Response to the consultation on standards and ratings for inspecting probation services

14 February 2018

Contents

1. Introduction

In spring 2018 we will move to annual, individual inspection of National Probation Service (NPS) divisions and each Community Rehabilitation Company (CRC). Our inspections will be underpinned by standards and we will rate organisations using a four point scale.

We started our work on standards with a set of principles that good standards should meet (see Annex A). We reviewed international and national probation standards, rules, CRC contractual provisions and our own standards and benchmarks, looking for approaches that best capture the essence of quality. In developing draft organisational delivery standards, we studied a range of models and frameworks (e.g. EFQM, Galbraith Star, McKinsey 7S).

As we began to consider how best to structure standards, we spoke with academics in the field, and with other regulators and inspectorates that use standards and/or rating systems. We then ran a national programme of workshops with people from the NPS and CRCs, and we worked with Clinks to run further workshops with the voluntary sector.

These workshops helped us to fine tune the draft standards which we set out in our published consultation document (see Annex B), alongside proposed ratings. The consultation was published online on 8 November 2017 with a deadline for responses of 8 December 2017.

The consultation set out the following nine questions:

Question 1	Does the standards framework cover the key areas that contribute to effective service delivery and positive outcomes? If not, what is missing?
Question 2	Are any of the proposed prompts insufficiently linked to effective service delivery and positive outcomes? If so, which ones?
Question 3	Are any of the proposed prompts insufficiently precise? If so, which ones?
Question 4	Are any of the proposed prompts unrealistic? If so, which ones?
Question 5	Are any of the proposed prompts difficult to address at the unit of inspection level (NPS division or CRC contract package area)? If so, which ones?
Question 7	Should any parts of the standards framework be weighted more heavily within the ratings system? If so, which parts?
Question 6	Does the example of rating characteristics include the right amount of detail and appropriately describe 'outstanding' and 'inadequate'? Why/why not?
Question 8	Is there anything in our proposed standards or the way we suggest we will rate probation services that you think could lead

	to undesirable behaviours, outputs or outcomes? If so, please tell us.
Question 9	Please do provide any further comments on the standards and ratings proposed.

This document summarises the responses received and clarifies the decisions subsequently made by HMI Probation.

2. Summary of HMI Probation decisions

	Question	Post-consultation decision
1	Does the standards framework cover the key areas that contribute to effective service delivery and positive outcomes? If not, what is missing?	We will review the suggestions for areas that could be strengthened, amended or added alongside the findings from our transitional inspections, tests and simulations, including how best to obtain the views of service users. As we do so, we will keep in mind the need to: • restrict the framework to those areas that are most essential, focusing providers' attention upon these areas • maintain a balance between aspiration and attainability • ensure our inspections are cost-effective and not unduly burdensome • ensure the number of prompts underpinning a key question is not so great as to undermine the ability to balance them into a single judgement. Some suggestions (e.g. those relating to specific service user needs or specific stakeholders) are likely to be addressed through the supporting inspection guidance materials rather than through the framework itself.
2	Are any of the proposed prompts insufficiently linked to effective service delivery and positive outcomes? If so, which ones?	The consultation feedback endorsed the areas covered by the framework. One respondent supported a reduced focus upon enforcement and punishment. We are clear that the framework needs to cover the high-level expectations for probation service delivery, including delivering and enforcing the order of the court. But we will review the balance within the framework between the promotion of compliance and appropriate enforcement. We will keep both the framework and the underlying evidence-base under continual review, overseen by our newly appointed Head of Standards, working alongside our Head of Research. We will review the evidence-base objectively, prioritising the most robust, relevant and timely findings and covering all theories and methodologies.
3	Are any of the proposed prompts insufficiently precise? If so, which	We will develop and publish inspection guidance materials which help to clarify our expectations regarding levels of quality, e.g. what is meant by

	Question	Post-consultation decision
	ones?	terms such as 'promptly' and 'effectively'. We will consider the need to split any prompts when reviewing the findings from our transitional inspections, tests and simulations.
4	Are any of the proposed prompts unrealistic? If so, which ones?	We recognise that our standards can differ from Service Level Agreement (SLA) provisions and CRCs' detailed contractual provisions and may in some instances appear to be in tension with them. But we do not see any tension as unhealthy. We think it right not to align our standards to current contractual provisions. As an independent inspectorate, we will set enduring standards that are focused on the quality of probation services. We will recognise and reflect upon the role of others in the delivery of services, setting out the reasons for any shortfalls in our inspection reports. We will also target and tailor recommendations to help providers make the necessary improvements. But our judgements and ratings must always reflect the quality of delivery, irrespective of the underlying reasons and rationale.
5	Are any of the proposed prompts difficult to address at the unit of inspection level (NPS division or CRC contract package area)? If so, which ones?	We will target our recommendations at the appropriate organisational level, including recommendations to the Ministry of Justice (MoJ) or HM Prison & Probation Service (HMPPS) when action is required at a national policy, commissioning or operational level.
6	Does the example of rating characteristics include the right amount of detail and appropriately describe 'outstanding' and 'inadequate'? Why/why not?	We will progress with our development of rating characteristics to show what will guide a lead inspector to recommend specific ratings across the four Domain One standards. As we develop the characteristics, we will review the level at which they are pitched.
7	Should any parts of the standards framework be weighted more heavily within the ratings system? If so, which parts?	The consultation feedback provided no clear support for weighting any parts of the standards framework. The ratings system will thus include no weightings, helping to ensure that providers maintain focus across all the standards, all of which are strongly linked to effective service delivery and positive outcomes. In terms of 'floor standards', we will complete some further work modelling potential ratings (considering the balance between aspiration and attainability). At the prompt level, we will consider

	Question	Post-consultation decision
		the need for any firm or overriding rules when developing the inspection guidance materials.

