

Getting ready for the PPO strategy:

Managing prolific and other priority offenders in Birmingham

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A report for the Birmingham Community Safety Partnership



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Summary

The Prolific and other Priority Offender (PPO) strategy was introduced by the Home Office in the summer of 2004, with the central aim of reducing crime and reducing re-offending by those who persistently cause the most crime and harm locally. Within Birmingham, this was introduced into a context where a number of existing projects and strategies were already being implemented on a piecemeal basis to address specific targeted offenders, either through the Persistent Offender Partnership programme (POPP), or Project Chrysalis. Strategic direction on the management of prolific offenders in Birmingham is provided through the Drug Treatment and Offender Management Core Priority Group.

The situation in Birmingham with regards to managing prolific and other priority offenders is highly complex, involving many partners at both strategic and delivery levels. This study aimed to assess the current provision of services for prolific and other priority offenders in Birmingham, and to identify gaps in the service delivery that can inform the development of the local PPO strategy and an action plan for the forthcoming year. Semi-structured interviews were conducted with 18 key personnel involved at either the strategic or service delivery level for the PPO strategy. In addition to this, interviews were conducted with six offenders who were or had previously been on the POPP scheme. These covered a number of areas, including access to services, case management, partnership working, information sharing and tracking of offenders through the system.

Findings and recommendations

From the information provided, a number of gaps were identified, and recommendations drawn up as to how these may be addressed. The main recommendations are summarised below.

Communication

- Develop a programme of conferences, seminars and training for service delivery agencies around the PPO strategy and how this will impact on existing service provision.

- Provide clarity about partnership working and roles throughout the three strands of the PPO strategy, and how the strands are linked together.
- The Information Sharing Protocol needs to be finalised as soon as possible, to enable partners to work more closely together. All partner agencies need to be aware of what can be shared under the agreements set in place.

Roles of agencies and partnership working

- Clear guidance should be issued concerning the roles of police offender managers, and what is expected of them in providing a supportive mentoring role to the PPOs.
- Additional agencies may be brought in where gaps exist. This could include support for families and carers, community confidence building measures and activities to support behaviour change in offenders.

Access to services

- Measures need to be taken to ensure that offenders without drug problems have equal access to services as those with drug problems.
- Ensure greater consistency under the strategy across Birmingham in terms of services available, with all PPOs receiving similar assistance and incentives.

Improved links with the Prison Service

- Increased focus could be made on engaging the Prison Service as necessary, building on the partnership already established through Chrysalis.
- A 'care plan' could be introduced covering training and employment undertaken whilst in prison, that can be passed on to education, training and employment providers on release to provide more continuity, and avoid duplication of effort.

Identifying PPOs and the referral process

- Clear guidance needs to be issued to all OCUs to ensure consistency in the identification and management of offenders.
- Systems need to be put in place to enable operational police officers to recognise a PPO on arrest, through appropriate flagging.
- A single referral form, delivered within the terms of an agreed process to the service providers would ensure all relevant information is shared.

Monitoring performance and progress

- Setting performance measures or targets around how well the PPO strategy is working may be useful to produce tangible measure of success or pointers for further development. This should be supported by appropriate analytical support.
- Monitoring should also be in place to flag up non-attendance by clients, and whether any follow up work to re-engage these clients has been successful.

Exit strategy

- Clear guidelines need to be provided for offender managers around an exit strategy for offenders being removed from the PPO list.

Further research

- This study was conducted in the context of the whole system being reorganised and restructured. It would be useful to repeat the exercise again in a few months time, once many of the gaps identified will have been addressed, and the new delivery plan is in place. This could be extended to cover more in depth case studies of offenders targeted through the PPO strategy.

1 Introduction

The Prolific and other Priority Offenders (PPO) Strategy was announced on 30th March 2004 with the central aim of reducing crime and re-offending, by developing a joined up approach between *all* agencies dealing with adult offenders. The strategy is based at a local level - the police Basic Command Unit¹ - and managed by local CDRPs. On 30th March 2004 Tony Blair stated: 'We need catching and convicting these prolific offenders to become a key priority for local Crime and Disorder Partnerships'². This is the situation in Birmingham, with the CDRP - Birmingham Community Safety Partnership (BCSP) - having 'Drug Treatment and Offender Management' as one of five Core Priority Groups; it is this group that funded the study reported here.

The Policy Research Institute at the University of Wolverhampton was funded over a three month period to March 2005 to review the current services available within Birmingham, and to identify any gaps in the service provision and processes for managing PPOs, ready for the full launch of the PPO strategy and action plan in April 2005.

National Context

In 2002, in the document 'Narrowing the Justice Gap' the CJS³ set out reasons for developing a strategy to deal more effectively with adult persistent offenders. Firstly, it was claimed that, as 10 per cent of offenders commit half of all serious crime⁴, targeting this group will have greatest impact. The main benefits were thought to be:

- Once persistent offenders are caught, this should enable the Criminal Justice System to bring more offences to justice;
- Once sanctioned, if effective support is supplied that tackles the reasons why they commit crime, they will be less likely to reoffend; and

¹ Rather than using the term 'BCU', West Midlands Police refer to Operational Command Units (OCUs).

² (Blair, 2004) <http://www.number-10.gov.uk/output/Page5603.asp> (correct March 2005)

³ Criminal Justice System of England and Wales – inter-departmental publication

⁴ Figure from Home Office (2001)

- If they do reoffend, as they are already being targeted they are more likely to be caught again (2002a: 13).

A persistent offender was defined as someone 18 years or over who has been convicted of six or more recordable offences in the last twelve months, or another offender regarded as persistent on the basis of local intelligence' (see CJS, 2002b). There is flexibility therefore for local areas to include others suspected of being prolific offenders (Home Office, 2004d – joint inspection report).

Following the announcement of the PPO strategy, national guidance documents were published between July and September 2004 (Home Office, 2004a; 2004b; 2004c). According to these documents each local PPO strategy should identify the individuals in the area who are responsible for causing *the most* crime and disorder. These will be identified using local intelligence – utilizing the National Intelligence Model (NIM) - and locally agreed criteria. Three complementary strands to the PPO strategy have been identified:

1. *Prevent and Deter*: To stop people, in particular young people, from becoming involved in offending behaviour and becoming prolific offenders
2. *Catch and Convict*: actively tackling adults who are already prolific offenders
3. *Rehabilitate and Resettle*: working with identified prolific adult offenders serving custodial or community based sentences to stop re-offending by offering a range of support services post-sentence, delivered through joint agency working.

The 'prevent and deter' strand comes effectively before the bulk of offender management partnership involvement. The 'catch and convict' strand is largely the domain of the police⁵. Under the BCSP 'Drug Treatment and Offender Management' Core Priority Group, the main focus for partnership work is the 'rehabilitate and resettle' strand of the strategy. Thus this strand is the main focus of this report.

With the introduction of NOMS (the National Offender Management Service) – as recommended by Carter (2003) - both the National Probation Service and HM Prison

⁵ Although, of course, under section 17 of the Crime and Disorder Act 1998 the local authority is under a statutory duty to work in partnership with the police – and others where possible – in reducing crime and disorder. As such, they should work together to make more convictions more likely.

