

Inspection of justice social work services in Aberdeen

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Introduction

The governance arrangements for justice services are set out in legislation, making local authorities responsible for delivering a range of services for those involved in the criminal justice system¹. This includes the completion of reports for courts and the Parole Board and the supervision of individuals on statutory social work orders and licences. Statutory social work orders include community payback orders (CPO) that can be imposed by courts in Scotland as an alternative to a custodial sentence. A person subject to a CPO can be required to comply with the terms of a supervision requirement and/or undertake an unpaid work requirement. A supervision requirement is one of nine provisions available to the court that can be imposed as part of a CPO². Unpaid work takes place in local communities and is for the benefit of the community. These are the two most commonly used requirements and someone on a CPO can be subject to one of these or both depending on circumstances outlined in a report provided to court by justice services and the decision of the court³. Guidance on the management and supervision of these is contained within National Outcomes and Standards⁴ and CPO practice guidance⁵.

There has been significant change in justice social work over the last decade including the introduction of CPOs in 2011⁶. Effective community-based sentencing options are essential to the successful implementation of the Scottish Government's community justice strategy⁷ and the extension of the presumption against short sentences. In this context, the Care Inspectorate has decided to focus inspections of justice services at the present time on how well CPOs are implemented and managed, and how effectively services are achieving positive outcomes.

How we conducted this inspection

We began our inspection on 25 November 2019. We examined a self-evaluation report and supporting evidence provided by Aberdeen city health and social care partnership. An inspection team visited Aberdeen in early March 2020 and completed a review of a representative sample of the records of people who were or had been subject to a CPO during the two-year period prior to December 2019. This related to 110 records from a population of 1,436 individuals. As a consequence of the COVID-19 pandemic, the inspection in Aberdeen was suspended by the Care Inspectorate on 13 March 2020. We resumed our inspection activity in October 2020 and undertook the outstanding activities in accordance with public health guidance.

¹ Social Work (Scotland) Act 1968, Criminal Justice (Scotland) Act 2003, Community Justice and Licensing (Scotland) Act 2010.

² In imposing a CPO, the court may include one or more of nine specific requirements. These are unpaid work or other activity requirement; offender supervision requirement; compensation requirement; programme requirement; residence requirement; mental health treatment requirement; drug treatment requirement; alcohol treatment requirement; and conduct requirement.

³ A court report is not required if the CPO will contain only a level 1 unpaid work or other activity requirement.

⁴ National Outcomes and Standards for Social Work Services in the Criminal Justice System, Scottish Government, 2010.

⁵ Community Payback Order Practice Guidance, Scottish Government, 2019.

⁶ Community Payback Orders were introduced by the Criminal Justice and Licensing (Scotland) Act 2010.

⁷ National Strategy for Community Justice, Scottish Government, 2016.

This involved minor changes to the inspection methodology to enable us to talk to individuals using the service, staff and partners virtually using telephone calls and video conferencing facilities. Despite the gap, the scope and stages of inspection were unchanged. We spoke with 47 people subject to CPOs including those with a supervision requirement or an unpaid work order, or both. We undertook focus groups and interviews with key members of staff, partner agencies, stakeholders and senior managers with responsibility for the justice service.

During the inspection, we considered how well National Outcomes and Standards and practice guidance were being applied and what difference CPOs were making to the lives of individuals who were, or have been, subject to them. The scope of the inspection focused on:

- the ability of the justice service to demonstrate improved outcomes for individuals subject to CPOs
- how people subject to CPOs experience services
- key processes linked to CPOs, including quality of risk/needs assessment, planning and intervention
- leadership of justice services.

We used a quality indicator model (appendix 2) to consider how the service was performing against a number of quality indicators and we have provided evaluations using a six-point scale (appendix 1) for the following indicators.

- 1.1 improving the life chances and outcomes for people subject to a community payback order.
- 2.1 impact on people who have committed offences.
- 5.2 assessing and responding to risk and need.
- 5.3 planning and providing effective intervention.
- 9.4 leadership of improvement and change.

In the course of the inspection, we also explored the extent to which justice services were prepared for the extension of the presumption against short sentences.

For the purposes of this report, we refer to criminal justice social work services as **justice services** and at times **the service** as an abbreviation. We refer to people who are, or have been, subject to a CPO as **individuals**. Where we refer to staff, we mean justice workers who have responsibility for supervising the various requirements of a CPO unless referred to by their specific designation. Justice social workers have responsibility for supervising the various requirements of a CPO and are sometimes referred to as **supervising officers** to reflect their qualification, role and function. **Order supervisors** are responsible for the management of unpaid work requirements and **task supervisors** are responsible for supervising individuals on unpaid work placements. Aberdeen also employs **support workers**; paraprofessionals, not qualified in social work, who undertake a variety of community payback related tasks across the range of CPO teams. **Managers** refers to the justice service manager and senior social workers who oversee operational delivery. **Leaders** refers to those with strategic oversight of the service across the local authority and wider health and social care partnership.

Context

Aberdeen is the third largest city in Scotland. With a population of 228,670, extending across 186 square kilometres, it is one of the most densely populated local authority areas. As a centre for the oil and gas industries over many years the city has prospered but is not without its difficulties. Sharp differences between affluent and deprived parts of the city bring inequalities, not just economically, but also in terms of health, wellbeing and social inclusion. Aberdeen also experiences high levels of drug and alcohol abuse and in 2019, had the joint 5th highest average annual rate of drug deaths of all local authorities in Scotland.⁸ A generally strong local economy, resulting in high living costs, has also created challenges in recruiting to public services. This has required the justice service to work closely with local universities and human resources colleagues to maximise opportunities to recruit and retain staff.

