HMP Doncaster Payment by Results pilot: Final process evaluation report

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The authors
GVA specialises in delivering professional services to clients in all sectors across the UK. Carney Green is a management consultancy established with the aim of producing evidence-based research to enable organisations across the public, private and third sectors to make reasoned and informed decisions.

Both GVA and Carney Green are independent consultancies providing objective advice.
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1. **Summary**

1.1 **Context**
This is the third and final report examining the implementation of the Payment by Results (PbR) pilot at HMP Doncaster.¹

HMP Doncaster is a privately operated prison managed by Serco. The PbR pilot was delivered through an Alliance with Catch22, a social business. The pilot started on 1 October 2011 and was originally due to run for four years until 30 September 2015. To avoid duplicating activity with the Ministry of Justice’s (MoJ) Transforming Rehabilitation (TR) reforms, Serco and MoJ agreed to terminate the PbR pilot a year early on 30 September 2014. After this date, interim support was provided to offenders by the Alliance until the TR reforms were operational.

1.2 **Approach**
The research approach was based on qualitative interviews conducted in four phases between November 2011 and September 2014. In total 173 interviews were completed with senior stakeholders, delivery staff, partner agencies, volunteers and offenders. A convenience sampling approach was used to select all participants. This was because the nature of staff working patterns and availability of volunteers made it difficult to book specific appointments, and there were difficulties in locating offenders who were not either serving current sentences in HMP Doncaster or engaging with Catch22 community support. Since only offenders who had chosen to engage with Catch22 were interviewed, the findings may not be representative of all offenders, and may be more likely to have a positive bias.

1.3 **Results**
The evaluation findings for each research question are presented below.

**How, and to what extent, did the introduction of a PbR contract change service delivery, and why?**
In custody, the introduction of the PbR contract resulted in the support provided to offenders shifting from a reactive, ‘first come, first served’ basis to a proactive delivery model facilitated by case management.

¹ The first report (Murray et al, 2012) was published in November 2012 and the second report (Hichens and Pearce, 2014) was published in April 2014.
Case management was also provided to offenders following their release from HMP Doncaster. This included offenders sentenced to less than 12 months and not receiving probation supervision – a group who at that time did not receive any statutory coordinated community support. Community based case managers provided offender led support and helped to coordinate interventions run by other agencies.

**How, and to what extent, might these approaches have influenced reoffending rates?**

The PbR target was a five percentage point reduction in offenders reconvicted for an offence or offences within one year of their discharge from custody, compared to the baseline year of 2009. The reconviction rate for the first cohort (October 2011 to September 2012) was 5.7 percentage points lower than the 2009 baseline year so the five percentage point target was met (MoJ, 2014a). The reconviction rate for the second cohort (October 2012 to September 2013) was 3.3 percentage points lower than in the baseline year so the five percentage point target was not met (MoJ, 2015a).

As a qualitative process evaluation, this research cannot explicitly say what, if any, aspects of the pilot contributed to the reoffending rates. Nevertheless, the range of delivery approaches identified in this report may have had some influence on the reoffending rates.

**What were stakeholders’ views of the strengths and weaknesses of the contractual model, as implemented?**

The following strengths of the delivery model were identified by interviewees:

- The introduction of a case management approach in custody and community, which was proactive, holistic, flexible and offender led.
- Providing community based case management support to offenders sentenced to less than 12 months and not released on licence, which they would not otherwise have received.
- Providing custody based case management for offenders at the outset of their sentence and initiating community support six to eight weeks before their release.
- Having informal relationships with partner agencies ‘helped things to get done’ (housing providers were the most common type of partner agency, which reflected the fact that housing was the most common support need identified by offenders and staff).
- Using volunteer mentors, who met independently with offenders, was regarded as an asset in the delivery of support to offenders.

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2 The year 2009 was chosen as the baseline because it was the most recent complete dataset available.
The Veterans in Custody (VIC) volunteer scheme, which provided informal mentoring and specific support to offenders who were ex forces, and was delivered by former servicemen.