Service should be already moving towards closer working in offender management. In fact, in January 2005 a unified NOMS offender management model was suggested (NOMS, 2005). Both probation and the prison service are main partners under the 'rehabilitate and resettle' strand. Other partner agencies include the police and Drug Intervention Programme (DIP) providers. The 'rehabilitate and resettle' strand builds on existing practice:

- *The NOMS* approach to managing offenders through a single offender manager having 'case management' responsibility for an offender at all stages through their sentence.
- '*Resources following risk*' – PPOs will be identified because of their disproportionate offending or the impact they have on their communities, with the resources allocated to them reflecting this.
- *OASys or ASSET assessments*⁶ – All adult PPOs sentenced to community or custodial sentences of a year or more will have an OASys assessment to identify their likelihood of re-offending, their risk of serious harm, the needs related to their offending, and the interventions required to rehabilitate and resettle them.
- *The National Reducing Re-offending Action Plan* (Home Office, 2004e) which sets out the framework under which the pathways should be developed both regionally and locally.

(Source: Home Office, 2004b)

The aim of the Action Plan is to develop Local Reducing Re-offending Action Plan pathways, including accommodation, education and training, health, drugs and alcohol services, finance and benefits, work with families of offenders and on offender attitudes and behaviour.

In essence, the 'rehabilitate and resettle' strand aims to: '...ensure that in every CDRP close partnership working is in place, with the result that seamless, effective case management is guaranteed for every PPO' (Home Office, 2004b: 5). This builds on work developed under the Street Crime Initiative for tracking priority offenders (see Home Office, 2003b – joint inspection report).

⁶ OASys - The 'Offender Assessment System' is a standardised assessment process developed by the National Probation Service and HM Prison Service. ASSET is an equivalent process for offenders under 18.

The Home Office Guidance for ‘rehabilitate and resettle’ (2004b) sets out twelve key areas that partners need to assess, and address any gaps in the current arrangements. The actions required are shown in table 1.1.

Table 1.1 Requirements of ‘rehabilitate and resettle’

Overall requirements	Requirements for management of each PPO
<ol style="list-style-type: none"> 1. Local PPS scheme staffing 2. Identification of PPOs and criteria for removal from the scheme 3. Information sharing protocols 4. Provision of services for all PPOs (subject to the resources / risk principles) 	<ol style="list-style-type: none"> 5. Assignment of Offender Managers (to statutory cases) 6. Monitoring and information sharing 7. Pre-sentence reports (PSRs) 8. OASys or ASSET assessment / sentence and rehabilitation planning 9. Implementation of sentence and rehabilitation plan 10. Tracking PPOs through Prison estate and throughout the CJS 11. Ongoing support beyond sentence 12. Swift action against re-offenders including breach / recall for non compliance or in the event of future offending

Source: Home Office (2004b: 5)

Scope of the research

The main aim of this study was to assess the current provision of services for prolific and other priority offenders in Birmingham, and to identify gaps in the service delivery that can inform the development of the local PPO strategy and an action plan for the forthcoming year.

The research aimed to assess the services used by offenders, from the perspectives of partner agency personnel and prolific offenders, in terms of accessibility and service delivery. We also hoped to identify good practice in Birmingham.

Methodology

The research for this study was largely qualitative in nature and based on in-depth semi-structure interviews with agency personnel and with persistent offenders. A total of eighteen interviews were conducted with agency personnel, including representatives from strategic, management and delivery levels. Interviews were held

with personnel from: Birmingham City Council, West Midlands Police, the Drug Action Team, Drug Solutions Birmingham, EESPro, DIP, the National Probation Service, CARAT workers in prison, Learning and Skills Council, Job Centre Plus, Focus Futures, Rathbones and the United Evangelical Project.

Six semi-structured interviews were held with persistent offenders. The offenders were aged between 24 and 33, two were female and four male. In terms of ethnicity five were White and one Asian. While these would not be representative of all local PPOs, their views and experiences will point towards potential problems (and successes). These interviews were done in close collaboration with local police POPPS offender managers. The venues for these interviews included, for example, HM Prison Winson Green, a local bail hostel, in the house of a relative of an offender and the offender's own home. Police officers were present during three of the six interviews.

All interviews were transcribed and analysed for key themes. This evidence was supported by relevant statistics on prolific and other offending obtained from Home Office.

Structure of the report

The following Chapter of this report provides an overview of current strategies and structures in Birmingham for managing prolific offenders. This is followed by Chapter 3, which assesses the current service provision. Chapter 4 provides a gap analysis and then finally Chapter 5 presents the report's conclusion and recommendations.

2 Overview of current strategies and structures

Birmingham Community Safety Partnership (BCSP) is the largest CDRP in the country, covering a population of 977,000⁷. There is a complex partnership structure across Birmingham, with many of the key agencies involved in delivering services across the whole city, or covering different areas, with boundaries that are generally not co-terminus. The city is divided into eleven Local Delivery Groups (LDGs), with West Midlands Police having nine OCUs within Birmingham. The city is also covered by four Primary Care Trust areas. Probation is provided by the City of Birmingham Division of the West Midlands Local Probation Area of the National Probation Service (located across seven offices). The Local Criminal Justice Board and the Prison Service cover the whole West Midlands region.

Background

As noted, 'Drug Treatment and Offender Management' is one of five core priorities for the CDRP that is to be delivered locally through the LDGs, but strategically managed and directed through the centre. The aims of the 'Drug Treatment and Offender Management' Core Priority Group are:

- Reducing levels of re-offending especially amongst prolific and priority offenders
- Supporting the delivery of National Treatment Agency and national drug strategy targets for tackling drug misuse
- Helping to meet the PSA targets for crime reduction.

The Core Priority Group draws together the Drug Action Team (DAT) and existing programmes of work carried out through the BCSP in offender management. More intensive supervision and managing of targeted offenders has been ongoing for some time within Birmingham and the wider West Midlands region, involving the police, probation and other partners to a greater or lesser extent. There are effectively three strategies currently in existence in Birmingham for dealing with targeted prolific and priority offenders, who are deemed to require additional offender

⁷ According to the 2001 census 977,087 people lived in Birmingham (www.birmingham.gov.uk)

management services - each with their own criteria for involvement. These three strategies are:

- Persistent Offender Partnership Programmes
- Project Chrysalis
- Prolific and other Priority Offender Strategy

These project based activities have enabled working practices between partners to be established, and the current developments towards a coherent PPO strategy across the city will build on the structures and processes already in place.

Persistent Offender Partnership Programmes (POPPs)

A number of persistent offender projects were set up covering specific OCUs, generally funded initially by the Reducing Burglary Initiative or Targeted Policing Initiative streams of the Crime Reduction Programme, with other funding secured under the Single Regeneration Budget 5 (SRB5). The level of targeting of persistent offenders has varied across Birmingham, and has remained very much project and OCU based rather than being mainstreamed. The original POPPs scheme in Birmingham was primarily concerned with persistent offenders with drug problems, based in a single OCU and targeting offenders who either lived or offended in that OCU. Other OCUs set up similar POPP schemes, targeting offenders who were coming out of prison on licence, with many referrals coming from probation or CARAT workers in prison. Offender managers visiting offenders in prison would sign them up on a voluntary basis, although involvement can be made a condition of licence. Prior to and on release from prison, offenders are provided with assistance with finding accommodation, drug treatment programmes, help with education and training - where appropriate - and have a regular series of appointments with police and probation officers each week.

Funding and resources available to each of the OCUs for offender management differs substantially, with some schemes having external funding and a dedicated team of police and other staff for the project⁸. Others have fewer resources available and a police officer may be allocated to the offender management role as one task

⁸ Some OCUs were also able to offer offenders financial incentives for testing negative, or free bus passes to help with job seeking.

amongst many. This has obviously led to a discrepancy in the level of service that is available to offenders, depending primarily on where they live, or the area in which they have offended. In addition, those OCUs with fewer resources for managing offenders could not generate the number of referrals expected for other agencies contracted to provide services for offenders. From meetings with those involved in the Core Priority Group, it also appeared that, historically, these POPPS projects were being run in isolation at a local level, with little cross-over between different offender managers, even though the same services were generally needed or accessed across the city.

