System: currently used in England and Wales by CRCs and the NPS to measure the risks and needs of offenders under supervision
OMiC	Offender Management in Custody: the model will see the responsibility for the management of NPS offenders during the custodial phase of their sentence shift from responsible officers based in the community to new joint National Probation Service and public sector prisons teams within establishments
ORA 2014	<i>Offender Rehabilitation Act 2014:</i> implemented in February 2015, applying to offences committed on or after that date, the <i>Offender</i> <i>Rehabilitation Act (ORA) 2014</i> is the Act of

	Parliament that accompanies the <i>Transforming Rehabilitation</i> programme
PD and OPD	Personality Disorder and Personality Disorder Pathway: a personality disorder is a combination of thoughts, feelings and behaviour that are persistent, pervasive and problematic. The sum of combined disordered traits crosses the threshold for diagnosis. The PDP is a joint HMPPS/NHS partnership. Specialist psychologists assist responsible officers in developing formulations for working with individuals with traits associated with their offending behaviour
Polygraph	A test using a machine and specialist practitioner, which is designed to record changes in physiology. Used to identify dishonest responses to questions about adherence to licence conditions
PPU	Public Protection Unit: previous name for MOSOVO team but remains widely used, particularly when referring to the police officer from that unit as being a PPU officer
Pre-sentence report	This refers to any report prepared for a court, whether delivered orally or in a written format
Pre-sentence report PO	
	whether delivered orally or in a written format Probation officer: this is the term for a responsible officer who has completed a higher-education-based professional qualification. The name of the qualification and content of the training vary depending on when the training was undertaken. They

Responsible officer	The term used for the officer who holds lead responsibility for managing a case
RSO	Registered sex offender: an individual who is required to sign the Sex Offender Register according to the <i>Sexual Offences Act 2003</i>
SFO	Serious further offence: a serious violent or sexual offence committed by an individual subject to probation supervision. In such circumstances, a review of the management of the case is undertaken
SHPO	Sexual Harm Prevention Order: a court order prohibiting behaviour of an individual deemed to pose a risk of sexual harm
SOR	Sex Offender Register: a register monitored by the police for the purpose of supervising individuals convicted of a sexual offence within the community
ΤΝΑ	Treatment needs analysis: this is an assessment of factors associated with sexual offending grouped into four domains. It is used to inform treatment pathway
Transforming Rehabilitation	The government's programme for how offenders are managed in England and Wales from June 2014
Treatment manager	A specially trained practitioner who oversees delivery of sex offending treatment programmes. This includes organising waiting lists, treatment monitoring of facilitators and ensuring programme integrity
Treatment needs	Those areas formally identified as being linked to an individual's sexual offending and which would benefit from change in order to reduce further sexual offending

Annex 2: Methodology

Pre-fieldwork

- 1. A review of research into sexual offending assessment and interventions
- Collation of HMPPS, MoJ, HM Prison Service and NPS sexual offending and interventions data
- 3. Context discussions with MoJ and HMPPS managers
- 4. Review of previous inspections and audits relating to sexual offending
- 5. Pilot inspection of community work in Sheffield (June 2018) to test our inspection methodology and tools
- 6. Pilot inspection of custodial work to test our methodology and tools was hosted by HMP Moorland, also in June 2018.

Inspection fieldwork: community (HMI Probation)

The inspection fieldwork included visits to five areas in five separate NPS divisions between July and September 2018. The areas selected covered a mix of metropolitan, urban, rural and coastal areas.

Local delivery unit (LDU)	NPS division
Bury, Rochdale & Oldham LDU	North West
Bedfordshire LDU	South & South Eastern
Hammersmith, Fulham, Kensington & Chelsea & Westminster LDU	London
North of Tyne LDU	North East
North Wales LDU	Wales

The fieldwork comprised:

- 1. Assessment of 120 cases. In 104 of these, we interviewed the responsible officer and in 13 we interviewed a manager due to the absence of the responsible officer. We assessed cases supervised by 113 different officers. A total of 94 separate responsible officers were seen. Seven of our interviews were conducted in Welsh.
- 2. In each area we visited we had interviews and focus groups with the following:
 - LDU heads
 - Senior probation officers
 - Probation officers, including those who did not have cases within the sample group
 - Accredited programme delivery teams and treatment managers
 - Victim liaison officers and managers
 - MAPPA coordinators, and members of the MAPPA SMB