Strategic priorities, including those for community justice, are embedded within the community planning Aberdeen local outcome improvement plan 2016-2026, which is reviewed and updated every two years. The plan was usefully informed by a comprehensive population needs assessment, and investment in early intervention and prevention is a core principle within strategic plans.

Justice services are devolved from Aberdeen city council to the Aberdeen city health and social care partnership. The services are delivered across three main sites with three dedicated CPO teams being based together at one of them. The work of the CPO teams is interconnected to a range of other teams which include the unpaid work team, the throughcare team and the **Connections women's centre**, which was established in 2015. A team of support workers also works across the teams to provide additional practical and emotional support to individuals on CPOs. Specialist, nationally-accredited programmes are delivered by the **Caledonian System** team and the Joint Sex Offender Project in a partnership which operates across the north-east of Scotland.

In 2018 -19, the justice service supervised 949 CPOs (755 individuals), the fifth highest rate in Scotland per 10,000 population. This was down from 1,151 (895 individuals) in 2017-18, reflecting the national downward trend in the number of orders imposed.

⁸ *Drug Related Deaths in Scotland in 2019*, National Records of Scotland, 2020

Key messages

- The support provided by justice staff in Aberdeen is having a transformative impact on individuals subject to CPOs. Individuals experience compassionate, consistent, focused and flexible support that frequently exceeds their expectations and is enabling positive change.
- The service is delivering highly person-centred interventions. Staff work proactively to identify and remove barriers to engagement and provide a wide range of practical assistance.
- The clear focus on supporting individuals to address offending behaviour is an important strength. The service is investing in a full range of structured interventions and delivery is tailored to individual needs and risks.
- Leaders demonstrate a strong vision for transformational change that is supported by well-developed plans and ambitious targets. Core principles of early intervention and prevention permeate planning and delivery at all levels of the service.
- A strong commitment to continuous improvement is underpinned by an embedded improvement methodology. This is contributing to improved performance in the delivery of CPOs.
- Performance trends across almost all CPO measures are improving and individuals are being supported to achieve positive outcomes. Embedding the performance management framework offers potential to better demonstrate the difference the service is making to the lives of those on CPOs.
- There is a need to strengthen compliance in meeting expected timescales for assessments and plans. Work is also required to increase staff confidence in the use of accredited assessment tools, including assessment and analysis of risk of serious harm.

Achieving outcomes

In this section, we look at the extent to which the justice service can demonstrate improving trends against clear performance measures and can show tangible results in improving the life chances and outcomes for individuals subject to community payback orders.

How well are performance measures achieved?

A clear commitment to continuous improvement enabled the service to demonstrate consistent or improving performance trends across almost all CPO measures. In 2018/19, 76%⁹ of first face-to-face contacts took place on the same day, or within one working day of an order being imposed, which was slightly better than the national average. Court and social work duty processes had been strengthened to drive further improvement. Induction rates were broadly in line with the national average and the timely commencement of **unpaid work** had significantly improved from 30% in 2016/17 to 70% in 2018/19. These positive developments reflected the effectiveness of a focused and sustained approach to quality assurance within the service.

A well embedded approach to continuous improvement was supporting staff and managers to meaningfully contribute to improvement activities. Through a coherent system of practice oversight groups, staff, supported by an information analyst, were making effective use of available performance data to identify improvement priorities. **Level of service/case management inventory (LS/CMI)** data was increasingly used to understand individual needs and to inform service design and delivery. Benchmarking performance against comparator and neighbouring authorities demonstrated a willingness to look outward and learn from others.

Quality assurance processes identified challenges in supporting individuals to complete unpaid work requirements within court-imposed timescales. The rate of timely completions had dropped from 83% in 2016/17 to 66% in 2018/19, below the national average of 74%. A review of practice undertaken by the service identified reduced staffing capacity linked to local recruitment difficulties. This was compounded by an increased demand for flexible unpaid work placements to enable individuals who had multiple and complex needs to undertake light duties or partial workdays. Managers were taking steps to address the issue by broadening the range of flexible placements for those on CPOs and by working across departments to attract internal candidates.

⁹Nationally reported figure was amended following resolution of local inputting issue. Aberdeen updated figure (2018/19) is noted.

How well are outcomes for individuals improving?

A highly motivated, **trauma-informed** staff group was working diligently to achieve positive outcomes for individuals, reflecting a strong commitment to relationship-based practice. Data from exit questionnaires demonstrated improved outcomes for individuals in relation to a range of factors that are known to support desistance from offending behaviour. Individuals reported significant improvements in relation to their use of drugs and alcohol, mental health, personal relationships, and housing. Importantly, individuals had also benefitted from opportunities to develop coping skills, which impacted positively on their self-esteem and self-management.

This was confirmed by our review of records. We found that most of the individuals within our sample evidenced positive changes in their circumstances during their CPO. The most notable improvements related to personal relationships, mental health and wellbeing, accommodation, finances, and reductions in the seriousness or frequency of offending behaviour. Almost all individuals who required additional support were better connected to community resources during their CPO.

A performance management board was bringing added rigour and oversight to two practice development forums - the Best Practice Group and the Practice Issues Group. Chaired by the lead for social work and supported by the planning and development manager, the board reported to the **clinical care and governance group** of the health and social care partnership. These arrangements were helping to strengthen the connection between operational practice and strategic governance. Leaders acknowledged that performance monitoring in the partnership was largely focussed on the national health and wellbeing outcomes with limited consideration of justice data measures beyond exception and annual reporting. To address this, a justice service delivery plan and supporting performance management framework had been developed and were awaiting finalisation and implementation.