We will keep our approach under review and consider the need for any weightings in future years, reflecting upon our inspection findings. |
| 8 | Is there anything in our proposed standards or the way we suggest we will rate probation services that you think could lead to undesirable behaviours, outputs or outcomes? If so, please tell us. | As we review the content of the standards framework (see Question 1 above), we will maintain our focus upon those areas which are most strongly linked to effective service delivery and positive outcomes, focusing providers' attention upon these areas, and helping to drive improvement where it is required. |
| 9 | Please do provide any further comments on the standards and ratings proposed. | The ordering of the domains will not translate into a sequential inspection methodology. The domain relationships will be two-way, helping to triangulate findings, and ultimately supporting reliable and valid judgements.

We will maintain the focus within the standards framework upon 'inputs' and 'activities'. Getting to the heart of current probation delivery through on-site inspection is where we believe we can add most value. Various outputs and outcomes will continue to be measured by HMPPS and the MoJ, and we see our work as complementary. Without good quality inputs and activities, the NPS and CRCs are less likely to meet the enduring aims of probation services.

We will adopt the rating labels of outstanding; good; requires improvement; and inadequate. These labels are now the 'market leader' and are well known. In terms of the banding cut-offs (grade boundaries) used within the ratings system, we will review once we have completed further modelling work, but we are mindful of the need to develop ratings with a clear rationale and which are relatively straightforward.

We believe there is value in keeping the case assessment performance bandings matched to that of previous years. In this way, standards are maintained, over time: we are not increasing or decreasing our expectations of the quality of probation services, but maintaining our long-established view.

We will continue to be transparent about the way we work. As well as publishing the 2018/19 |

Question	Post-consultation decision
	standards framework, we will publish documentation covering the inspection process, methodology and ratings. At present we are testing sources of evidence, seeking to establish effective and efficient ways of obtaining information routinely, pre-fieldwork and during fieldwork.

3. Summary of responses

We received 25 responses to the consultation. Some were from organisations, and others from individuals in their personal capacity. As set out below, we received views from government and those who commission probation services, as well as from probation providers and from academia and others interested in our proposals:

- Sam Gyimah MP (then prisons and probation Minister)
- Michael Spurr, CEO of HMPPS
- MoJ Community Commissioning Team
- Four CRC owners (representing thirteen CRCs)
- The National Audit Office (NAO)
- The Mayor's Office for Policing and Crime (MOPAC)
- Two Police and Crime Commissioners (PCCs)
- Three voluntary sector organisations
- Two Youth Offending Teams (YOTs)
- Estyn
- The Probation Institute
- The Howard League
- Five academics/academic institutions
- An independent commentator

A substantial majority of respondents supported the proposals set out in the consultation. The main comments received are summarised below, taking each consultation question in turn.

> **1. Does the standards framework cover the key areas that contribute to effective service delivery and positive outcomes? If not, what is missing?**

Various suggestions were provided for areas that could be included, amended or strengthened within the standards framework. Such suggestions were as follows:

- Staff induction, learning, development and training
- Improving staff resilience
- The service user experience, including complaints and complaints handling
- Developing family engagement
- The courts as stakeholders, including court work, interactions with sentencers, and sentencer satisfaction
- The selection and management of sub-contractors
- Engagement with the voluntary sector as strategic partners
- The use of recall
- Specific areas of service user need, such as mental and physical health
- Service users' vulnerabilities and risks of self-harm or suicide
- Technology standards, including the core principles of confidentiality and data protection

- Evidence-based practices
- Ensuring value for money
- Addressing BAME disproportionality
- Welsh language expectations
- Outcomes for service users

2. Are any of the proposed prompts insufficiently linked to effective service delivery and positive outcomes? If so, which ones?

Respondents did not identify any specific prompts that were felt to be insufficiently linked to effective service delivery. One respondent stated as follows: "The prompts clearly highlight the areas we should focus on, such as desistance, cycle of change and taking a personalised assessment of the offender".

One academic respondent felt that there should be a reduced focus upon enforcement and punishment, stating that punitive actions by probation workers are counterproductive. The same academic noted the influence of the desistance literature upon the standards framework and questioned whether the wealth of research findings in the Risk, Needs, Responsivity (RNR) tradition were underplayed.

3. Are any of the proposed prompts insufficiently precise? If so, which ones?

A few respondents noted that the use of terms such as 'promptly', 'timely', 'effectively', 'appropriate', 'meaningful' and 'sufficiently' meant that expectations regarding levels of quality were not always clear. For example, what amounts to a 'sufficient' level of contact? One respondent also highlighted the reference to 'culture' in one prompt, noting that this can be hard to define.

A few suggestions were made for the splitting of specific prompts into two prompts.

4. Are any of the proposed prompts unrealistic? If so, which ones?

A few respondents noted the potential for disparity between the proposed inspection standards and current contractual and SLA provisions. One provider also highlighted the need to recognise the role of others in ensuring that a comprehensive range of services is available. For example, the accessing of substance misuse services through local authority public health contracts. The relationship between the NPS and CRCs was also noted, e.g. the NPS sourcing interventions from CRCs via their rate cards.

Two respondents noted the recent drive to speed up court processes and asked whether the expectations for court reports (3.1.1) were realistic for all those pre-sentence reports that are now delivered on the day.

5. Are any of the proposed prompts difficult to address at the unit of inspection level (NPS division or CRC contract package area)? If so, which ones?

Potential mismatches between the probation units of inspection and other commissioning/delivery arrangements were highlighted. Such arrangements could be more localised (e.g. local authority area), leading to geographical differences in the services available.