Interviewees perceived some challenges to the delivery model, including the following:

- The binary outcome measure did not capture frequency or severity of reoffending. This resulted in Alliance provided community support being withdrawn from individuals who had reoffended within a cohort year.
- There were more custody based staff posts than community based posts, which the staff interviewed felt was an imbalance in the use of resources to reduce reoffending most effectively. Staff found the transition to these new roles challenging at the start of the pilot.
- It was difficult to support offenders released 'out of area' effectively because of a lack of face to face contact and limited understanding of the local support landscape.
- The Alliance had limited control over some activity which was likely to influence reoffending. This included out of area cases; those led by probation; and interventions delivered by partner agencies, which varied by area.
- Accessing community interventions was dependent on the availability of existing services, many of which were already 'stretched'.
- There were problems with the clarity of role and commitment among some volunteers.
- There was little confidence in the data management system among staff. This resulted in duplicating information across databases and obtaining limited management information.
- The informal partnership arrangements meant there were issues with sharing data and the sustainability of relationships.

How, and to what extent, did the pilot encourage greater efficiency?

The following elements of delivery were identified as efficient:

- The Alliance model was implemented by restructuring and reallocating existing staff to a structure perceived to be more effective at reducing reoffending without changing the overall costs of delivery. Senior staff regarded this as an efficient use of resources.
- The flexible community based delivery was identified as efficient by staff. Meeting in offenders’ own homes and allowing offenders to travel in case managers’ own cars encouraged participation and made offender engagement easier (this approach was risk assessed as part of Catch22’s standard working policies).
- Since community based case management was voluntary, it meant that staff time was focused on individuals who wanted to be supported.
How, and to what extent, did the pilot encourage innovation?

The following areas of innovation were highlighted:

- The TUPE\(^3\) transfer of staff from a private sector organisation to a charitable organisation was regarded as innovative by senior stakeholders. Delivery staff stated that they found the transition challenging and would have liked more communication, support and training.
- Dedicated community case management for offenders sentenced to less than 12 months was seen as innovative by staff. It provided dedicated, coordinated support to a group of offenders who would otherwise not have received it.
- Staff identified the holistic offender led support as innovative. Delivery staff were able to provide a wide range of support and were not restricted to providing only certain types of support, such as just housing.

What lessons can be learnt to inform the development of further PbR projects or the commissioning of offender management services more generally?

The research has identified the following lessons, which could help policymakers and providers develop future offender management services:

- Early and ongoing communication and training with delivery staff to allow time for new ways of working to become embedded.
- A case management approach to facilitate dedicated interventions for offenders.
- Early intervention with offenders to identify and help address their immediate needs.
- A flexible, ‘offender led’ approach to community delivery, to enable holistic tailored support to be provided to each individual.
- Appropriate allocation of staff between custody and community roles to help ensure that sufficient resource is dedicated to helping individuals reduce their reoffending.
- A national referral network to support offenders released outside the local discharge area effectively.
- Guidance on what constitutes offender non engagement with interventions so that delivery organisations can operate with confidence.
- Informal relationships between delivery staff and staff from partner agencies can be underpinned by formal corporate agreements.

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\(^3\) TUPE: The Transfer of Undertakings (Protection of Employment) Regulations (TUPE) protect employees’ terms and conditions of employment when a business is transferred from one owner to another. Employees of the previous owner when the business changes hands automatically become employees of the new employer, on the same terms and conditions.
• A gap analysis for future delivery to assess the availability and quality of community provision in delivery areas.
• An allocated budget for volunteer training to help address volunteers’ skills gaps, encourage volunteer commitment and add value to delivery.
• An outcome measure that includes frequency and severity of reoffending to encourage delivery providers to continue working with individuals who reoffend and enable a more nuanced understanding of the success of interventions.
• Piloting of data management systems to determine their suitability and functionality to help deliver a service shaped by robust data reporting.
2. Context

2.1 PbR and reducing reoffending

Payment by Results (PbR) represents a shift in the way services are commissioned, with the intention of delivering better outcomes for the public at the same or a reduced cost. PbR involves service providers being paid on the basis of the outcomes they achieve, not just on the inputs or outputs they deliver (Fox and Albertson, 2011). This means that providers are only paid after their performance has been proven, and hence the government does not pay in full for unmet or unwanted outcomes.