Although improvement work had resulted in an increased number of exit questionnaires being completed by individuals ending their CPO during the first quarter of 2019/20, the service was not yet able to demonstrate consistent improvements in individual outcomes over time. Mechanisms to enable the service to systematically capture and review qualitative data at key assessment, planning and review stages were limited. The performance management framework and related datasets offered opportunities to increase the range, breadth and depth of measures for capturing and reporting on person-centric outcomes. Embedding these frameworks will be central in enabling leaders to raise the profile of the service, ensure oversight and demonstrate the impact of community payback orders.

Delivery of key processes

In this section, we look at the extent to which the justice service recognises the need for help and support and provides this at the earliest opportunity. We consider the quality of assessment and planning and the range and quality of different types of intervention. We also look at how individuals are involved in key processes.

How well do staff provide help and support?

The design and delivery of justice services was supporting early and intensive engagement with individuals, and staff clearly recognised the importance of providing timely access to help and support. The creation of a **predisposal team** located adjacent to Aberdeen sheriff court was helping to ensure that most individuals were seen on the same day, or within one day of their order being imposed. A responsive and pro-active team of support workers was providing individuals across all parts of the service with access to a wide range of practical assistance. This included help to arrange and attend appointments, support to apply for housing and benefits, and help to develop budgeting plans and address rent arrears. A duty system was in place to enable quick access to help from a support worker, supplemented by a senior social worker where a crisis response was required.

The service was working creatively with third sector and statutory partners to limit unnecessary contact with justice services through increased use of alternatives to CPOs. Available options included **diversion**, **structured deferred sentences** and the **problem-solving approach**, reflecting the commitment to early intervention and prevention outlined in the local outcome improvement plan. There was a clear commitment to continuity of relationships with staff for those with a **supervision** requirement. Wherever possible, individuals were allocated a social worker they knew, to build on existing connections and encourage engagement. In almost all instances, early recognition of need and proactive efforts by staff to remove barriers were supporting individuals to effectively engage with and carry out their CPOs.

The unpaid work service offered a broad range of placements and activities that catered to the varied needs of individuals. As well as offering evening and weekend sessions for those in employment, individual and short-day placements, light-duty options and women-only groups were available. Staff were described as helpful and approachable and were making efforts to accommodate individuals' needs and preferences. The service had made efforts to increase the availability of placements, however the current provisions were not always meeting the additional needs of young people, women and individuals with mental health and addiction issues. Offence-focused interventions designed to address the root causes of offending behaviour were being tailored to personal learning styles. Non-judgmental approaches from staff were enabling individuals to explore the factors underpinning their offending behaviour in a way that felt safe. Recognising the significant inequalities experienced by many individuals subject to CPOs, the service was

providing access to a variety of practical resources to enable individuals to engage with their CPO.

Efforts to offer tailored placements within the unpaid work service, coupled with recruitment issues had contributed to delays in some individuals starting their hours. Staff were alert to this and were considering how they might source additional support and reconfigure services to meet demand. Despite persistent efforts from justice staff, difficulty in accessing assessment and support from mental health services was an ongoing issue. Referral processes into traditional clinical pathways were noted to be inflexible. In the absence of access to specialist clinical advice, social workers struggled to know how to best support individuals with complex and enduring mental health needs. In a bid to promote an outreach approach, the health and social care partnership was piloting a mental wellbeing out-of-hours hub situated in the police custody suite. This alternative model targeted individuals who came to the attention of first responders and aimed to support a wider cultural shift from symptom management to early intervention and prevention. It was too early to demonstrate whether the outreach model was having an impact for individuals on CPOs.

How well do staff assess risk and need?

Initial assessments of risk and need outlined within justice social work reports for court were helpfully informing decisions about individuals' suitability to undertake the requirements of a CPO. The majority of reports were high quality and most had been informed by appropriate collaboration with partner agencies. For individuals made subject to a CPO, a comprehensive assessment of risk and need was in place in almost every instance. We rated the majority of assessments that we read as good or better. Almost all the assessments reflected that staff had actively sought to involve the individual in the assessment process and that other partners had been appropriately consulted.

A range of specialist assessments were being undertaken to inform interventions. Individuals convicted of domestic abuse were assessed by a worker who was trained in the Caledonian System and the Spousal Abuse Risk Assessment¹⁰ tool. Staff were also trained in the Risk Matrix 2000¹¹ and the Stable and Acute 2007¹² to support the assessment of individuals convicted of sexual offending.

Support for young people reflected a commitment to embedding the **Whole System Approach for Young People Who Offend**. Staff across justice and youth services were working jointly with police and the Scottish Children's Reporter Administration to ensure that, wherever possible, young people involved in offending were

¹⁰ The Spousal Abuse Risk Assessment (SARAv3) is a structured guide for spousal risk evaluations in individuals who are suspected of, or who are being treated for, spousal abuse.

¹¹ Risk Matrix 2000 (RM2K) is an actuarial risk assessment used to assess risk posed by individuals convicted of sexual offences.

¹² Stable and Acute 2007 is used to undertake a dynamic assessment of risks posed by individuals convicted of sexual offences.

supported to remain within children's rather than adult services. This had resulted in a significant reduction in the number of young people entering the adult criminal justice system and reflected a strong commitment to delivering best practice. To support this approach, staff within the youth and justice social work teams were trained in the application of a range of age-appropriate risk assessment tools.

Proportionate, risk-based information sharing was helpfully informing responses to risk and need within the service and across wider social work teams and multi-agency partners. Justice staff attended multi-agency public protection arrangement (**MAPPA**) meetings as well as adult support and protection and child protection case conferences as required. Staff were alert to the importance of timely information sharing to inform victim safety planning in cases involving domestic abuse. Multi-agency risk assessment conference (**MARAC**) arrangements were operating effectively.