For the NPS, it was noted that some organisational issues are influenced by work at the national level, e.g. national workforce modelling and recruitment campaigns.

6. Does the example of rating characteristics include the right amount of detail and appropriately describe 'outstanding' and 'inadequate'? Why/why not?

There was strong support for the inclusion of rating characteristics (see Annex C for the example provided in the consultation document). One respondent felt that the example given for 'outstanding' might be setting the bar too low.

7. Should any parts of the standards framework be weighted more heavily within the ratings system? If so, which parts?

Little support was provided for introducing any weightings. One respondent stated: "It is difficult to argue that one element of the overall picture is more important than another and in attempting to do so could distract from the standardised and clear approach which has been drawn from an analysis of frameworks from across other organisations internationally."

One provider was of the view that Domain Two should be weighted more heavily than Domain One, as they felt that the Domain Two file reads and interviews would provide the most concrete evidence.

Another respondent suggested that we could consider a 'floor standard' for ratings, giving the example of Ofsted which uses pupil safeguarding as a floor standard – if this is ineffective then the rating cannot be other than inadequate.

Some of those respondents whom had suggested areas that could be included or strengthened within the standards, then noted the potential for providers to pay insufficient attention to these areas without their appropriate inclusion. One academic respondent reiterated his view that there should be a reduced focus upon punishment and enforcement.

A few comments focused upon the relationships between the proposed domains. One respondent noted that Domain One and Domain Two judgements may diverge, but good performance in terms of service delivery (Domain Two) was unlikely to be sustainable without good leadership (Domain One). Another respondent felt that Domains Two and Three should come first and inform Domain One, ensuring inspectors are able to challenge management claims.

Our proposal for increased sample sizes for case assessment was welcomed, both in terms of overall robustness and reporting for sub-groups. Some support was expressed for streamlining as far as possible the other sources of evidence, minimising the burden upon the front-line.

A few respondents noted the emphasis upon inputs and activities, and questioned whether increased attention should be given to strategic outcomes, so that providers focus consistently upon achieving good outcomes for service users. One respondent asked how inspection findings will be married with outputs, outcomes and impact.

The same respondent felt that the proposed ratings system was 'generous' and suggested differing bandings for (i) the consolidated case assessment data and (ii) the overall provider rating. Differing rating labels (from outstanding; good; requires improvement; and inadequate) were proposed by this respondent.

Finally, our intention to keep the standards under review and revise them as necessary was supported and seen as a clear strength.

4. Changes to standards and ratings frameworks

Following a review of the proposals and consultation responses, HM Chief Inspector of Probation and the Senior Management Team have made the decisions set out below.

The standards framework

Within the consultation document, we proposed a standards framework with three domains. The first two domains apply to all probation providers, with Domain One covering how well the organisation is led, managed and set up, and Domain Two covering the quality of work in individual cases, and how well individuals are being supervised. Domain Three is modular, and sector specific (NPS or CRCs).

We intend to adhere to this structure, focusing upon the key 'inputs' and 'activities' which are the drivers of positive outcomes. Getting to the heart of current probation delivery through on-site inspection is where we believe we can add most value. Based on our independence and the expertise and experience of our inspectors, we can uniquely focus on the effectiveness of work with offenders. Various outputs and outcomes will continue to be measured by HMPPS and the MoJ, and we see our work as complementary. Without good quality inputs (such as professional staff and comprehensive services) and activities (such as case assessment and individual supervision) the NPS and CRCs are less likely to meet the enduring aims of probation services.
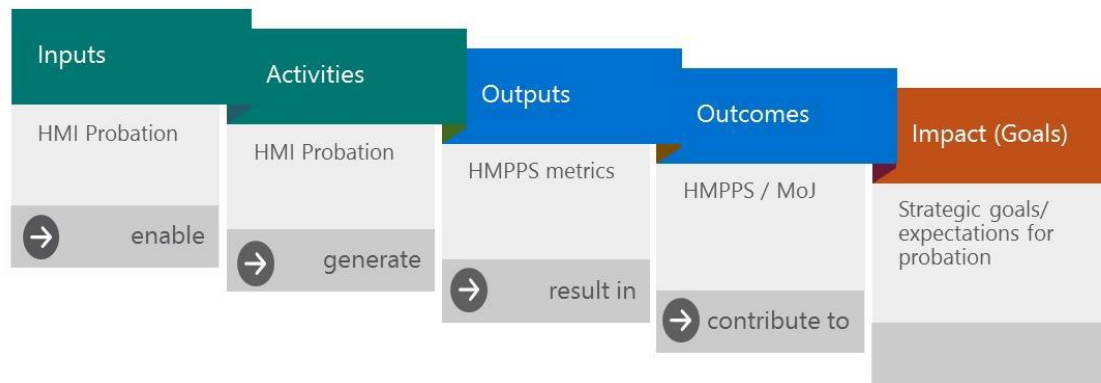
We have no intention for the ordering of the domains to translate into a sequential inspection methodology, e.g. all Domain One methods before Domain Two methods. The domain relationships will be two-way, helping to triangulate findings, and ultimately supporting reliable and valid judgements. For example, Domain Two case assessment data will be used to inform further Domain One fieldwork activity.

The consultation feedback endorsed the areas covered by the three domains, and we will review the suggestions for areas that could be strengthened, amended or added alongside the feedback to our youth standards consultation and the findings from our transitional inspections, tests and simulations. We are currently reviewing and testing sources of evidence, seeking to establish effective and efficient ways of obtaining information routinely, pre-fieldwork and during fieldwork. For example, we are exploring the development of a 'National Dataset' through which we obtain information from the MoJ and HMPPS. We are also consulting service users regarding the best ways of engaging them and seeking their views. Our proposal for increased sample sizes for case assessment was welcomed, and we will aim for Domain Two and Three case samples for each inspection that will give us an 80% confidence level, in statistical terms.