- OPD staff
- Public protection police colleagues working with sexual offenders
- ViSOR administrators working for both the NPS and for the police
- Ad hoc interviews with partners, providers and administrators
- 3. We undertook the following observations of practice:
 - Two MAPPA meetings
 - Recorded sessions of Horizon on the sites where this was available (three)
- 4. We spoke with members of the Sexual Offender Management Board, and conducted interviews with HMPPS, NPS and HM Prison staff in the following teams:
 - HMPPS Interventions Team
 - HMPPS High Intensity Interventions Team
 - HMPPS Interventions Services
 - HMPPS Public Protection and Partnership Team
 - National MAPPA Team
 - HMPPS Sex Offender Policy Team
 - MoJ Offender Insight Team
 - HMPPS Performance Knowledge Management Team
 - NPS Effective Probation Practice Division
 - HM Prison Service Equalities, Interventions and Operational Practice Group
 - HMPPS Psychology Services
- 5. We were joined by an inspector from HM Inspectorate of Constabulary, Fire & Rescue Services for one day of each of the five community fieldwork inspection weeks. They attended interviews with police colleagues and other MAPPA strategic and operational staff to support our work.

Inspection case profile: NPS

We examined 120 cases of offenders who had been sentenced to a community order, suspended sentence or were on licence from a custodial sentence who had a sexual index offence. Of the cases we assessed:

- The majority were white (88 per cent) and heterosexual (76 per cent)
- Just over half of the sample were post-release supervision/licence cases; the remainder were community sentences
- 40 of the cases were for non-contact offences such as possession and circulation of indecent images, voyeurism and exposure
- A significant majority of the victims in the cases we saw were female (89) and a similar number (83 cases) were children
- The majority of cases were sentenced under the *Offender Rehabilitation Act* (67 per cent)

- 42 cases where an accredited programme was a licence condition or order requirement
- 26 cases where Horizon was the identified accredited programme
- 14 licence cases had a polygraph licence condition
- The majority of cases were managed at MAPPA Level 1 (94 cases)
- More than a quarter of cases had resided at an approved premises at the beginning of their order or licence with several others having done so at other points during their sentence.

Custodial methodology and fieldwork (HMI Prisons)

The inspection focused on prisoners in adult male prisons who were serving a sentence for a sexual offence and were due for release within the three months after our fieldwork dates.

The custodial aspect focused on the quality of preparation for release, particularly the quality of risk management release planning.

The evidence included in this report comes from various sources:

- meetings with HMPPS staff to explore strategic plans, progress made and next steps in the management of convicted sexual offenders
- fieldwork in five establishments, including a review of case files for prisoners convicted of sexual offences, plus interviews with prisoners convicted of sexual offences and responsible officers.

Information from all sources has been triangulated to form the basis of the judgements made in this report.

Fieldwork

The five adult male prisons inspected provided a mix of security categories, holding different proportions of prisoners who had been convicted of sexual offences. At the time of this inspection the individual characteristics were as below:

- **HMP YOI Aylesbury**. A Young Offender Institution (YOI) holding 392 young adults (aged 18 to 21), of which 58 (15 per cent) were convicted of sexual offences. Some accredited programmes for sexual offenders were delivered.
- **HMP Bullingdon.** A Category B local prison holding 1,064 prisoners, of which 225 (21 per cent) had been convicted of sexual offences. A wide range of accredited programmes for sexual offenders were provided.
- **HMP Littlehey.** A Category C training prison holding 1,211 prisoners, of which 1,174 (97 per cent) had been convicted of a sexual offence. A wide range of accredited programmes for sexual offenders were provided.
- **HMP Doncaster**. A Category B local prison holding 1,080 prisoners, of which 330 (30 per cent) had been convicted of a sexual offence. At the time of the inspection no accredited programmes were provided for convicted sexual offenders but the delivery of Horizon was due to start shortly after we visited.
- **HMP Brixton**. A resettlement prison holding 752 prisoners, of which 221 (29 per cent) had been convicted of a sexual offence. No accredited programmes were provided for convicted sexual offenders.

At each establishment the following activities were undertaken:

- Detailed inspection of 29 cases, including the OASys assessment, case records and where available an interview with the offender supervisor. All 29 cases were due for release in the three months after our inspection. All cases had been sentenced to at least 12 months in custody. We did not include cases subject to Parole Board release decisions.
- An additional 24 cases were inspected in response to matters arising during the inspection.
- Interviews with approximately 15 prisoners whose cases we had reviewed.
- Interviews at each site with strategic managers, offender supervisors/probation officers and where relevant CRC staff and programmes/psychology staff.

Only establishments where we have identified 'good' or positive practice have been identified in this report; this is so that other establishments can use the information to help them develop their own practice.



HM Inspectorate of Probation 1 Bridge Street West Civil Justice Centre Manchester M3 3FX

ISBN: 978-1-84099-847-4