Overall, unpaid work staff had access to information to help them allocate work placements or respond to emerging concerns about individuals' risks and needs. Managers recognised the need to further develop the consistent and timely application of the full range of functions within the LS/CMI assessment tool. Although it related to a relatively small number of assessments, staff lacked confidence in applying the processes associated with assessing and analysing risk of serious harm. More broadly, the service was committed to completing comprehensive assessments within the 20-day timescale required by National Outcomes and Standards. However, this was being achieved in just over half of cases. Quality assurance processes had previously identified these as areas for improvement and work was being taken forward through an LS/CMI improvement plan and the work of a LS/CMI champions group.

How well do staff plan and provide effective interventions?

There were significant strengths in the planning and delivery of interventions. Practice was underpinned by a strong commitment to relationship-based practice and sustained investment in a range of evidence-based interventions designed to reduce involvement in offending behaviour. Almost all individuals had a **case management plan** in place, and we rated the quality of most plans that we read as good or very good. The quality of work to support the implementation of plans was good or better in most instances.

Staff across the service were delivering highly person-centred, holistic and trauma-informed interventions that were helping to improve outcomes for individuals on CPOs. As well as having an allocated social worker, many individuals received additional input from a proactive team of support workers. These support workers were providing practical and effective help to address a wide range of welfare needs. This included help to access addiction services, benefits and housing support. For almost all individuals, the intensity of supervision was commensurate with their

identified risks and needs, and staff were tenacious in their efforts to help individuals access the resources they required.

Across the service, there was a notable focus on helping individuals understand the impact of their offending behaviour. A range of well-established, offence-focused programmes were being delivered including **Moving Forward: Making Changes (MF:MC)** and the Caledonian programme. The **Respect** programme was available as an alternative to the Caledonian group for men with a conviction for domestic abuse who were in irregular employment or whose first language was not English. To help individuals fully prepare for and embed learning from their group work, the service was training all social workers to deliver the Caledonian programme and MF:MC case management materials. This was equipping staff to deliver robust and focused one-to-one interventions and was bringing a structured approach to their wider practice. Through these interventions, individuals were supported to address a wide range of offending-related issues including anger management, consequential thinking and victim empathy. As a result, individuals were demonstrating improved self-management and reduced levels of offending.

The unpaid work service was offering a broad range of flexible unpaid work opportunities. The majority of individuals had the opportunity to undertake **other activity** as part of their unpaid work requirement. This included access to training and employment support opportunities commissioned through **Aberdeen Foyer**; educational support from the adult learning and development team; and outdoor education activities through **Venture Trust**. When we reviewed records, we found that almost all the unpaid work placements were suitable and were supporting the majority of individuals to develop new skills. While other activity was being used flexibly, not all activities were experienced as purposeful. Individuals expressed a desire for access to digital learning opportunities and more placements that would encourage meaningful links with the community.

For women subject to CPOs, the Connections women's centre was offering responsive and bespoke support delivered in a safe and relaxed environment. Women using the service benefitted from access to a support worker and were actively involved in developing a personal plan. The structured, modular Connections programme delivered by the women's service was tailored to individual needs. This included input from a range of third sector and statutory partners, which was contributing to improved health and wellbeing. The service also facilitated individual unpaid work placements for women whose personal circumstances made it difficult for them to attend the central unpaid work facility. This flexible approach was supporting those women, who might otherwise have struggled to comply, to successfully complete their orders and move on from justice services.

Strong collaborative working between justice staff and partner agencies was supporting the development and implementation of case management plans. In most cases, individuals were referred to appropriate resources at the earliest opportunity and were able to access all required interventions. Effective referral

routes were in place to drug and alcohol services. Work to establish clear referral pathways and protocols with housing colleagues had resulted in significantly improved access to housing and housing support.

Managers had good oversight of practice and were undertaking regular quality assurance activities. These were consolidated through staff supervision, team meetings and practice development groups, reflecting a service commitment to learning and improvement. Staff had a good awareness of National Outcomes and Standards and their statutory responsibilities and were managing non-compliance and exercising discretion appropriately.

While there were clear strengths in relation to the quality of planning and interventions, there were opportunities to strengthen adherence to national guidance. The service was committed to producing case management plans in accordance with National Outcomes and Standards timescales but this was not being achieved consistently. In some instances, the frequency of reviews and home visits was below the level required. The service had already identified these as areas for improvement.

How well do staff involve individuals in key processes?

Staff were actively seeking the views of individuals at all stages and were working proactively and creatively to encourage engagement. Individuals were given clear information at the start of their CPOs, which helped them to understand what was expected of them. Non-judgemental attitudes from staff were supporting individuals to take responsibility for their offending behaviour. Flexible and person-centred approaches were enabling them to overcome obstacles and successfully complete their CPOs. **Statutory reviews** were being used to encourage them to reflect on their progress and provide feedback on the service they were receiving. Home visits were welcomed by individuals who felt that they provided additional opportunities to build relationships with staff. Although there was scope to further increase their usage, exit questionnaires were being used to capture individuals' views and staff clearly listened and responded to the feedback received. Data gathered from questionnaires was also being reviewed on a quarterly basis to identify areas for service improvement.

Wider feedback and input from individuals about specific projects and initiatives was being used to shape service delivery. Men attending unpaid work had been invited to work alongside third sector partners to develop a 'Confidence to Cook' course. Feedback from women about their experience of unpaid work had prompted the service to begin offering placements at the women's centre.

There was a clear aspiration among staff and managers to encourage individuals to actively participate in their orders and to further develop opportunities for meaningful engagement. Staff within the service were considering how they could build on

learning from efforts to establish a women's forum and how to maximise the involvement of individuals in the case management planning process.

Impact and experience of community payback orders

This section focuses on the impact that justice services, including commissioned services, were having on the lives of those individuals who are, or have been, subject to a community payback order. It considers if individuals have benefitted from positive relationships with staff and what effect getting help and support has had on them.