When reviewing the content of the framework, we will keep in mind the need to restrict it to those areas that are most strongly linked to effective service delivery and positive outcomes, focusing providers' attention upon these areas and helping to drive improvement where it is needed. We are also mindful of the need to maintain a balance between aspiration and attainability, and to support cost-effective inspections which are not unduly burdensome for providers or ourselves. Finally, we need to recognise that the greater the number of prompts underpinning a key question, the more difficult it becomes to balance them into a single judgement. Our view is that no key question should have more than ten prompts.

One respondent supported a reduced focus upon enforcement and punishment. We are clear that the framework needs to cover the high-level expectations for probation service delivery, including delivering and enforcing the order of the court. But we will review the balance within the framework between the promotion of compliance and appropriate enforcement.

We recognise that our standards can differ from SLA provisions and CRC's detailed contractual provisions and may in some instances appear to be in tension with them. But we do not see any tension as unhealthy – quite the opposite – and we will not align our standards in all senses. As an independent inspectorate, we will set enduring standards that are focused on the quality of probation services and which will support valid inspection and ratings.

We stated in the consultation document that the standards framework will be supported by inspection guidance materials. These materials are being developed and will help to clarify our expectations regarding sufficiency and levels of quality, e.g. what is meant by terms such as 'promptly' and 'effectively'. Some suggestions for areas to be covered by the standards framework (e.g. those relating to specific service user needs or specific stakeholders) are likely to be addressed through these guidance materials rather than through the framework itself.

Rating probation providers

As proposed in the consultation document, we will adopt the rating labels of outstanding; good; requires improvement; and inadequate. These ratings are now the 'market leader' and are well known, being used by CQC, Ofsted and HMICFRS. There will be an overall (composite) provider rating, and ratings at the standard level.
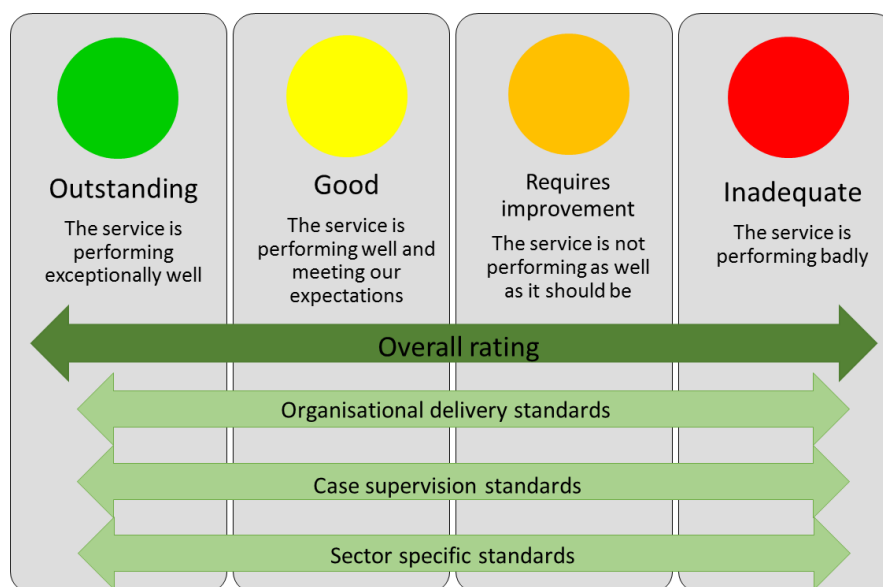
The consultation feedback provided no clear support for weighting any parts of the standards framework. We will thus proceed with a ratings system without weightings, helping to ensure that providers maintain focus across all the standards, all of which are linked to effective service delivery and positive outcomes.

In terms of 'floor standards', we will complete some further work modelling potential ratings. At the prompt level, we will consider the need for any firm or overriding rules when developing the inspection guidance materials. We are mindful of the need to develop ratings with a clear rationale, which are

relatively straightforward and which challenge providers, helping to drive improvement, but which are attainable. We also believe there is value in keeping the case assessment performance bandings matched to those used in previous inspection programmes (e.g. those used in our OMI2 inspections of probation trusts from 2009 to 2012). In this way, we are not increasing or decreasing our expectations of the quality of probation services, but maintaining our long-established view.

With regard to attainability, we had some feedback highlighting (i) the role that other providers and agencies can play in delivering a comprehensive range of high-quality services and (ii) the impact of decisions and initiatives at the national level. We are clear that our judgements and ratings must always reflect the quality of delivery, irrespective of the underlying reasons and rationale. But we will target and tailor recommendations to help providers make the necessary improvements. For example, we will reflect upon the role of others in the delivery of services, setting out the reasons for any shortfalls. And we will target our recommendations at the appropriate organisational level, including recommendations to the MoJ or HMPPS when action is required at a national policy, commissioning or operational level.

There was strong support amongst respondents for publishing rating characteristics, and we will progress with their development, helping to show what will guide a lead inspector to recommend specific ratings across the four Domain One standards. As we develop the characteristics, we will review the level at which they are pitched.

Transparency and continuing review

We will continue to be transparent in the way we work. As well as publishing the final version of the 2018/19 standards framework, we will publish documentation covering the inspection process, methodology and ratings.

We will keep the standards framework and the underlying evidence-base under continual review, working with providers and others. This work will be overseen by our newly appointed Head of Standards, working alongside our Head of Research. We will review the evidence-base objectively, prioritising the most robust, relevant and timely findings and covering all theories and methodologies. We will consult and work with external academics where required.