Two projects with dedicated police offender managers were visited as part of this research. These were both managed using a similar approach, engaging offenders identified in prison and signing them up to the scheme whilst still in prison, usually included as a condition of their licence. On release they would receive home visits from the police, and would have to keep appointments with probation, education and training providers and drug treatment services on a weekly basis.

Many of those targeted in these projects were PPOs (as defined in Chapter 1). However, a number of clients, either past or present, were identified on each project who would not have been included in the scheme under the criteria for the PPO strategy, although would still be subject to offender management through probation. The number of offenders on each of the schemes across the city varied, depending on the resources available. These projects had on average around ten offenders actively engaged at any one time, the majority of whom were male, and aged between 25 and 35.

Project Chrysalis

In 2002, West Midlands Police became involved in the Street Crime Initiative and used additional 'stretch target funding' to establish Project Chrysalis, targeting street crime offenders throughout the criminal justice process and beyond. Chrysalis was set up in October 2003 covering the whole of the West Midlands Police force area, and aimed at reducing reoffending by street crime offenders released from custody (GOWM, 2003). This involved officers from West Midlands Police, the National Probation Service and HM Prison Service, to provide a coordinated and targeted approach for jointly managing adult street crime offenders.

The level of intervention depended on the assessment of risk for each individual offender. Resettlement needs were to be assessed whilst in prison, with coordination between prison officers and police and probation offender managers (Project Chrysalis, 2004). In every case, a joint action plan around accommodation, basic skills and education, substance misuse, health, finance and other support was developed. A number of other interventions were available for use with higher risk offenders, including anger management programmes and curfew and exclusion orders, which could be included as licence conditions where necessary.

In the fifteen months since Chrysalis started in October 2003, a total of 1079 street crime offenders were referred to the project (Project Chrysalis, 2005), far more than was originally envisaged when the project was set up (Project Chrysalis newsletter, 2004). The majority of street crime offenders (94 per cent) were male and 60 per cent were aged between 18 and 25.

PPO strategy

The PPO strategy, introduced in 2004, will in effect encompass the existing offender management programmes in Birmingham, with a single coherent strategy to be implemented across all OCUs in Birmingham from April 2005⁹. This will focus on the targeted offenders identified locally through police, probation and prison assessments, using the PRISM and OASys assessment tools. The criterion for identification of a PPO includes:

- Nature and volumes of crimes they are committing
- Nature and volume of other harm they are causing
- Other local criteria.

Not all those targeted under the existing schemes would meet the criteria for inclusion in the PPO programme with the level of risk of harm and re-offending needing to be assessed. Street crime cases will continue to be targeted as PPOs under criteria set out in the offender management manual, currently being drafted for the Core Priority Group. Where there is some doubt as to whether an offender should

⁹ The requirement from the Home Office to adapt PPOs as a priority does not attract any additional funding.

be included, decisions on this should be taken jointly between police and probation, and other partners at the regular Shared Priority Forums.

Within Birmingham, many other statutory and voluntary partners have been drawn into the delivery of offender management work, particularly through the Drug Action Team (DAT), with referrals coming from Chrysalis, the POPP projects, and drug treatment services, now coordinated through the Drugs Intervention Programme (DIP). Statutory partners included the Learning and Skills Council, Job Centre Plus, and Birmingham City Council Housing Department. Other agencies are or have been involved in delivering the targeted offender management services covering accommodation, mentoring, drug treatment, social skills training, employment, training and education. All these agencies involved in service delivery will participate in the fortnightly Shared Priority Forum meetings, organised at an OCU level, to discuss case management and progression of individual offenders targeted as PPOs.

Information sharing protocol

An Information Sharing Protocol is being drawn up for consultation with all the partner agencies. This is being drafted to cover the whole of the West Midlands area and not just Birmingham. It aims to provide the legal and procedural framework for the sharing of information required for effective implementation of the PPO strategy, meeting the requirements of all parties involved. It still needs to protect the right of those targeted under the PPO scheme, ensuring that only information needed for effective multi agency case management is exchanged. The protocol will indicate the level of information that will be made available by each partner, and cover issues around: the processes involved; gaining consent from the offender; security; and storage of the information.

Performance management and tracking offenders

To track the progress of offenders through the PPO management processes, a performance management framework is being developed locally to assist in local management of the strategy between partners. It is intended that this will include a detailed assessment of needs, taken from the OASys reports, and the action plan for each client, naming the agencies involved in service delivery and the lead officers

responsible for this. It is envisaged by the Core Priority Group that the action plans will be reviewed against progress over a twelve month period, with more regular reviews at the start of the programme when an offender is released, as this is when the most intensive activity will be taking place.

This will sit alongside the CLIPS (Client Information Partnership System) database which holds information about offenders who have tested positive on arrest and have been referred on to drug treatment interventions under DIP. This can be accessed by Arrest Referral Workers based in police stations, the courts, probation and prison services (NOMS), Primary Care Trusts and treatment providers, with access restricted to the level of information required by each of the partners.

In addition to the systems in place for performance monitoring and tracking of offenders locally, there is also a requirement to feed local statistics back to the Home Office. Monthly reports from the Home Office provide the headline measures for each area, and present the national picture. This draws on data taken from JTrack, a system for monitoring the progress of PPOs through the criminal justice system from arrest to disposal, and additional data supplied by BCSP.

It was envisaged that each OCU in Birmingham would identify around 30 PPOs to target under the strategy, giving a total of around 270. According to the latest report from the Home Office for December 2004 (Home Office, 2005), there were 321 offenders involved in the PPO scheme in Birmingham during that month. Over 98 per cent were male, with 53 per cent aged between 18 and 25. In terms of drug use, across the nine Birmingham OCUs, 408 people were drug tested under the DIP programme in December. Of those, 13 (three per cent) were PPOs, and 9 of these PPOs tested positive.

Nationally, 57 per cent of PPOs tested positive for Class A drugs. The largest proportion of PPOs (40 per cent) was in custody, either on remand or serving a sentence. Twelve per cent were in the process of going through the criminal justice system. Seventeen per cent were under active supervision in the community, with a further 12 per cent at liberty and subject to proactive police targeting.

Current service delivery for targeted offenders

In addition to the overall strategic view on the management of prolific and other priority offenders, it is necessary to understand how the existing services are managed and delivered in order to identify the gaps that exist. The PPO strategy is being implemented at a time when many changes are being made within Birmingham at both strategic and delivery level, and it may be that many of the problems and gaps that have been highlighted during this research are already being addressed.

Case management

Ideally under the PPO scheme offenders will be managed jointly by the police and probation. In practice in the past, offenders released from prison on licence have been managed by a probation officer, and other targeted offenders managed by the police:

The probation service think they're responsible for those on statutory orders, and police are responsible for those on non-statutory orders. And I think we need to a much more comprehensive shared management (DIP officer 1).

The POPPs schemes were primarily police led, and so a number of OCUs which have more developed existing schemes will be able to build on the experience they have. Under the changes and restructuring underway within probation, each OCU will be allocated a lead probation officer, who will be a member of the new 'tier 4' team which will incorporate responsibility for PPOs.

Existing examples of probation and police working together show that it can be an effective partnership, when joint case management approaches are used, or a designated offender manager is clearly established, for example:

... there are several meetings where I think police and probation work together. The MAPPA, the public protection panels, where they actually discuss the cases that are presented to them. Probation and police really work well together in that context. If a person is released on licence from prison, an offender manager is responsible for caseload, where [the] offender

manager can be either police or probation. Sometimes they need to work together (Local authority policy officer).