The key aims of PbR include:
- a commitment to the overall principle that ‘we should only pay for what works’;
- a focus on outcomes rather than narrow outputs and/or delivery processes;
- the transfer of financial risk from the taxpayer to the provider;
- potential for increased levels of innovation, facilitated by greater discretion for providers;
- diversifying the range of providers and services delivered (Murray et al, 2012).

A PbR approach in the Criminal Justice System (CJS) was first outlined in the Breaking the Cycle Green Paper (MoJ, 2010). The Green Paper identified that nearly 50% of offenders released from prison reoffended within a year and that the reoffending rates for prison sentences of less than 12 months increased from 58% in 2000 to 61% in 2008 (MoJ, 2010). The reoffending rate for prison sentences of less than 12 months has remained higher than the rate for all custodial sentences. In the 12 months ending March 2013, the less than 12 month reoffending rate was 57.9% compared to 45.1% for all custodial sentences (MoJ, 2015b).

The Green Paper introduced a ‘rehabilitation revolution’ for more effective punishment, rehabilitation and sentencing of offenders to enable the cycle of crime and prison to be broken. The PbR pilot at HMP Doncaster was announced in the government’s response to the Breaking the Cycle consultation (MoJ, 2011).

The PbR pilot at HMP Doncaster represented the continuing development of interventions for short sentence prisoners (those serving less than 12 months). A Home Office study in 1997 found strong arguments for the Probation Service to have some involvement with short sentence offenders after their release (see Maguire et al, 1998, 2000).
In response, six resettlement ‘pathfinders’ were set up in 1999 (three led by probation and three led by voluntary organisations) to pilot and evaluate new models of working with short term prisoners. Reviews of the pathfinders identified the value of case management, continuity of support and early contact pre release (see Clancy et al., 2006; Lewis et al., 2003, 2007; Maguire and Raynor, 2006). Lewis et al. (2007) found that there was some evidence to show that the pathfinders led to a reduction in reoffending, particularly those that maintained contact with mentors post release.

Since 2012 the Ministry of Justice (MoJ) has run several public consultations (see MoJ, 2013a; MoJ, 2012; MoJ, 2013b) to explore effective offender management, which have informed the government’s Transforming Rehabilitation (TR) reforms. TR represents a new approach to adult offender rehabilitation in England and Wales (MoJ, 2013c). Under these reforms, a number of outcomes have been achieved:

1. The market has been opened up to a diverse range of new rehabilitation providers.
2. New payment incentives for market providers have been introduced in order to pay them in full only for real reductions in reoffending.
3. The majority of offenders released from custody (including the most prolific group of offenders – those sentenced to less than 12 months in custody) now receive at least 12 months’ statutory rehabilitation support in the community.
4. A nationwide ‘through the prison gate’ resettlement service has been put in place, so most offenders will be given continuous support by one provider from custody into the community.
5. A new public sector National Probation Service has been created.

Under the reforms, 21 Community Rehabilitation Companies (CRCs) were established to deliver rehabilitation services in England and Wales for low and medium risk offenders. A new public sector National Probation Service (NPS) was also created to manage those offenders assessed as posing a high risk of serious harm to the public or those released from custody who have committed the most serious offences (MoJ, 2014b). On 1 June 2014 the transition took place from the former probation structure of 35 Probation Trusts to the National Probation Service and 21 CRCs. On 1 February 2015 the new providers took ownership of, and began running, the CRCs. On this date the remaining provisions of the Offender Rehabilitation Act (ORA) 2014 also commenced. The most significant change introduced by the ORA was to extend statutory supervision to offenders released from short prison sentences of less than 12 months.

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4 A seventh ‘pathfinder’ was added in 2001.
PbR payments to CRC owners are dependent on reducing the proportion of people who commit further offences (binary measure) and reducing the total number of offences (frequency measure).