We will also keep our approach to ratings under review, reflecting upon our inspection findings. As part of this work, we will consider the need for any weightings in future years. We will work with the MoJ and its agencies to make sure our inspection ratings sit sensibly alongside other measures so that providers are held to account in balanced and proportionate arrangements, with measures aligned well.

If we propose to make any significant changes to the standards or ratings, we will consult before doing so. We will be fully transparent and publish all changes on our website

Annex A: Guiding principles

The principles set out below have guided the structure, format and content of the standards, highlighting our desire to drive improvements, whilst at the same time meeting requirements of relevance, robustness and timeliness.

Driving improvement	1.	drive the right behaviours and improvements in outcomes, enabling providers to focus their attention.
	2.	capture those key research findings and evidence based principles on what contributes to effective service delivery and positive outcomes, exemplifying what good probation work looks like.
	3.	be achievable, but challenging where necessary.
Relevance	4.	be clear, unambiguous, easily understood by providers and seen as relevant to current delivery models and practice.
	5.	be restricted to those standards that are most essential, ensuring that they are not unduly restrictive and leave scope for innovation.
	6.	be sufficiently broad, covering organisational, workforce, inter-agency and practice elements.
	7.	make use of existing national and international standards (including previous inspection criteria) where possible and desirable.
	8.	be provider-neutral and likely to endure over time (while also being easily adjustable).
Robustness	9.	be balanced across domains which are sufficiently discrete and coherent.
	10.	be concise and sufficiently precise for their intended purpose, supporting evaluation and legitimate claims of compliance and conformity.
	11.	support objective, consistent judgments by inspectors and between inspections.
Timeliness	12.	support regular, cost-effective inspections.
	13.	support continual cycles of inspection.

Annex B: Proposed standards framework

1. Organisational delivery

1.1 Leadership

The leadership of the organisation supports and promotes the delivery of a high-quality, personalised and responsive service for all service users.

1.1.1 Is there a clear vision and strategy to deliver a high-quality service for all service users?
   a) Does the vision and strategy prioritise the quality of service?
   b) Have leaders effectively communicated the vision and strategy to staff?
   c) Does the organisation's culture promote openness, constructive challenge and ideas?
   d) Is there an effective governance framework and clear delivery plans that ensure the vision and strategy are translated into practice?
   e) Is progress against the strategy monitored and is the strategy regularly reviewed?
   f) Does the leadership team engage effectively with partners, suppliers and other stakeholders to support the delivery of the vision and strategy?

1.1.2 Are potential risks to service delivery anticipated and planned for in advance?
   a) Are risks to the service sufficiently understood, with appropriate mitigations and controls in place?
   b) Are appropriate arrangements in place to ensure business continuity in the event of major incidents?
   c) Is the impact on safety and security assessed when carrying out changes to systems, processes or staffing?

1.1.3 Does the current operating model support effective service delivery, meeting the needs of all service users?
   a) Does the operating model support meaningful contact and continuity of contact with service users?
   b) Does the operating model allow for personalised approaches with service users, taking account of diversity factors?
   c) Do staff understand the operating model, how the service should be delivered and what they are accountable for?
   d) Is there alignment between the operating model and local plans?
   e) Where there are significant planned changes to the operating model, are these communicated and implemented effectively?

1.2 Staff

Staff within the organisation are empowered to deliver a high-quality, personalised and responsive service for all service users.

1.2.1 Do staffing and workload levels support the delivery of a high-quality service for all service users?
   a) Are staffing levels planned and reviewed to meet the changing demands and profiles of service users?
   b) Do practitioners have manageable workloads, given the profile of the cases and the range of work undertaken?
   c) Do middle managers have manageable workloads?
   d) Do administrative staff have manageable workloads?
   e) Are workloads actively managed, with resources being redeployed, when necessary, in response to local pressures?

1.2.2 Do the skills and profile of staff support the delivery of a high-quality service for all service users?
   a) Do the skills and diversity of the workforce meet the changing demands and caseload profiles?
   b) Are high and medium risk of harm cases allocated to staff who are appropriately qualified and/or experienced?
   c) Where volunteers and mentors are used, are they appropriately selected and supported to fulfil clearly-defined roles?
   d) Do administrative staff have clearly-defined roles which support the delivery of a high-quality service?
   e) Is there a strategy in place to identify and develop the potential of individual staff to support succession planning?

1.2.3 Does oversight by managers support high-quality work and professional development?
   a) Do managers provide effective supervision of staff to enhance and sustain the quality of work with service users?
   b) Is the appraisal process used effectively to ensure that staff are competent to deliver a quality service?
   c) Is sufficient attention paid to identifying and addressing poor performance?

1.2.4 Are arrangements for learning and development comprehensive and responsive?
   a) Does the organisation identify and address the learning needs of all staff?
   b) Does the organisation provide sufficient access to pre-qualifying training routes to support the delivery of a quality service?
   c) Does the organisation provide sufficient access to in-service training to support the delivery of a quality service?
   d) Does the organisation promote and value a culture of learning and continuous improvement?

1.2.5 Do managers pay sufficient attention to staff engagement?
   a) Are staff motivated to contribute to the delivery of a quality service?
   b) Is appropriate attention paid to monitoring and improving staff engagement levels?

c) Do managers recognise and reward exceptional work to encourage improvement and development and retention of staff?
d) Is appropriate attention paid to staff safety and wellbeing?
e) Are reasonable adjustments made for staff in accordance with statutory requirements and protected characteristics?

1.3 Services

A comprehensive range of high-quality services is in place, supporting a tailored and responsive service for all service users.