The Shared Priority Forums will provide an opportunity for *all* the partners involved in offender management to discuss the needs of individual clients. These are seen as having been effective in the past for the POPPs schemes in achieving results.

It's just by getting people round the table that you can begin to highlight that things are not as clear as you thought they were (DIP officer 1).

Where POPPs worked best was where it was seen as a partnership and where there was capacity at the police probation end to actually make it a working partnership ... and discuss the individuals in terms of their needs and work together with the drug agencies, with the employment training agency, with accommodation, with probation, with police, around the table, and having time and energy and effort to put to that. Where it's less effective is where you just got a referral form across the fax machine (Focus Housing officer).

However, these meetings are sometimes seen as being dominated by the police, with other partners possibly feeling that they are not seen as equal partners. This is particularly an issue for the voluntary sector, for example:

Shared priority forums at the moment are designated by the OCU areas so they're under police control (Local authority policy officer).

The voluntary sector in terms of power, in terms of strength to do things, is always seen as a cheap tag-on ... At that level I would like to see the position of the voluntary sector far more recognised and enhanced so that we can actually work on a level playing field with what are quite often big bullies (Focus Housing officer).

One of the consequences of a partnership approach is that PPOs have to be able to keep a large number of appointments. While some of the offenders interviewed had no problem with this, it did cause difficulties for some, as one interviewee said, '[You] have to see too many different people, you don't know who you're seeing' (m6¹⁰).

¹⁰ Each offender has been coded m/f for gender and numbered 1 to 6

This offender also noted, 'There's too many appointments with too many different people. If you miss two appointments you get breached.' Having appointments is unavoidable, however some difficulties can be minimized by effective case management – for example perhaps by holding joint meetings or having meetings that are located in different areas held on different days.

Drug Treatment Services

Home Office figures for 2005¹¹ show that nationally around 58 per cent of PPOs test positive for drugs, with a slightly higher figure being given for Birmingham, although this is based on very small numbers being drug tested per month through DIP. Interviewees involved in drug treatment indicated anecdotally that around 60-70 per cent of PPOs needed access to drug treatment.

Drug treatment services within Birmingham have been developed as part of the work of the Drug Action Team (DAT), with the Drugs Intervention Programme (DIP) being implemented across the city to provide treatment services and other needs for offenders with drug problems. The whole infrastructure is currently undergoing substantial changes, with four DIP teams being established, due to be fully operational shortly. These will aim to provide a comprehensive and coherent treatment service across Birmingham. Ideally, there will be one single point of contact for all those accessing services through the DIP - including PPOs with drug problems - allowing appropriate referrals to be made, and then tracked through treatment. There are three main pathways into drug treatment for PPOs in Birmingham:

1. On arrest when an offender is drug tested for certain trigger crimes - if the offender is identified by the police as a PPO, he/she will be referred at that stage to Drug Solutions Birmingham (DSB) for assessment and treatment, rather than to the DIP team, as would be the case for non-PPOs.
2. When a PPO is in prison – through referral to the CARAT teams.
3. When a PPO is being released from prison - the initial assessment from the offender manager will indicate whether he/she should be referred for drug treatment, and the appropriate referral can be made to DSB.

¹¹ Headline figures from PPO strategy, February 2005

In practice, referrals can come through to DSB from a number of partner agencies including probation, the police, CARAT workers, Drug Intervention teams or from the eleven OCU-based Shared Priority Forums. The interventions provided include prescribing when necessary, regular drug testing, support, harm reduction advice and therapeutic interventions. The DSB workers are also involved directly in the Shared Priority Forums, and in coordinating work with GPs and offender managers.

DSB drug workers are based in probation offices, and any offender being referred through to them should be allocated to a drugs worker within a week, although according to DSB it may take another two to three weeks for a follow-up appointment to be made.

Gaps may exist in ensuring that all PPOs received the service they need in terms of drug treatment, possibly due to the changes being implemented in identification, referral and service delivery. An interviewee from the DIP programme indicated that this should improve as processes are put in place and tracking of offenders improves and existing problems are ironed out:

If I was absolutely honest with you, ...could I put my hand on my heart and say that every PPO who had a drug treatment need was receiving drug treatment? The answer would have to be I don't know at this time (DIP officer 1).

Another concern raised was in relation to different partners being fully aware of what services were available in terms of drug treatment. Police offender managers in existing POPP schemes appeared to be aware of the services provided by DSB, but we are unable to provide information around awareness of those in other OCUs.

Not all the police offender managers realise that they can access the drug treatment services that quick. It's often the ones that are managed by the probation more that have access to the treatment path. So there's confusion really (DIP officer 1).

A lot of the work done previously with the POPPs schemes, and the way in which offenders can access help with other services, seems set up to be of greatest benefit to those offenders who have drug problems rather than those who do not. As indicated in the figures from the Home Office above, up to 40 per cent of PPOs may

not require drug treatment services. Many of the service providers interviewed have only dealt with those needing drug treatment, and were unaware of the services available to PPOs not receiving drug treatment. Current service provision under the PPO strategy is intended to offer the same wrap around services to all PPOs regardless of drug treatment needs. This needs to be communicated more effectively to all partner agencies.

There are schemes in place that actually provide a mechanism to move drug offenders into independent living. ...The non-drug user, unfortunately, is unlikely to receive that (Local Authority policy officer).

All of the offenders we talked to had drug problems in the past and were receiving help to overcome this. Part of the home visit to offenders by one offender management team involved drug testing on a weekly basis. Two of the offenders who had been on the POPPs scheme for under three weeks had yet to have an appointment with DSB, and one male was still using heroin, though not as regularly as before. This offender said that waiting two weeks for treatment was an improvement on his previous experiences. This support was seen to be important for him, saying, 'I know if I need it I've got the support. If it comes down to medical support before I'd have to wait six months. It's only two weeks this time' (m6).

Housing

According to the 2003 Resettlement Survey of prisoners in England and Wales (Niven and Stewart, 2005) the majority of those surveyed said they had accommodation arranged on release (69 per cent of men, 62 per cent of women and 90 per cent of young offenders). However, just 19 per cent of all prisoners, and only a third of prisoners with no accommodation arranged on release, received help in looking (p3). Accommodation - and a lack of support in finding it - can be a major concern for many prisoners nearing release.

For offenders that do not have accommodation to return to – be that their own or that arranged by family or friends – some sort of help and direction is often beneficial. In Birmingham there are a number of agencies that have a part to play in assisting with the housing needs of PPOs. The most obvious is the Housing Department of Birmingham City Council. The Housing Department has developed policy for re-

housing high risk offenders, linked to offender management in terms of MAPPA structures, the PPO strategy and local prolific offenders. Other provision is via Registered Social Landlords (RSLs), bail and other hostel provision, the private rental sector and other voluntary provision.

Apart from the City Housing Department, the main other provider at present is Focus Futures, an RSL that provides a combination of rented flats and hostel places for single homeless people, those with mental health and learning difficulties, sheltered housing for older people and accommodation for young people. In addition to their own supply of housing, private landlords can also be used. Focus Futures have a contract to provide accommodation with the DAT (via the Drugs Intervention Programme), although this is under review.

Additionally there is the 'bail hostel' provision of the National Probation Service Residential Services section. Across the West Midlands there are seven Home Office Approved Premises (hostels) with 136 bed spaces. These offer 'structured short-term accommodation' for offenders on: community rehabilitation orders with a condition of residence; prison licences; home detention curfews; drug treatment and testing orders; or court imposed bail¹². There are also two specialist hostels in the West Midlands region - one for women and one for mentally ill offenders - although these take residents from across England and Wales.