The support provided by the justice service was having a transformative impact on the lives of individuals who were subject to CPOs. Almost all individuals were consistently and overwhelmingly positive about their relationships with staff from across all aspects of the justice service. Justice service staff were described as reliable, approachable, professional, genuine, and accepting. Relationships were characterised by the provision of compassionate, consistent, focused and flexible support that frequently exceeded individuals' expectations and, where required, extended beyond the life of the order. This consistent message was captured eloquently by one individual who noted "I kept expecting punishment, but I got help and I've come out a better person". Multiple individuals described their relationship with staff as the biggest catalyst for change in their lives.

Individuals on supervision were being consistently and effectively supported to address their offending behaviour. While some individuals had completed activities that were structured, in-depth and focused on their offence, others described less formal and supportive discussions about their offending behaviour. This indicated a tailored and person-centred approach. Almost all individuals reported that the non-judgemental approach of staff had enabled them to examine their behaviour, accept responsibility for their actions and begin to make positive changes. Structured group-work interventions, while challenging, were also experienced as satisfying and were supporting individuals to change their thinking and behaviour.

Individuals undertaking unpaid work gained a sense of worth, purpose and satisfaction from the activities, particularly when the work delivered obvious benefits to the community. In addition to offering opportunities to develop new skills, participation in unpaid work was providing helpful routine and reducing social isolation. Positive and constructive input from staff supported individuals to develop increasingly pro-social attitudes and perspectives. Individuals with additional needs appreciated the efforts unpaid work staff made to identify suitable placements that took account of their personal requirements. This had enabled them to successfully engage with their order and fulfil their commitment to the court.

The women's centre was experienced as a safe and accessible space providing access to social and emotional support for women and their children. Attendees

benefitted from opportunities to participate in a wide range of groups and activities and were supported to access wider welfare services. As a result of these inputs, women were experiencing improved physical and mental health and increased levels of confidence and safety.

Leadership

How well are leaders supporting improvement and change?

This part of our report examines the effectiveness of leaders in striving for excellence in the quality of justice services. We look at how well leaders provide governance and oversight and use performance management to drive forward service improvement, innovation and change. We also look at the extent to which leaders involve staff and partners and learn from others to develop services.

Leaders were ambitious and aspirational in their pursuit of transformational change. A vision to make Aberdeen ‘a place where all people can prosper’¹³ was reflected in the local outcome improvement plan. This was informing and driving the priorities of the justice service, the community justice group and the health and social care partnership. The local outcome improvement plan was usefully informed by a population needs assessment and a specific justice needs assessment. This was helping to ensure that planning was evidence-based and delivery was targeted to the identified areas of need within the community. A bold commitment to early intervention and prevention was evident across the suite of strategic plans and this was reflected in a range of ambitious justice ‘stretch outcomes’.

Leaders within the health and social care partnership expressed a clear sense of ownership of justice social work. In the early days of the integration arrangements, the service was not as fully involved as it had expected to be. Concerted efforts had been made to redress this balance and there was an ongoing commitment to raising the profile and visibility of the service within the wider partnership. Leaders had directed the preparation of a justice service delivery plan that clearly demonstrated the alignment between justice priorities, local outcome improvement plan priorities and national outcomes. The creation of a lead for social work post within adult social work services had also brought a helpful focus to the justice service. Working alongside the chief social work officer, the post holder was a visible and vocal champion for the service in all key decision-making forums. This was strengthening strategic and operational links for justice services.

Both strategic and operational leaders were strongly committed to the ongoing improvement of the service. Efforts to embed performance management systems across the service were supporting data-led learning and improvement. A performance management board was established to replace ad hoc structures. This

¹³ Local Outcome Improvement Plan: 2016-26, Community Planning Aberdeen (2020) p3.

board's first priorities included development of the justice service delivery plan and an associated performance management framework. In addition, robust quality assurance was put in place. The board reviewed monthly reports from the two practice development groups, which provided oversight and scrutiny of performance, improvement and assurance. Clear governance structures were enabling annual and exception reporting from the performance management board to the clinical care and governance group. This coherent approach was supporting positive change and improved outcomes against national and local priorities.

At an operational level, managers had established a strong culture of continuous learning that was resulting in improved delivery of CPOs. The best practice and practice issues groups included staff representatives from across the range of justice teams and created useful space for review and reflection. These groups were delivering demonstrable improvements through a series of change projects relating to the use of LS/CMI, and the delivery of unpaid work and women's services. The service had invested heavily in training social work students through strong links with Robert Gordon University and the provision of an in-house practice teacher. This had aided recruitment and established a clear culture of learning within the service. This learning ethos was reinforced by a strong team of senior social workers who were actively driving development and improvement work across the service. Professional development was supported by access to training, supervision and practice-focused team meetings. Staff also had access to a coherent range of policies, procedures, and practice guidance to support compliance with statutory duties. Staff were actively encouraged and empowered to take on additional roles and responsibilities based on their areas of interest.

Health and social care integration arrangements and the clear commitment to ongoing improvement were contributing to effective relationships with key local and national justice stakeholders. Coherent governance aligned to strategic plans was underpinned by a strong improvement methodology. The decision to incorporate the **community justice outcome improvement plan** within the local outcome improvement plan had helped to raise the profile of justice services. This was contributing to a shared sense of purpose and ownership across partners by providing clarity about joint goals and measures. Partners were very positive about the quality of collaborative relationships, and the strong strategic approach from leaders was supporting effective links with justice services and increasing opportunities to work innovatively together.

Operational leaders were viewed by staff as visible and approachable. Staff and stakeholders felt that their views were sought and listened to as a result of the collegiate and participative leadership style demonstrated by managers. Encouragingly, staff had been involved in developing the justice service delivery plan.