1.3.1 Is there a sufficiently comprehensive and up to date analysis of the profile of service users, to ensure that the organisation can deliver well targeted services?
  a) Does the analysis capture sufficiently the desistance and offending-related factors presented by service users?
  b) Does the analysis capture sufficiently the risk of harm profile of service users?
  c) Does the analysis pay sufficient attention to diversity factors and to issues of disproportionality?
  d) Is there sufficient analysis of local patterns of offending and sentencing?

1.3.2 Does the organisation provide the volume, range and quality of services to meet the needs of service users?
  a) Are appropriate services provided, either in-house or through other agenices, to meet the identified needs and risks?
  b) Is sufficient attention paid to building on strengths and enhancing protective factors?
  c) Are diversity factors and issues of disproportionality considered in the range of services provided?
  d) Are services available to service users in appropriate locations?
  e) Is the quality of services monitored and remedial action taken where required?

1.3.3 Are relationships with providers and other agencies established, maintained and used effectively to deliver high-quality services to service users?
  a) Are there effective relationships with other agencies to support desistance through access to mainstream services both during and after the sentence?
  b) Are there effective relationships with other agencies to manage the risk of harm to others?
  c) Are courts made sufficiently aware of the services available to support sentencing options?

1.4   *Information and facilities*

Timely and relevant information is available and appropriate facilities are in place to support a high-quality, personalised and responsive approach for all service users.

1.4.1   Are the necessary policies and guidance in place to enable staff to deliver a quality service, meeting the needs of all service users?
a)   Are policies and guidance communicated effectively?
b)   Is there a clear policy about case recording that supports defensible decision-making and effective communication?
c)   Is there clear guidance about the full range of services available, their suitability for individual service users and referral processes?
d)   Are policies in place to support an effective interface between NPS and CRC?

1.4.2   Do the premises and offices enable staff to deliver a quality service, meeting the needs of all service users?
a)   Are the premises and offices sufficiently accessible to service users?
b)   Do the premises and offices support the delivery of appropriate personalised work and the effective engagement of service users?
c)   Do the premises and offices provide a safe environment for working with service users?

1.4.3   Do the Information and Communication Technology (ICT) systems enable staff to deliver a quality service, meeting the needs of all service users?
a)   Do the ICT systems enable staff to plan, deliver and record their work in a timely way, and to access information as required?
b)   Are arrangements in place to ensure that the necessary information is exchanged with other agencies?
c)   Do the ICT systems support remote working where required?
d)   Do the ICT systems support the production of the necessary management information?

1.4.4   Is analysis, evidence and learning used effectively to drive improvement?
a)   Are comprehensive assurance systems and performance measures in place and used to drive improvement?
b)   Is there a sufficient understanding of performance across the organisation and at all levels?
c)   Are service improvement plans supported through monitoring and development of the underlying evidence base?
d)   Are processes in place to ensure that learning is communicated effectively?
e)   Are processes in place to ensure that the organisation learns from things that go wrong?
f)   Are the views of service users sought, analysed and used to review and improve the effectiveness of services?
g)   Where necessary, is action taken promptly and appropriately in response to performance monitoring, audit or inspection?

2. Case supervision

2.1 Assessment

Assessment is well-informed, analytical and personalised, actively involving the service user.

2.1.1 Does assessment focus sufficiently on engaging the service user?
   a) Does assessment analyse the service user's motivation and readiness to engage and comply with service delivery?
   b) Does assessment analyse the service user's diversity and personal circumstances, and consider the impact these have on their ability to comply and engage with service delivery?
   c) Is the service user meaningfully involved in their assessment, and are their views taken into account?

2.1.2 Does assessment focus sufficiently on the factors linked to offending and desistance?
   a) Does assessment identify and analyse desistance and offending-related factors?
   b) Does assessment identify the service user's strengths and protective factors?
   c) Does assessment draw sufficiently on available sources of information?

2.1.3 Does assessment focus sufficiently on keeping other people safe?
   a) Does assessment clearly identify and analyse any risk of harm to others, including identifying who is at risk and the nature of that risk?
   b) Does assessment analyse any specific concerns and risks related to identifiable actual and potential victims?
   c) Does assessment draw sufficiently on available sources of information, including past behaviour and convictions, and involve partner agencies where appropriate?

2.2 Planning

Planning is driven by the assessment, holistic and personalised, actively involving the service user.

2.2.1 Does planning focus sufficiently on engaging the service user?
   a) Is the service user meaningfully involved in planning, and are their views taken into account?
   b) Does planning take sufficient account of the service user's diversity, readiness and motivation to change, and personal circumstances which may affect engagement and compliance?
   c) Does planning set out how all the requirements of the sentence or licence/post-sentence supervision will be delivered?
   d) Does planning set a level, pattern and type of contact sufficient to engage the service user and to support the effectiveness of specific interventions?

2.2.2 Does planning focus sufficiently on reducing reoffending and supporting the service user's desistance?
a) Does planning sufficiently reflect the assessment of desistance and offending-related factors?
b) Does planning build on the service user's strengths and protective factors?
c) Does planning set out the services, activities and interventions most likely to reduce reoffending and support desistance?

2.2.3 Does planning focus sufficiently on keeping other people safe?
a) Does planning address factors identified in the risk of harm assessment?
b) Does planning set out the necessary constructive and/or restrictive interventions to manage the risk of harm?
c) Does planning make appropriate links to the work of other agencies involved with the service user and any multi-agency plans?
d) Does planning set out necessary and effective contingency arrangements to manage those risks that have been identified?

2.3 Implementation and delivery

High-quality well-focused, personalised and coordinated services are delivered, engaging the service user.