2.2 The PbR pilot at HMP Doncaster

HMP Doncaster is a privately operated Category B prison, managed by Serco. The PbR pilot was delivered in an Alliance between Serco and Catch22, a community and voluntary sector organisation with experience of working with offenders. The contract to run the prison was between Serco and MoJ. Catch22 was a subcontractor to Serco. The PbR contract was signed in April 2011 and commenced on 1 October 2011. The key aim of the pilot was to test the effect of replacing a multitude of process and output targets with a single outcome based target and a financial incentive to achieve this target.

The agreed binary measure to test the success or otherwise of the pilot was: The percentage of offenders reconvicted across the cohort for an offence or offences committed within a period of one year from the date of discharge. This was compared against the 2009 reconviction rate.\(^5\) The year 2009 was chosen as the baseline because it was the most recent complete dataset available. The measure stipulated that if the reconviction rate for each cohort year was not at least five percentage points lower than the baseline of 58% for January to December 2009, MoJ would reclaim 10% of the core contract value from Serco. If the reconviction rate was reduced by five percentage points, Serco would retain the full contract value.

If reconviction rates were reduced by six percentage points or more against the baseline, Serco was entitled to additional outcome payments (up to an agreed level and up to a maximum of a ten percentage point reduction). The five percentage point reduction target was agreed after analysis of historic reconviction rates, and after establishing that this would illustrate a demonstrable difference which could be attributed to the new system and not just natural variation. Catch22 was not put at financial risk if the reconviction target was not met; however, Serco would pay Catch22 a proportion of the additional outcome payments if the target was exceeded.

The reconviction rate for the first cohort\(^6\) of offenders released from HMP Doncaster was published in August 2014. The reconviction rate was 5.7 percentage points lower than the

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\(^5\) The reconviction rate used for the PbR pilot prisons is different from the National Statistics reoffending measure. It measures the proportion of offenders who are convicted at court in the 12 months following release from prison, with a further six months to allow for cases to progress through the courts. It excludes those who receive an out-of-court disposal only (MoJ, 2014a).

\(^6\) The reconviction rate used for the PbR pilot prisons is different from the National Statistics reoffending measure. It measures the proportion of offenders who are convicted at court in the 12 months following release from prison, with a further six months to allow for cases to progress through the courts. It excludes those who receive an out-of-court disposal only (MoJ, 2014a).
2009 baseline year, which meant that the Alliance successfully achieved the five percentage point threshold, and Serco retained the full core contract value for the first year of the pilot. If only offenders who served less than 12 month sentences are included, the reconviction rate fell by 8.4 percentage points (from 64.1% to 55.7%) compared to the 2009 baseline year (MoJ, 2014a).

The reconviction rate for the second cohort\(^7\) of offenders was published in July 2015. The reconviction rate was 3.3 percentage points lower than the 2009 baseline year which meant that the Alliance did not achieve the five percentage point threshold, and Serco was required to reimburse 10% of the full core contract value for the second year of the pilot. If only offenders serving less than 12 month sentences are included, the reconviction rate fell by 6.3 percentage points (from 64.1 per cent to 57.8 per cent) compared to the 2009 baseline year (MoJ, 2015a).

The pilot was originally contracted to run for four years until 30 September 2015 and cover four cohorts of offenders. The introduction of the TR reforms, however, meant that the activities of the pilot would duplicate the activities of the CRC for the South Yorkshire Contract Package Area. Therefore Serco and MoJ agreed to terminate the PbR pilot a year early on 30 September 2014. After this date, interim support was provided to offenders by the Alliance until the activities of the CRC commenced.

Each cohort was made up of all sentenced offenders discharged from HMP Doncaster within a 12 month period, with the following exclusions:

- Foreign national prisoners to be deported or transferred to an Immigration Removal Centre on release from Doncaster.
- Offenders sentenced to time already served on remand.
- Offenders serving sentences for breach of court orders.

2.3 Process evaluation of the PbR pilot at HMP Doncaster

The MoJ commissioned GVA and Carney Green to undertake a process evaluation, which sought to answer the following key research questions:

1. How, and to what extent, did the introduction of a PbR contract change service delivery, and why?

2. How, and to what extent, might these approaches have influenced reoffending rates?

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\(^6\) All eligible releases between 1 October 2011 and 30 September 2012.