Effective partnership working has in the past been key for housing issues to be resolved. An example was provided by the Chrysalis programme which worked with the BCSP, prisons and probation in order to track a person entering prison. Within the first 48 hours in custody the objective was to address housing issues, such as a tenancy that may need closing down.

Housing, and a general lack of it, has been identified as one of the main problems facing the PPO scheme, for example:

We like to go in [prison] at least three months before they're released, as that gives us time to get the forms for DSB if drugs is an issue. [However], the

¹² See: <http://www.westmidlands-probation.gov.uk/wmps/info/residential.asp> (correct at March 2005). From April 2005 the sentencing measures introduced with the Criminal Justice Act 2003 will be in force. While some of the terminology may change, hostels will continue to be used.

main reason is basically the housing because there's absolutely no housing whatsoever. So we need to get them on to the list as soon as we can (Police offender manager 1).

This problem is also recognised by the housing providers. An officer from Focus Housing similarly observed, 'there just isn't the property available'. However, he also went on to note that the police can have something of a 'demand mentality', a kind of 'we're paying for this...therefore we will get it in terms of accommodation'. As the RSL have not got accommodation on demand, 'there's increasing frustration'.

Focus Futures were initially brought on board to provide additional places, although they have had problems in finding suitable accommodation for referrals:

Everything is under enormous pressure. We regularly have to either close our waiting list or only take applicants for very specific property with a very specific set of circumstances. There just isn't the property available (Focus Housing officer).

Private landlords were approached to try and fill the gap in provision but, according to one police officer, 'many [private landlords] are dropping out of the scheme as they do not want offenders living in their properties' (Police officer 1).

A key issue for some offenders on the PPO scheme will be keeping away from drug using friends and associates. For those currently registered on the POPPS scheme this risk has been identified, and was thought to increase if living in a hostel. For example, one offender commented, 'I've been in a hostel...but it's all happening there' (m1). A police Offender Manager working on the POPPS scheme similarly observed:

...and 99 per cent of them are breeding grounds for crime. If you've got somebody who genuinely wants to make a change to their life and get off drugs, get away from crime, they're coming out of jail, and they go into a hostel, then that isn't going to help them. That is a major, major issue (police offender manager 2).

The POPPS scheme involves regular meetings between offender and police offender managers. One offender that was interviewed, while seeing the benefits of police

contact, saw it as a potential problem if they came to see him at his hostel. If he was seen with a police officer, he thought the other residents would automatically assume he was an informer, as he observed, 'It can be made easy by different people, [or] it can be difficult' (m2). A further issue raised was the different conditions on accommodation. For example, this individual could stay in his current housing if he was unemployed, but would have to move elsewhere with work. With this in mind he has been referred to Focus Futures. In other cases such conditions may act as a disincentive to look for work, or may make black economy working a more attractive alternative.

Many of the offenders on the PPO scheme will have other multiple needs, particularly around drug use and mental health issues. This 'vulnerability' has been identified by existing schemes. For example, in talking about the Chrysalis programme, a policy officer from the City Council noted that 'prisoners and ex-prisoners [were] presumed to be in the vulnerable category'. However, this vulnerability can result in the chaotic lifestyles and unpredictable behaviour of some, an issue that has affected some housing availability. For example, an offender interviewed at a bail hostel was having particularly acute problems obeying rules, feeling intimidated by staff and being aggressive towards staff. In her own words, 'It's doing my head in being here...the staff here just wind me up ... if I don't let it out, I just get even more wound up' (f4). She wants to move, however experience of such cases can have a greater impact on the willingness of private landlords to take on PPOs in the future.

A more successful example was provided by one offender on the POPPS scheme who now lives in her own Council property. Not only did the POPPS police offender managers help her in getting the house, they also helped with such things as sorting a cooker out for the property:

And she was doing well, we supported her with her housing, there's money there to help people set up with a new house, there's £250, so we got her a washing machine and a new cooker with it (Police offender manager 1).

Employment, Training and Education (ETE)

The Action Plan for the Drug Treatment and Offender Management Core Priority Group aims to support the Job Centre Plus and Learning and Skills Council

strategies and targets. Representatives from these organisations are involved at a strategic level in the Core Priority Group. Job Centre Plus is the statutory employment and benefits agency of the Department for Work and Pensions; the Learning and Skills Council identifies basic skills needs, and provides vocational education and training to meet these needs.

Interventions around employability cover the improving basic skills, education, training and access to appropriate employment for PPOs. This work is implemented alongside a similar capacity for other drug using offenders who are not PPOs accessing services through the DIP (Core Priority Group, 2004).

As with other services, the provision of ETE services is being reviewed, with the DAT being responsible for contracting out the services for both the DIP and PPOs. The Employment and Education Support Project (EESPro), managed as part of the charity Turning Point, is the main provider under the PPO scheme for ETE. They are responsible for the assessment and delivery of services around basic skills, education, training and eventually employment for offenders under the PPO strategy. Other agencies or projects, such as Working Link, Progress2Work and Crossmatch Solutions, were mentioned by police offender managers, which they may contact directly for assistance with provision of ETE support to their clients. Some of these may be more suitable for the PPO population than others. EESPro will accept clients with existing drug problems - who may lead more chaotic lifestyles - which other agencies are not prepared to accept. They provide assistance to their clients including careers advice, confidence building, interview coaching and CV writing.

Referrals are made to EESPro when a PPO is released from prison. This has been brought up as an issue in two interviews, with referrals not always being made directly to EESPro by the police or probation offender managers. The infrastructure is in place for referrals, but in reality does not always happen as intended:

It's a real struggle to get probation officers to see the value in referral and supporting that referral into employment training and education ... we're not getting referrals through, it's as simple as that (ETE officer 1).

We can't generate in any way referrals, or in any way influence what's happening. We're dependent upon what comes through from the police and

there's no consistency basically, they all seem to manage it in different ways (ETE officer 2).

Clear guidelines are needed to ensure that referrals are made via the correct pathway. There has been some indication that police offender managers have made direct referrals to employers or other agencies due to frustrations about the time taken to assess needs and find suitable employment or training.

Some of the police are like, 'get him into a job, he needs a job'; well that's not how we work. We're looking perhaps at first of all whether they've got issues around basic skills, and what we're looking at is helping people get to where they want to be and if that's employment and training. But we're looking at finding people something meaningful to do. So we might want to look at first of all their basic skills, to help them access confidence-building, anxiety and anger management and really start from grassroots up (ETE officer 2).

There also needs to be greater clarity in the roles of the different partners to avoid duplication of effort, and to make the best use of the expertise being brought in to deliver services for PPOs.

The problem is that, we are the experts in education; they are the experts in criminal justice. ... the POP team had gone out, was trying to engage employers to recruit ex-offenders, ...We wouldn't advise someone about getting treatment or we wouldn't advise someone about their licence, we leave that to the experts and I think maybe that could be a good thing for other people to do as well (ETE officer 3).

PPOs have often followed some form of work or training whilst in prison, and often this is not sustained when they leave, as there appears to be no means of following this through once a PPO is released.

Because the way the prison service operate, I've seen the training centres and I've seen the various work that's been taking place on rehabilitating offenders in prison. That seems to be done in isolation. I don't think the folks in there realise that unless they communicate what they've done on that individual with the outside agencies they can't follow it up (ETE officer 3).

We pick people up who've probably started some sort of course in prison, they come out, and there's no care plan that travels with them. We've got very dependent on the client's understanding of what he's had and trying to pick that up again and it all seems to be lost (ETE officer 2).