2.3.1 Is the sentence/post-custody period implemented effectively with a focus on engaging the service user?
a) Do the requirements of the sentence start promptly, or at an appropriate time?
b) Is sufficient focus given to maintaining an effective working relationship with the service user?
c) Are sufficient efforts made to enable the service user to complete the sentence, including flexibility to take appropriate account of their personal circumstances?
d) *Post-custody cases only:* Was there a proportionate level of contact with the prisoner before release?
e) Are professional judgements sufficiently recorded in relation to decisions about missed appointments?
f) Are enforcement actions taken when appropriate?
g) Are sufficient efforts made to re-engage the service user after enforcement actions or recall?

2.3.2 Does the implementation and delivery of services effectively support the service user's desistance?
a) Are the services, activities and interventions that are delivered those most likely to reduce reoffending and support desistance?
b) Wherever possible, do services, activities and interventions build upon the service user's strengths and enhance protective factors?
c) Is the involvement of other organisations in the delivery of services, activities and interventions sufficiently well coordinated?
d) Is the level and nature of contact sufficient to reduce reoffending and support desistance?
e) Are local services engaged to support and sustain desistance during the sentence and beyond?

2.3.3   Does the implementation and delivery of services effectively support the safety of other people?
   a)   Is the level and nature of contact offered sufficient to manage and minimise the risk of harm?
   b)   Is sufficient attention given to protecting victims and potential victims?
   c)   Is the involvement of other agencies in managing and minimising the risk of harm sufficiently well coordinated?
   d)   Are home visits undertaken where necessary to support the effective management of risk of harm?

2.4 Reviewing

Reviewing of progress is well-informed, analytical and personalised, actively involving the service user.

2.4.1   Does reviewing focus sufficiently on supporting the service user's compliance and engagement?
   a)   Does reviewing consider compliance and engagement levels and any relevant barriers, with the necessary adjustments being made to the ongoing plan of work?
   b)   Is the service user encouraged to contribute to reviewing their progress and engagement?
   c)   Are written reviews completed as appropriate as a formal record of actions to implement the sentence?

2.4.2   Does reviewing focus sufficiently on supporting the service user's desistance?
   a)   Does reviewing identify and address changes in factors linked to desistance and offending, with the necessary adjustments being made to the ongoing plan of work?
   b)   Does reviewing focus sufficiently on building upon the service user's strengths and enhancing protective factors?
   c)   Is reviewing informed by the necessary input from other agencies working with the service user?
   d)   Are written reviews completed as appropriate as a formal record of the progress towards desistance?

2.4.3   Does reviewing focus sufficiently on keeping other people safe?
   a)   Does reviewing identify and address changes in factors related to risk of harm, with the necessary adjustments being made to the ongoing plan of work?
   b)   Is reviewing informed by the necessary input from other agencies involved in managing the service user's risk of harm?
   c)   Is the service user encouraged to contribute to reviewing their risk of harm?
   d)   Are written reviews completed as appropriate as a formal record of the management of the service user's risk of harm?

3. NPS specific work

3.1 Court reports and case allocation

The pre-sentence advice provided to court supports its decision-making, with cases being allocated appropriately following sentencing.

3.1.1 Is the pre-sentence advice sufficiently well-informed, analytical and personalised to the service user, supporting the court's decision-making?
   a) Does the advice to court draw sufficiently on available sources of information?
   b) Is the service user meaningfully involved in the preparation of the report, and are their views taken into account?
   c) Does the advice to court consider factors related to the likelihood of reoffending?
   d) Does the advice to court consider factors related to risk of harm?
   e) Does the advice to court consider the service user's motivation and readiness to change?
   f) Does the advice to the court consider the service user's diversity and personal circumstances?
   g) Does the advice consider the impact of the offence on known/identifiable victims?
   h) Is an appropriate proposal made to court?
   i) Is there a sufficient record of the advice given to court, and the reasons for it?

3.1.2 Is the allocation of the case prompt, accurate, and based on sufficient information?
   a) Is there a sufficient record of the assessment and advice to the court, for the purposes of allocation and the communication of relevant information to the organisation responsible for supervision?
   b) Is the case allocated promptly to the correct agency?
   c) Where necessary, has a full and accurate risk of serious harm assessment been completed prior to allocation?

3.2 Statutory victim work

Relevant and timely information is provided to the victim/s of a serious offence, and they are given the opportunity to contribute their views at key points in the sentence

3.2.1   Does the initial contact with the victim/s encourage engagement with the victim contact scheme?
a) Is initial contact made soon after sentence, with appropriate consideration given to the timing of such contact?
b) Are the initial letters appropriately personalised, taking into account the nature of the experience of the victim/s and/or any diversity considerations?
c) Do the initial letters include sufficient information to enable the victim/s to make an informed choice as to whether to participate in the scheme?

3.2.2   Is the personal contact with the victim/s timely and supportive, providing appropriate information about the criminal justice process?
a) Is clear information given to the victim/s about what they can expect at different points in the sentence?
b) Are the victim/s referred to other agencies, or given advice about available sources of help and support?
c) Is a written record kept of the initial meeting and shared with the victim/s?

3.2.3   Does pre-release contact with the victim/s allow them to make appropriate contributions to the conditions of release?
a) Is contact made with the victim/s at an appropriate point in the sentence?
b) Are the victim/s given the opportunity to express any concerns about the service user's release?
c) Are the concerns of the victim/s addressed and is attention paid to their safety in planning for release?

3.2.4   Is there good communication between offender management and victim liaison to support the safety of victim/s?
a) Are victim liaison staff kept appropriately informed about relevant issues regarding the management of the service user?
b) Are victim liaison staff involved in MAPPA where appropriate?

4. CRC specific work

4.1 Unpaid work

Unpaid work is delivered safely and effectively, engaging the service user in line with the expectations of the court.