\(^7\) All eligible releases between 1 October 2012 and 30 September 2013.
3 What were stakeholders’ views of the strengths and weaknesses of the contractual model, as implemented?

4 How, and to what extent, did the pilot encourage greater efficiency?

5 How, and to what extent, did the pilot encourage innovation?

6 What lessons can be learnt to inform the development of further PbR projects or the commissioning of offender management services more generally?

The first report (Murray et al, 2012) was published in November 2012 and focused on the changes to service delivery, particularly in custody, as a result of the PbR pilot. A second report (Hichens and Pearce, 2014) was published in April 2014 which identified how service users were supported following their release from HMP Doncaster.

This final report draws together all the previous research to address the research questions and provide a summative review of the PbR pilot delivered at HMP Doncaster. Chapters four and five examine the changes to service delivery, identifying strengths, weaknesses, efficiencies and innovation. The implications section presents the learning from the pilot at HMP Doncaster which will inform the development of similar services.

As a qualitative process evaluation, it is not possible to state conclusively how, and to what extent, the new approaches have influenced the reduction in reconviction rates mentioned above. Therefore, the second research question cannot be definitively answered by this research. This report does, however, seek to put these results in context by identifying the delivery approaches used and their perceived strengths and weaknesses, which may have contributed to the reconviction rates.
3. Approach

This report represents the final output of the process evaluation. As such the research is principally based on qualitative information gathered from consultation throughout the evaluation period.

3.1 Information collection

Information was primarily obtained through semi structured interviews with senior staff, delivery staff, volunteers and partner agencies. The semi structured interviews allowed each research participant to present their views of the pilot within a defined framework. Structured interviews were carried out with offenders to ensure specific and consistent information was captured. Some quantitative information collected by the Alliance has been used to supplement the qualitative research findings.

There were four waves of research throughout the evaluation. Appendix A presents a list of the different organisations included in each wave of the research.

First wave

The first wave of research was completed during November and December 2011 with 13 senior stakeholders from MoJ, the National Offender Management Service (NOMS), Serco and Catch 22. The stakeholders interviewed were identified by their respective organisations on the basis that they had been involved in the development and initial implementation of the PbR pilot.

Second wave

Between April and July 2012 interviews were completed with 18 Catch22 delivery staff, 51 offenders who were currently serving sentences in HMP Doncaster and staff from five partner agencies. The delivery staff and offenders were sampled using a convenience approach. This meant that staff and offenders were selected based on their availability during the research period. Convenience sampling is not representative and may have introduced some selection bias, although it aims to provide an insight into a range of views and experiences.

Third wave

For the third wave of the research, interviews were completed in July and August 2013 with the five senior Alliance staff involved in the PbR pilot and the seven Catch22 community delivery staff (six community based case managers and one volunteer coordinator). Four interviews were also completed with police and probation. The police and probation
stakeholders were identified by the Alliance on the basis of their involvement in community delivery.

**Fourth wave**

The final wave of research was completed between July and September 2014. This included interviews with eight senior staff from the Alliance, all seven Catch22 delivery staff, ten volunteers, 30 offenders who had received some community support and 15 individuals from 13 partner agencies. All senior and community delivery staff identified by the Alliance were interviewed. A convenience sampling approach was used to select the volunteers, offenders and partner agency staff interviewed. Only offenders who had chosen to engage with Catch22 on release from custody were interviewed, which means that the findings may not be representative of all offenders, and may be more likely to have a positive bias. Further detail of the approach for the fourth wave of research is presented in Appendix B. A summary of the offenders’ responses is presented in Appendix C.

### 3.2 Data analysis

The information gathered from the consultation with senior staff, delivery staff, volunteers and partner agencies was transferred into an analysis framework to identify the key messages. The notes and audio recordings from each interview were reviewed and input into the analysis framework by the research team according to themes. This provided an overview of responses which enabled patterns to be identified by theme and type of interviewee.