Whilst there is some communication between offender managers and the CARAT workers within prisons, there could be scope for a more joined up approach in terms of training and employment opportunities that have been undertaken whilst in prison. It should be remembered that ETE is not necessarily going to be a priority for a PPO, as one offender interviewed in prison observed, 'I ain't really thought about when I get out, what I'll do and that.' (m1). However, a more joined up approach may engender more enthusiasm.

According to recently published Home Office figures (Niven and Stewart, 2005), 30 per cent of prisoners have employment, training or education arranged on release. Over half of these opportunities arose through friends, family or personal contacts, with only 15 per cent using voluntary or statutory agencies, including the Prison Service. Of the offenders we interviewed, none had employment arranged on release, although all were referred to EESPro or other agencies to assess their ETE needs. This was usually accessed within the first 2-3 weeks after release. All of those interviewed said they wanted to work or do some form of training, primarily to keep them busy and keep them out of trouble, although only two of the six interviewed were actually engaged in this type of activity. The apparent suitability of ETE opportunities, and consequent motivation to complete, was an issue raised, with one offender recalling a computer course he had been put on through Learn Direct, 'I didn't want to do it so I knew it wouldn't work' (m1). As already noted, one offender said he would have liked to have worked, but would then not be able to stay in his accommodation, as the hostel was solely for those who were unemployed.

Mentoring

Mentoring of offenders can be by statutory or voluntary agencies, or by volunteers from the community. The aim is to pair an offender with a mentor so that trust and a one-to-one relationship can be developed where assistance, guidance and support is provided by the mentor. The use of volunteers has recently been evaluated in the youth justice field with a range of projects under the Youth Justice Board Mentoring

Initiative run by Youth Offending Teams. While these may not have had much impact on reoffending, mentoring was seen as a 'worthwhile and beneficial experience' by the young people involved, especially in terms of improving self-confidence (Tarling, Davison and Clarke, 2004: 7). An earlier evaluation of the ASSET¹³ initiative in London - working with adult offenders - found it difficult to sell the concept of mentoring to the client group (see Sarno *et al.*, 2000). This is not to say that mentoring will not work with adults, just that some people may be uncomfortable with the focused attention. Alternatively, an offender who signs up to mentoring may have unrealistic expectations of what can be done for them.

Within Birmingham we interviewed two providers of volunteer mentoring to adult offenders, these being the United Evangelical Project (UEP) 'Prison Link' initiative and Rathbones. Both are charities that ordinarily focus on a particular client group, Black and other minority ethnic (BME) offenders for 'Prison Link' and adults with moderate learning difficulties for Rathbones. Taking the example of Prison Link first, their main focus is supporting the particular cultural, family and other needs of BME prisoners:

The Probation Service refer offenders to me who have just been sentenced and I will pay them a visit initially, or we'll write to them and then we'll support them with their particular needs in prison. It may be a cultural need, it could be to do with the sentence, it could be family need, it could be challenging their offending behaviour, it could be many things. And then we help to rehabilitate them back into the community (UEP officer).

Other help offered is with housing, with offenders referred onto RSLs such as Focus Futures. At first this seems to be a duplication of effort; however the interviewee from UEP thought their place was in reaching offenders that may not respond to other agencies. The interviewee thought they had a level of trust with those referred to them that may be missing between the police and certain BME groups. The charity was thought to be able to offer help to offenders who may have a negative image of the police:

Prison Link's role would be to try and attract Black and Asian offenders to the programme because there is a stigma attached to working with the police, and they tend to want to resist working with the police (UEP officer).

¹³ 'Advice and Support Services for Education and Training'

The second provider of voluntary mentoring was Rathbones. While their main focus is with adults with moderate learning difficulties, they also have a contract with probation to provide mentoring, currently targeted at drug dependant offenders¹⁴:

We have the contract with probation really just to provide mentors to assist their offenders each year. The contract's been going just over five years. Each year, you know, the goalposts changes and the target changes, so the target this time around is drug offenders (Rathbones officer).

Help is provided by trained volunteers who assist with finding employment or training. While their contract is with probation, the referrals also come from prisons and from the police.

Although such volunteer schemes are available, for many offenders under POPPS the mentoring they receive is from police officers (offender managers). As noted, the negative image that some have of the police may dissuade them from being part of this scheme. If there is a joined-up approach, this is hopefully where groups like Prison Link will step in. Nonetheless, of the six offenders interviewed who were on POPPS, all saw the benefits of the mentoring offered by the police offender managers, for example:

They've treated me no different, you know what I mean? Just a little bit of trust (m2).

At fist I wasn't keen on the idea to be honest...it took me a while to trust them. ...I'm quite surprised with myself [as they've] become good friends (f3).

They have helped me with everything ...I've got [the offender manager's] phone number, though don't need to phone him very often ... I can phone him at three in the morning if I want (f4).

This enthusiasm is tempered by the observation by offenders that it would not suit everyone; that, 'It wouldn't have worked if I hadn't wanted to be on it' (f4).

¹⁴ I.e. the main criteria drug dependency rather than learning difficulty.

4 Gap analysis

The interviews and meetings held during the course of this study have uncovered a number of gaps in the existing delivery systems and processes involved in the PPO strategy. A number of themes have emerged which could indicate where further work is needed in delivering services - in the short to medium term - to meet the needs of PPOs, and to stop them reoffending.

With the development of the PPO strategy and reorganisation and restructuring to enable service delivery currently underway, many of these gaps may have already been recognised, and measure being implemented to overcome them. However, for completeness, all the themes that have emerged are discussed here.

Development of a coherent strategy

There appeared to be some confusion amongst a number of interviewees about the nature of the PPO strategy, and how this fitted in with the existing offender management programmes in the city, such as POPPs and Chrysalis. With the changes that are occurring, many people are uncertain about what the PPO strategy actually is, and how it will impact on the work they are doing. This is particularly relevant for those OCUs that have not been as heavily involved in offender management through the POPPs programmes, to ensure that a consistent service can be delivered regardless of which OCU is managing the offender.

The POPPs one was the pre-runner of this PPO theme, and they were, ...not isolated, that's the wrong word, there wasn't one everywhere, they were projects, so you didn't have it replicated in each area. The PPO policy, strategy, whatever, is to ensure that every OCU in every area has got a similar offender management process, as I understand it. So POPPS as it was should cease to exist really, and it should become this lovely coherent offender management (DIP officer 1).

I see [with] the Chrysalis and PPO project, things are going to run in parallel, there are going to be very similar issues (Local Authority policy officer).

Alongside this, problems may arise in developing the OCU-based strategy as the majority of other partners do not work within OCU boundaries. Similarly if different agencies have very different agendas:

Coterminous boundaries really [are important], coterminous boundaries for the people that you're working with. For the system to work you've got to have everyone working together. You've got to have an individual probation officer working together with the police, with a drug worker, who know each other and work as a team, have fortnightly meetings where you go through and discuss everyone, that's paramount to the success of it, else everyone ends up doing their own thing, like we've been doing for years and years (Police offender manager 3).

Communication

Linking in with developing a coherent strategy across the city is the importance of communicating the changes that are occurring to those involved on a delivery level. Other partners who may not be directly involved, but need to understand what the Core Priority Group is doing, will also need to be kept informed about how the services are being delivered. Communicating the messages about how the different strategies and services are linked across the city is no easy task, due to the large and complex nature of the organisation within Birmingham.

A conference held at the end of February has gone some way to explaining the changes that are occurring around drug treatment and offender management, and similar conferences, seminars or training days could be held on other themes. Clarity will be needed about what message is being presented.

POPPs was launched with a big fanfare and a launch conference, and all that sort of stuff, and even at that time it was clear that some people weren't really clear on what it was all about and what was going to happen (Focus Housing officer).