Despite the efforts by leaders to increase the visibility of justice services, some staff questioned the extent to which the work of the justice service was seen and valued

by strategic leaders within the wider partnership. Leaders were alert to the need to finalise and implement the service delivery plan and associated performance management framework. Completing this work offers opportunities to re-engage with staff and partners to raise their awareness of the place and contribution of the justice service within the wider health and social care partnership.

Preparation for the extension of the presumption against short sentences

The service had undertaken a profiling exercise in preparation for the extension of the presumption against short sentences (EPASS) on 4 July 2019. The purpose was to consider individuals' needs and review the service's capacity to meet any increased demand. This highlighted the need for increased staffing and more flexible and varied placements to accommodate increasing numbers of individuals with complex or additional needs. The service was recruiting task supervisors from across the local authority. In addition, they had started to reconfigure the service and invest in better equipment to enable them to broaden the range of available activities. This work to develop the service was ongoing as part of an unpaid work improvement plan.

The service had been collaborating with partners to increase the availability of alternatives to CPOs and this reflected a strong commitment to early intervention and prevention. This included the use of diversion, bail supervision, structured deferred sentences, and a problem-solving approach. Monthly data monitoring was in place to identify trends and track any potential impact on workload that might require resources to be redeployed. No significant increase in demand had been identified, other than a rise in court requests for assessments for restriction of liberty orders. While it remained too early to determine the impact of EPASS, the service was well placed to meet additional demands.

Areas for improvement

- To enable robust oversight and increased ability to demonstrate outcomes and impact, senior officers should ensure that the justice service delivery plan and performance management framework are agreed and implemented, and associated reporting cycles established.
- To ensure key processes are effective, senior managers should further strengthen quality assurance to support consistent, confident and timely risk assessment and case planning processes, particularly those relating to risk of serious harm.

Capacity for improvement

The service embraced the learning opportunities provided by our scrutiny and engaged fully with the inspection process, despite the very challenging circumstances of the pandemic. Notwithstanding the significant difficulties facing partnerships due to COVID-19, we were assured that the service was able to make improvements and was committed to pursuing excellence in service delivery.

Our confidence was grounded in the ambitious leadership and strong management capability that we observed across the service. A clear vision for transformational change was reflected in well-aligned strategic plans and supported by coherent governance structures. There was clear ownership of the service within the wider health and social care partnership. The development of the justice service delivery plan and performance management framework reflected leaders' ambitions to become a data-led service and offered opportunities to strengthen oversight. The creation of the lead for social work post had brought visibility to the service within strategic forums. Strong improvement methodology was driving a programme of performance management and service improvement. Supported by strong, values-driven leadership, a team of capable and committed senior social workers and staff were implementing a wide range of practice development activities that were contributing to ongoing improvements. This demonstrated that the culture of continuous learning permeated all aspects of the service.

The transformative impact of the consistent and individualised support that staff were providing to individuals on CPOs further demonstrated the strength of the service. In addition to addressing offending behaviour, relationship-based interventions reflected a clear commitment to meeting individuals' health and wellbeing needs. This evidence-based approach was supporting individuals to make positive changes in their lives and reflected the clear focus on improving outcomes. In combination, aspirational leadership, strong management, and an invested workforce leave the service well placed to pursue excellence and innovation in all aspects of their service delivery.

Evaluations

What key outcomes have we achieved?

1.1 Improving the life chances and outcomes for people subject to a community payback order

Good

Rationale for the evaluation

We found consistently positive or improving trends across key nationally-reported CPO performance indicators. Sustained quality assurance contributed to important improvements in some unpaid work measures. Operational staff and managers worked collaboratively within a coherent system of practice oversight groups, and were using performance data effectively to identify improvement priorities. There were challenges in completing unpaid work requirements within court-imposed timescales because of reduced staff capacity and increasing numbers of individuals with complex needs. Staff understood the impact of trauma, poverty and inequality and were strongly committed to supporting individuals to achieve positive outcomes. Feedback from questionnaires completed at the end of a CPO noted that respondents were treated with respect. Individuals indicated they had benefitted from opportunities to develop coping skills that had a positive impact on self-esteem and self-management. Similarly, our review of records and discussions with individuals on CPOs found positive changes in the lives of most individuals during their CPO. While the use of exit questionnaires was increasing, the service was not yet able to demonstrate consistent improvements in individual outcomes over time. Mechanisms to systematically capture and review qualitative data at key assessment, planning and review stages were limited. In recognition, a performance management framework had been developed and was awaiting agreement and implementation.

How well do we meet the needs of our stakeholders?

2.1 Impact on people who have committed offences

Excellent

Rationale for the evaluation

The support provided by the justice service was having a transformative impact on the lives of individuals who were subject to CPOs. Almost all individuals were consistently benefitting from very positive relationships with staff across all aspects of the service. Staff treated individuals with genuine care and acceptance and were proactive and persistent in their efforts to provide help and support. Individuals told us that the level of help they received frequently exceeded their expectations and was a catalyst for positive change in their lives. Practice was underpinned by a very strong value base and clear commitment to a consistent, relationship-based approach. Interventions were highly person-centred and aimed to address the root causes of offending behaviour. Combined with a compassionate, flexible, and non-judgemental approach, they were supporting individuals to take increased responsibility and move away from offending behaviour. As a consequence, individuals experienced improved self-awareness, increased self-management skills and reduced levels of offending. The practical help, support and advice provided by

staff was contributing to improved physical and mental wellbeing and better life circumstances. Early recognition of need, and support to engage with appropriate services was resulting in more stable housing, decreased levels of drug and alcohol use, improved relationships, enhanced levels of safety, and improved confidence.

How good is our delivery of services?