4.1.1 Does assessment focus on the key issues relevant to unpaid work?
    a) Does assessment consider the service user's motivation and willingness to comply with unpaid work?
    b) Does assessment consider the service user's diversity and personal circumstances, and the impact these have on their ability to comply and engage with unpaid work?
    c) Does assessment draw sufficiently on available sources of information?
    d) Does assessment consider issues relating to the health and safety or potential vulnerability of the service user?
    e) Does assessment consider risk of harm to other service users, staff or the public?

4.1.2 Do arrangements for unpaid work focus sufficiently on supporting the service user's engagement and compliance with the sentence?
    a) Is the allocated work suitable, taking appropriate account of the service user's diversity and personal circumstances?
    b) Do arrangements for unpaid work encourage the service user's engagement and compliance with the order?
    c) Do arrangements for unpaid work take account of risk of harm?

4.1.3 Do arrangements for unpaid work maximise the opportunity for the service user's personal development?
    a) Wherever possible, does unpaid work build upon the service user's strengths and enhance their protective factors?
    b) Does the nature of unpaid work support desistance by providing opportunities for reparation and rehabilitation?
    c) Where the responsible officer is engaged in other activity/work with the service user, is regular feedback provided to them about the progress on unpaid work?

4.1.4 Is the sentence of the court implemented appropriately?
    a) Does unpaid work commence promptly?
    b) Are professional judgements recorded in relation to decisions about missed appointments?
    c) Are enforcement actions taken when appropriate?
    d) Is the level of compliance and engagement reviewed periodically, analysing any barriers and, where appropriate, amending work arrangements?

4.2 Through the Gate

Through the Gate services are personalised and coordinated, addressing the service user's resettlement needs.

4.2.1 Does resettlement planning focus sufficiently on the service user's resettlement needs and on factors linked to offending and desistance?
   a) Is there a clear and timely plan for how the service user's resettlement needs will be addressed?
   b) Does the plan draw sufficiently on the screening or assessment, and other available sources of information?
   c) Is the service user meaningfully involved in planning their resettlement, and are their views taken into account?
   d) Does the resettlement plan identify the service user's strengths and protective factors, and consider ways to build upon these?
   e) Does the plan take sufficient account of the service user's diversity and personal circumstances?
   f) Does the resettlement plan take account of factors related to risk of harm?

4.2.2 Does resettlement activity focus sufficiently on supporting the service user's resettlement?
   a) Are resettlement services delivered in line with the resettlement plan?
   b) Wherever possible, do services, activities and interventions build upon the service user's strengths and enhance their protective factors?
   c) Does resettlement activity take sufficient account of the service user's diversity and personal circumstances?
   d) Is the level and nature of contact with the service user sufficient to support resettlement?
   e) Does resettlement activity take sufficient account of any factors related to risk of harm?

4.2.3 Is there effective coordination of resettlement activity?
   a) Is there effective coordination of resettlement activity with other services being delivered in the prison?
   b) Is there effective communication with the responsible officer in the community, prior to and at the point of release?
   c) Do resettlement services support effective handover to local services in the community?

Annex C: Example of rating characteristics

1.1 Leadership

The leadership of the organisation supports and promotes the delivery of a high quality, personalised and responsive service for all service users.

Outstanding

- Leaders set and communicate a clear direction and strategic focus, inspiring staff and uniting them to deliver the organisation's goals. The vision and strategy is stretching, challenging and innovative, focused upon the quality of delivery for service users, while remaining achievable.
- Leaders create a culture of involvement, ownership, empowerment and improvement. Safe innovation is celebrated, with staff feeling empowered to identify ways to improve how they do their job, and leaders consistently listening and explaining their decisions. A diverse range of views are encouraged.
- A collaborative and outward-looking approach is taken to working with other organisations, maximising the benefits for service users through the appropriate sharing of expertise, resources and knowledge. The provider is represented on all relevant strategic groups, representation is consistent and those attending demonstrate appropriate decision-making authority.
- Staff at all levels are actively encouraged to raise concerns and those who do are supported. There is clear and regular two-way communication, with leaders having a strong track record of listening to staff concerns and acting on them in a timely, responsive manner.
- It is clear how staff are to work together to deliver the operating model, with strong collaboration and support, clear lines of accountability and the avoidance of duplication. There is a common focus on improving the quality of delivery for service users.
- Where changes are required, they are communicated in a timely and transparent way across the organisation, with a clear proactive approach to embedding and monitoring new ways of working.

Inadequate

- The vision and strategy is unclear, out-of-date or insufficiently focused on quality. Staff are not aware of or do not understand the vision and strategy.
- The culture is top-down and directive. It is not one of fairness, openness, transparency, honesty and challenge. Staff do not feel valued, supported and appreciated. Their views are not sought and decisions are not explained, resulting in a lack of alignment between the issues described by staff and those understood by leaders. When staff do raise concerns, they are not treated with respect. The culture is defensive.
- There are no detailed or realistic plans to deliver the vision and strategy, progress is not being reviewed and leaders are out of touch with what is

happening during day-to-day services. There is minimal evidence of learning, reflective practice or innovation. Where changes are made, the impact on staff and the quality of delivery for service users is not recognised.

- The provider is represented on few strategic groups, and/or representation is sporadic or at an inappropriate decision-making level. There is evidence of blaming others.
- There is no effective system for identifying, capturing and managing issues and risks. Any mitigating actions or improvements that leaders have sought to make have been inadequate. Consequently, leaders are not doing enough to tackle poor delivery, significantly impairing the progress of service users.
- There is poor collaboration or cooperation between teams and high levels of division and conflict. Staff do not understand the fit between their roles and the operating model, and there is a lack of clarity about the authority to make decisions.
- The leadership is insufficiently focused upon safety and security, giving serious cause for concern.

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