It was clear from our interviews that those already working 'on the ground' to deliver offender management services did not necessarily see the overarching PPO strategy

as having much impact; they would carry on with what they would have been doing anyway. Some did not see it as being relevant at all. Explaining the overall strategy and how individuals fit into this is important in ensuring everyone understands the role they are playing. When asked how his role would change with the PPO strategy, one offender manager gave the following response:

That's what we're waiting to see really. I think the new strategy will be just working with the identified problem, persistent offenders, which we do anyway. We go to the Shared Priority Meetings anyway, and we have from day one. Most of the people we are dealing with are PPOs anyway. They've either been on the scheme, are on the scheme at present, or wish to go on the scheme. It will just dovetail into that. I don't think there will be any difference. The only difference there will be is that they won't have a choice (Police offender manager 3).

Clarity of roles

Many of the people and agencies involved in the case management and service provision appeared to be carrying out similar roles. Police offender managers in some cases would look for employment opportunities, housing and provide a mentoring service to the offenders. Volunteer-based mentoring services would similarly look for accommodation, and drug treatment services performed a case management role. Although there will be some overlap between roles when dealing with case management of offenders, duplication of work should be reduced as far as possible, with all partners understanding the role played by other service providers and partners.

They've got to understand what their roles are. They can't circumvent what's been put into place. It's going to be dangerous for drugs workers in offender team management throughout the process to go outside of the box of treatment programming if you like. It just doesn't make any sense to me, but I can understand the element of frustration if you're with a client, and the client says I don't have a script any more, so what do you do? You pick the phone up and call another GP instead of finding out what was the problem (DIP officer 2).

The Shared Priority Forums need to ensure that the occurrence of such repetition is minimised, and opportunities for delivering services to an individual is enhanced through joined up working between the agencies.

Tracking of offenders

The PPO strategy is designed to follow targeted offenders throughout their offending career, whether they are at liberty in the community or going through the criminal justice process, including if they are serving a community or custodial sentence. Identifying people as PPOs at all stages of the system is important in ensuring they receive the intended treatment and services, and can then be tracked. Two crucial stages were identified:

- 1 when an offender was arrested;
- 2 and when they were serving a custodial sentence.

There needs to be a clear mechanism in place so that when an arresting officer or arrest referral worker is dealing with an offender, it is clear whether or not they have been identified as a PPO.

One of the things that we've got to get really clear is that at this time the offender is not always identified as a PPO or a non PPO in the custody suite with the arrest referral worker. Hence you can get them going off down the wrong route. So what we need is a really fail safe system where it checks the computer, the police computer, it flags them up as a PPO... That clarity is not there at the moment if you ask me (DIP officer 1).

This also applies to prison officers being able to identify PPOs when necessary.

We've got an operational question of how do the police inform the prison service who a PPO is and how do the prison service identify who a PPO is, so that they can put them through a fast track system for re-housing and contact us? Those kind of things need to be worked out (Local Authority policy officer).

As mentioned earlier, a performance monitoring system is being developed to track offenders through the system electronically, as most files appear to be paper based at present. Having electronic files will help keep all partners informed of needs assessment and progress, so long as information sharing protocols have been agreed to encompass this:

Technically you ought to be able to get hold of the probation officers who are case managers, and from their case files they ought to be able to tell you if their OASys file has been done, they ought to be able to tell you the offenders' needs. Only, of course, it's not on electronic, it's all paper (DIP officer 1).

Information sharing

Work is still being done on developing the information sharing protocol for use between the statutory partners, and this also needs to be extended to cover the other agencies. One area of concern was that problems of confidentiality may arise at the Shared Priority Forums. The informal nature of meetings between partners working closely may mean that personal information may inadvertently be revealed that is not covered under the information sharing protocol, for example:

There's a massive issue around confidentiality, especially at the Shared Priority Forum. It's difficult to protect boundaries and ensure that workers keep confidential information (Drug treatment provider).

You've got to be careful of confidentiality as not everything needs to be shared in my view. And that's what we're trying to do with the information sharing protocol, 'what is it appropriate to share in all cases, did they turn up, are they engaged, and what is confidential healthcare information that nobody else needs to know except healthcare workers?' That for me is key, because I don't think people sign away their rights to every twist and turn of their lives being disclosed (DIP officer 1).

For others it is not the actual details that are exchanged, but when the information is shared.

I think, maybe not the nature of the information, but maybe the timing, if we could improve the speed of the communication sometimes. We don't get to hear about things maybe until a little bit too late (Probation Officer).

Having the protocol in place, with all parties understanding what is covered by this should facilitate better partnership working: 'If an agreement was agreed with the agencies it would save a lot of time and resources' (ETE officer 3).

Identifying and engaging with offenders

There needs to be consistency across OCUs and the Shared Priority Forums about who is being targeted under the PPO scheme. The difference in scale and resources between methods used in different OCUs means that more people can be identified and targeted in some areas than in others. There should be a consistent set of criteria used, albeit keeping some scope for local targeting to ensure the right people are identified.

Some OCUs have got better at targeting than others. Some have got too many, some have got too few. It's not absolutely clear. So it's quite hard to set up monitoring systems until you know what your baseline is. If you don't know who's in and who's out, how do you track them? (DIP officer 1).

The POPPs schemes we visited mentioned that they targeted offenders who either lived or offended in their OCU area. This will obviously lead to some overlap between PPOs who are targeted within OCUs, and it was not apparent during the research how this was being addressed in practice.

The one thing that seems to confuse is when someone lives in one area, offends in another area, spends time in custody, then comes out and moves to another area, perhaps with a relative. That again doesn't have any impact on an EESPro POP worker, because eventually they should come through one of the POPPs but I do think it causes confusion across the OCUs as to who should actually have him (ETE officer 2).

Referral process

It is envisaged that the new DIP structure, with the use of the CLIPS database, will provide a single point of contact and from this point be referred to the appropriate services. With the POPPs scheme, the police offender managers generally faxed through referral forms to the relevant agencies when an offender had signed up to the scheme. Until the single point of contact process is in place, there needs to be careful coordination to ensure that offenders are referred to the appropriate agencies and that this can easily be tracked by those involved, so that all partners receive the relevant information and can act on it. It is not clear if all partner agencies will have access to the CLIPS database, or if additional referral processes will be used for some agencies.

For the PPOs programme, the referrals come down from the police for them, for some reason. I think it's because they target who they want, then they tend to refer them to us, and then we make that link with probation and they tie it all in together (UEP officer).

We tend to just use the normal referral form and verbal referral. I think it's about relationships as well isn't it, you can phone someone up and fill them in over the phone, can't you (Probation Officer).

Prioritising service delivery to PPOs

In general, priority was given to getting PPOs referred quickly to partners agencies, and setting up initial meetings to assess the needs of each individual. There was not necessarily the scope to find housing provision or employment opportunities more quickly than for other clients accessing the services. Each case would be looked at on an individual basis, and acted on accordingly.

PPOs won't necessarily be given priority in terms of housing, they will be given priority in terms of fast tracking their applications. ...which would get them onto the housing register at a date earlier than they would normally be (Local Authority policy officer).

I'd term it in terms of these individuals have a member of staff set aside specifically to work with them, and that's what's being purchased. There's never been any sense of them purchasing a greater right to getting a secure tenancy or assured tenancy, and it's never come with a priority in terms of getting into a hostel (Focus Housing officer).