5.2 Assessing and responding to risk and need

Good

Rationale for the evaluation

Justice social work reports were high quality and helpfully informing sentencing options. Comprehensive assessments of risk and need were in place for almost every individual, and the majority of these were also high quality. A full range of specialist assessments were being undertaken to inform interventions, including age-appropriate assessments for use with young people. A strong commitment to involving the individual and collaborating with partner agencies was evident at every stage of the assessment process. Proportionate, risk-based information sharing was helpfully informing responses to identified risk and need within the service and across wider social work teams where appropriate. Although there was a service-level commitment to following national guidance, just over half of comprehensive assessments were completed within the expected 20-day timescale. There was a recognised need to strengthen compliance with assessment timescales and to further develop staff confidence in using the full range of functions within the LS/CMI assessment tool. This included assessing and analysing risk of serious harm.

5.3 Planning and providing effective intervention

Very Good

Rationale for the evaluation

There were major strengths in the planning and delivery of interventions across the service. Almost all individuals had a case management plan in place and these plans, along with the work being done to implement them, were consistently high quality. Staff demonstrated a very clear commitment to relationship-based practice. Proactive, tailored support was being offered to address a wide range of welfare needs, and staff made concerted efforts to encourage engagement and remove barriers to participation. In addition, there was a notable focus on supporting individuals to address their offending behaviour through the various group work programmes and robust one-to-one interventions. The unpaid work service was offering a broad range of flexible unpaid work opportunities that took account of the needs of individuals and supported skills development. The women's centre gave women access to responsive, bespoke support to address offending behaviour and their wider needs. Strong collaborative working between justice staff and a range of statutory and third sector partners was supporting development and implementation of case management plans. Staff were effectively managing non-compliance in line with statutory responsibilities and exercising discretion appropriately. Managers had good oversight of case management. Routine quality assurance measures were well established, reflecting a wider commitment to learning and improvement. The service recognised that adherence to National Outcomes and Standards in relation to key processes needed to improve. Case management plans were not being consistently completed within the 20-day timescales, and reviews and home visits

were not always taking place at the required frequency.

How good is our leadership?

9.4 Leadership of improvement and change

Very Good

Rationale for the evaluation

Leaders were ambitious and aspirational in their pursuit of transformational change. A coherent vision outlined in the local outcome improvement plan was shaping and driving the improvement priorities of the justice service. This was underpinned by a clear commitment to early intervention and prevention which permeated strategic plans and was reflected in a range of ambitious outcomes for the justice service. There was a clear sense of ownership of the justice service from chief officers, who were taking steps to raise the profile of the service within the health and social care partnership. A delivery plan had been developed to articulate priorities along with performance management structures to strengthen oversight of performance, improvement, and assurance activities. This reflected the strong commitment to continuous learning and improvement that permeated all levels of the service. Operational leaders had embedded a very strong culture of practice learning through a range of improvement initiatives. Staff at all levels were encouraged and empowered to take part in developing the service. This was contributing to better delivery of CPOs. Clarity about shared goals and measures was contributing to effective collaboration with partners. Some staff questioned whether the work of the service was seen and valued within the wider partnership. To address these concerns, leaders needed to finalise and implement the delivery plan and associated performance management frameworks to increase visibility and effectively demonstrate impact.

The six-point evaluation scale

The six-point scale is used when evaluating the quality of performance across quality indicators

Excellent	Outstanding or sector leading
Very Good	Major strengths
Good	Important strengths, with some areas for improvement
Adequate	Strengths just outweigh weaknesses
Weak	Important weaknesses – priority action required
Unsatisfactory	Major weaknesses – urgent remedial action required

An evaluation of **excellent** describes performance which is sector leading and supports experiences and outcomes for people which are of outstandingly high quality. There is a demonstrable track record of innovative, effective practice and/or very high quality performance across a wide range of its activities and from which others could learn. We can be confident that excellent performance is sustainable and that it will be maintained.

An evaluation of **very good** will apply to performance that demonstrates major strengths in supporting positive outcomes for people. There are very few areas for improvement. Those that do exist will have minimal adverse impact on people's experiences and outcomes. While opportunities are taken to strive for excellence within a culture of continuous improvement, performance evaluated as very good does not require significant adjustment.

An evaluation of **good** applies to performance where there is a number of important strengths which, taken together, clearly outweigh areas for improvement. The strengths will have a significant positive impact on people's experiences and outcomes. However, improvements are required to maximise wellbeing and ensure that people consistently have experiences and outcomes which are as positive as possible.

An evaluation of **adequate** applies where there are some strengths but these just outweigh weaknesses. Strengths may still have a positive impact but the likelihood of achieving positive experiences and outcomes for people is reduced significantly because key areas of performance need to improve. Performance, which is evaluated as adequate, may be tolerable in particular circumstances, such as where a service or partnership is not yet fully established, or in the midst of major transition. However, continued performance at adequate level is not acceptable. Improvements must be made by building on strengths while addressing those elements that are not contributing to positive experiences and outcomes for people.

An evaluation of **weak** will apply to performance in which strengths can be identified but these are outweighed or compromised by significant weaknesses. The weaknesses, either individually or when added together, substantially affect peoples' experiences or outcomes. Without improvement as a matter of priority, the welfare or safety of people may be compromised, or their critical needs not met. Weak performance requires action in the form of structured and planned improvement by the provider or partnership with a mechanism to demonstrate clearly that sustainable improvements have been made.

An evaluation of **unsatisfactory** will apply when there are major weaknesses in critical aspects of performance which require immediate remedial action to improve experiences and outcomes for people. It is likely that people's welfare or safety will be compromised by risks which cannot be tolerated. Those accountable for carrying out the necessary actions for improvement must do so as a matter of urgency, to ensure that people are protected, and their wellbeing improves without delay.

The quality indicator model

The inspection team used this model to reach evaluations on the quality and effectiveness of services.

What key outcomes have we achieved?	How well do we jointly meet the needs of our stakeholders?	How good is our delivery of services for those involved in community justice?	How good is our operational management?	How good is our leadership?
1. Key performance outcomes	2. Impact on people who have committed offences, their families and victims	5. Delivery of key processes	6. Policy, service development and planning	9. Leadership and direction
1.1 Improving the life chances and outcomes of those with lived experience of community justice	2.1 Impact on people who have committed offences 2.2 Impact on victims 2.3 Impact on families	5.1 Providing help and support when it is needed 5.2 Assessing and responding to risk and need 5.3 Planning and providing effective intervention 5.4 Involving people who have committed offences and their families	6.1 Policies, procedures and legal measures 6.2 Planning and delivering services in a collaborative way 6.3 Participation of those who have committed offences, their families, victims and other stakeholders 6.4 Performance management and quality assurance	9.1 Vision, values and aims 9.2 Leadership of strategy and direction 9.3 Leadership of people 9.4 Leadership of improvement and change
	3. Impact on staff		7. Management and support of staff	
	3.1 Impact on staff		7.1 Staff training and development, and joint working	
	4. Impact on the communities		8. Partnership working	
	4.1 Impact on the community		8.1 Effective use and management of resources 8.2 Commissioning arrangements 8.3 Securing improvement through self-evaluation	
<p align="center">10. What is our capacity for improvement? Overall judgement based on an evaluation of the framework of quality indicators</p>				

Terms we use in this report

Aberdeen Foyer is an employability support service primarily for those on CPOs who have unpaid work and other activity requirements.

Caledonian System is an integrated approach to addressing domestic abuse that combines a court-ordered programme for men, aimed at changing their behaviour, with support services for women and children who have been victims of abuse.

Case management plan should be developed in collaboration with the individual and should seek to address the identified risks and needs and promote the strengths identified by the assessment process.

Clinical care and governance group is a subgroup of the clinical care and governance committee which reports to the integration joint board. The group scrutinises reports to provide assurance to the committee on the delivery and quality of safe, effective, person-centred care.

Community justice outcome improvement plan - the Community Justice (Scotland) Act 2016 places a duty on community justice statutory partners to produce this plan, which outlines local needs and priorities and the actions to address these.

Connections women's centre provides a range of support to women subject to CPOs in Aberdeen including the Connections programme to address offending related issues. The centre provides unpaid work opportunities, enables access to other agencies and hosts a drop-in service for domestic abuse victims.

Diversion can be imposed following a decision by the Crown Office Procurator Fiscal Service to divert a case for social work intervention with the aim of preventing further offending in cases involving young people, individuals being charged for the time, minor offences or where there is no overriding public interest for a prosecution.

Local outcome improvement plan outlines how the community planning partnership plans to deliver improved outcomes for its communities.

Level of service/ case management inventory (LS/CMI) is a risk/need assessment and management planning method for general offending. In Scotland, the LS/CMI approach has been developed to combine an actuarial approach with an evaluation of the pattern, nature, seriousness and likelihood of offending.

MAPPA is the acronym for multi-agency public protection arrangements put in place to manage the risk posed by registered sex offenders and other individuals who pose a high risk of harm to people and communities.

MARAC stands for multi-agency risk assessment conference arrangements, which are professional processes designed to identify and protect individuals from domestic abuse.

Moving Forward: Making Changes (MF:MC) is a behavioural programme providing interventions for men who commit sexual offences or offences with a sexual element.

Other activity requirements can be undertaken as part of an unpaid work requirement and provide an opportunity for individuals to undertake other rehabilitative activities that promote desistance from offending, for example alcohol or drug education, employability training, problem solving, interpersonal skills training and so on. Other activity must not exceed 30% of hours, to a maximum of 30 hours.

Pre-disposal team enables early engagement with people appearing in court, provides services to Aberdeen sheriff court and passes relevant information to justice and children's social work services.

Problem-solving approach is a collaborative approach combining the authority of the court with a range of community-based supports and interventions to reduce the use of short custodial sentences and reduce offending by taking a rehabilitative and supportive approach that is tailored to meet the needs of the individual.

Respect is an accredited programme for working one-to-one with perpetrators of domestic abuse.

Statutory reviews – National Outcomes and Standards indicate that case management plans should be reviewed and, where necessary, revised at regular intervals during the course of a CPO.

Structured deferred sentences allow individuals an opportunity to prove to the court that they can be of good behaviour and avoid further offending.

Supervision is one of nine provisions available to the court that can be imposed as part of a CPO. With the exception of unpaid work for individuals aged 18 and over, none of the CPO requirements can be imposed without the addition of a supervision requirement. Supervision requires the individual to attend appointments with a justice social worker for a specified period. The aim of supervision is to encourage compliance and reduce reoffending by engaging the individual in a process of change.

Trauma-informed practice is grounded in understanding and responding to the impact of trauma. It emphasises physical, psychological and emotional safety and creates opportunities for survivors to rebuild a sense of control and empowerment.

Unpaid work is intended as an alternative to imprisonment, this takes place in local communities and is for the benefit of the community. Unpaid work can be imposed as a standalone requirement by means of a Level 1 or Level 2 order or can be imposed in conjunction with a range of other requirements, including supervision.

Venture Trust (Scotland) is a national charity providing intensive personal development programmes and outdoor activities to help reduce offending and support desistance.

Whole System Approach for Young People Who Offend is the Scottish Government's programme for addressing the needs of young people involved in offending. It aims to divert young people from statutory measures, prosecution and

custody through early intervention and robust community initiatives. It is aligned to the principles of the Getting it Right for Every Child approach.

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