Issues concerning Black and Minority Ethnic PPOs

Most of the offenders targeted under the POPPs scheme were White males. According to the returns so-far sent to the Home Office, one quarter of the PPOs identified in Birmingham are of non-White ethnicity, with a further 26 per cent of PPOs where ethnicity has not been recorded. No issues specifically around ethnicity were raised during this study, although this could be because there may be a mismatch between the ethnicity of the referrals made to partner agencies and the PPO population, as an officer from Focus Housing noted, '[referrals are] exclusively white, and 90 per cent male'.

The one exception to this was for mentoring services, where requests were made by some PPOs for mentors to be of the same ethnicity as themselves. This then, of course, depends on availability of individuals.

We've had a few referrals, for example [a] White male has requested a mentee of the same cultural background, and depending who's on the books at that time we haven't been able to match them as quickly as we'd have liked to have done. Unfortunately there have been a couple who haven't been matched at all because we haven't had people who have suited them (Rathbones officer).

Length of time supporting PPOs and an exit strategy

The time spent providing support to targeted offenders has varied across the POPPs projects, from twelve weeks to six months - although there is provision for people to stay on the scheme longer if there is an obvious need for further assistance. The length of time spent working with PPOs needs to be time limited; however, there also needs to be some flexibility, and the needs of other partners should be taken into account.

According to returns sent to the Home Office (2005), during December 2004, 21 PPOs in Birmingham were taken off the PPO list. There is obviously some process by which the Shared Priority Forums can decide that offenders no longer pose a sufficient threat to their community to be included in the list. The criteria for removing an offender should be as clear as for identifying who should be included. The PPO strategy should also incorporate an exit strategy for reducing or stopping the intensive level of support that a PPO receives at this stage. This may involve reduced intervention from offender managers, or transfer to DIP rather than DSB if drug treatment services are still required. It is less clear what level of support can be still accessed through the other service providers, or if they are then referred to alternative mainstream service providers.

So DIP would only pick them up at the end of a statutory order, or at another planned exit. What I would have expected was that if they still needed drug treatment at the end of a year on an order, that DSB or the probation officer or whoever would pick the phone up and phone the DIP team and say little Jonny's coming to the end of his order, we need to hand him over to you (DIP officer 1).

5 Conclusions and recommendations

The situation in Birmingham with regards to managing prolific and other priority offenders is highly complex, involving many partners at strategic and delivery levels, all working across a large geographical area. The PPO strategy is building on an established framework of offender management programmes within the region, albeit ones that have to date been managed in relative isolation.

A number of gaps have been highlighted during this study, either raised explicitly by those involved in developing the strategy, or gathered from interviews. In many cases possible solutions to the problems were also suggested. We have drawn up a series of recommendations that could be used in developing the strategy over the next year and beyond. Undoubtedly, many of the recommendations may already be in place, or will be addressed in the forthcoming delivery plan for 2005-06.

Communication

- Support should be provided by the BCSP during the transition stage currently underway, in adapting from the existing structures and processes to encompassing the PPO strategy.
- A programme of conferences and seminars should be continued for service delivery across drug treatment, housing, ETE and other services to explain changes, performance monitoring procedures and referral processes.
- Existing means of communication within and across agencies can be utilised to promote the strategy – for example, Probation Service circulars, police news sheets and prison service bulletins. These should tie in information coming from the centre concerning how the PPO strategy works in Birmingham, given the complicated partnership and agency structure.
- A briefing for Local Delivery Groups and other Core Priority Groups could be provided to give an overview of the work being undertaken.
- Further clarity is needed regarding partnership working and roles *throughout* the three strands of the PPO strategy, and how the strands are linked together.
- The information Sharing Protocol needs to be finalised as soon as possible, to enable partners to work more closely together. All partner agencies need to be aware of what can be shared under the agreements set in place.

Roles of agencies and partnership working

- Clear guidance should be issued on what roles the police offender managers play, and what is expected of them in providing a supportive mentoring role to the PPOs.
- Many of the agencies engaged in service delivery are involved, or have the capacity to provide service delivery, in more than one service area. It should be clear how the expertise of each of the service providers can be most effectively utilised in providing a joined up service to offenders.
- Other partner agencies may need to be brought in where deemed necessary – particularly those relating to mental health support.
- Additional agencies may be brought in as direct partners where gaps exist in meeting the suggested issues as set out in the guidance from the Home Office. This could include support for families and carers, community confidence building measures and activities to support behaviour change in offenders.

Access to services

- Measures need to be taken to ensure that PPOs without drug problems have equal access to the relevant services provided.
- A consistent approach may be beneficial in terms of the number of appointments, financial and other incentives.

Improved links with the Prison Service

- Chrysalis had established good working partnerships with the Prison Service, including conducting prison visits to assess the use of the premium service for street crime offenders. The PPO strategy should build as far as possible on the partnership already established through Chrysalis.
- Linked with this, a 'care plan' could be introduced that covers training courses undertaken and employment engaged in whilst in prison, that could stay with the PPO whilst he or she is being actively targeted. This should mean that information about training carried out whilst in custody can be used more effectively on release, and avoid duplication of effort.

Identifying PPOs and the referral process

- Clear guidance needs to be issued to all OCUs about identification of PPOs for inclusion in the scheme. There needs to be consistency across Birmingham in how PPOs are identified and managed, and access available services.
- More clarity is needed about which OCU should provide offender management for a client who has offended in one area and lives in another, and the processes involved in information sharing around this.
- Agencies providing service delivery receive referrals in a variety of formats and quality from different police and probation offender managers. A single referral form, delivered within the terms of an agreed process to the service providers would ensure that all the relevant information reaches the relevant partners in a timely manner.
- If the move is successfully made to using a single point of access to drug treatment services (through the DIP), adequate support must remain in place to include partners who do not have access to this system.
- Systems need to be put in place to enable operational police officers to recognise a PPO on arrest - through appropriate flagging - so they can inform the appropriate offender manager.
- The number of referrals to agency partners may change with the criteria for PPOs being adopted rather than that used for POPPs. All agencies should have an understanding of how the changes in targeting will affect the level of resourcing they need to apply to this, and how it will affect their own business.

Monitoring performance and progress

- Monthly data returns about the number PPOs within each CDRP, their drug use and stage within the process are returned to the Home Office. Processes need to be established to make this as painless as possible, involving all the relevant partners across the city. This is a relatively new requirement, and should become easier as it becomes more familiar.
- Setting performance measures or targets around how well the PPO strategy is working may be useful, so that there is some tangible measure of success or pointers for which aspects of the strategy are experiencing problems. Having analytical support, for example within BCSP, should be used to provide regular updates on a number of measures that are appropriate for the interventions being implemented.

- Monitoring should also be in place across the service providers to ascertain whether clients are attending appointments, and whether any follow up work to re-engage these clients has been successful. It should be made clear what action should be taken if non-attendance continues.

Exit strategy

- Clear guidelines need to be provided for offender managers around an exit strategy for offenders being removed from the PPO list. This should cover referrals to alternative drug treatment services if required, and information that can be passed to the client about assistance from mainstream service providers.

Further research

- It was not possible for this study to look at offender journeys through the PPO management process, due to the lack of time and problems gaining access to offenders. The offenders interviewed provided some useful insight into their experience of the POPP scheme, and it would be useful to extend this to cover a representative sample of PPOs. This could include those without drug treatment needs, a greater number of BME offenders, and people at different stages in the process.
- In addition to this, this work would ideally be extended to cover the experience of officers from OCUs where offender management has not, until now, been a major priority. The implementation of the new strategy is likely to impact to a greater extent upon their work, and may highlight additional gaps which were not uncovered during this study.
- As this study was conducted in the context of the whole system being reorganised and restructured, it would be useful to repeat the exercise again in 6 months, once many of the gaps identified will have been addressed, and officers involved in delivering the services have a better understanding of the structures and processes now in place.

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