Responses and insights differed between interviewees. This was because different interviewees had different experiences of the PbR pilot. Volunteers, for example, had a different perspective to senior Serco staff. Accordingly, tailored topic guides were developed for each stakeholder group. Differences in responses could also be attributed to individual and/or organisational bias. In qualitative research, ‘opinions’ and ‘facts’ are rarely neutral and are influenced by factors including job role, personal and professional relationships and worldview.

The structured interviews with offenders were input into survey analysis software. This quantified how offenders had answered closed questions and helped to identify key themes from the interviews.8

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8 The offender data should not be treated as quantitatively robust because of the small sample size (51 offenders in the first wave and 30 in the fourth wave) and the convenience sampling approach.
4. The delivery approach

This chapter addresses the following research question:

- Q1: How, and to what extent, did the introduction of a PbR contract change service delivery, and why?

To understand fully how the introduction of the PbR contract changed service delivery, it is necessary to first describe service delivery prior to the introduction of PbR. The rest of this chapter then describes the delivery of the Alliance model in custody and community, including the role of volunteers and partner agencies. All references to case managers refer to Catch22 delivery staff.

4.1 Delivery before PbR

When offenders first arrived at HMP Doncaster, custody officers undertook a screening process which acted as a triage and signposting system to identify offenders’ immediate needs. The custody officers then had limited involvement with those offenders during their sentence. Following this initial reception and induction process, offenders had access to various services provided by the Offender Management Unit (OMU) and Community Re-integration Team (CRT) during their sentence.

The OMU was based in the prison and comprised custody officers, whose duties included patrols, searches and Offender Assessment System (OASys) assessments. The OASys assessments were for offenders sentenced to longer than 12 months and who were subject to Probation Service supervision on release as part of their licence conditions. OASys assessments support sentence management by identifying the key areas of risk and the interventions required to address them.

The CRT was also based in the prison and provided access to accommodation, education, training and employment services to all offenders who requested it. Staff were not custody officers and their role typically involved providing Information, Advice and Guidance (IAG). Accessing these services was optional, and it was the responsibility of the individual offender to request an appointment through an ATM style electronic kiosk provided on the residential wings of the prison. Offenders interviewed pointed out that a consequence of this approach was the need to repeat ‘their story’ multiple times to several different people, which was stressful and discouraged engagement.

It was indicated by delivery staff that the requests from the ‘ATMs’ were dealt with on a ‘first come, first served’ basis, which meant that in some cases offenders had been released
before they reached the top of the list to access the support available. This was identified as a specific problem for offenders on very short sentences, particularly sentences of less than four weeks.

South Yorkshire probation had a Service Level Agreement (SLA) with Serco to provide statutory offender management to offenders sentenced to more than 12 months and those classified as high/very high risk. South Yorkshire probation provided this statutory provision in the prison and on release as part of an offender’s licence conditions.

Prior to PbR there was no statutory community support for offenders sentenced to less than 12 months. For these offenders, ‘through the gate’ support was very limited and delivered on an ad hoc basis. It was reported by delivery staff that the CRT provided resettlement support to offenders nearing release and maintained good relationships with housing providers. This support was reactive however, and it was the responsibility of the offender to request it.

4.2 Alliance model in custody

The Alliance model started at the outset of the PbR contract and was so called because it was delivered in an alliance between Serco and Catch22. Staff stated that the implementation of the Alliance model in custody resulted in a shift from a reactive to a proactive approach to supporting offenders. This was driven by case management, which meant that each offender, regardless of sentence length and level of risk, received a case manager.

In the case management approach, custody based case managers were responsible for assessing offenders, designing a tailored support package and facilitating delivery through access to appropriate custody based interventions. A central element of the model was that the interventions accessed by offenders in custody did not change, just the process by which they were accessed.

The delivery approach was realised by merging the staff of the OMU and CRT into one team. All members of the team were transferred through TUPE\(^9\) from Serco to Catch22. Senior staff and stakeholders stated that in implementing the Alliance model there had been no change in expenditure; instead, existing resources had been restructured and reallocated.

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\(^9\) TUPE: The Transfer of Undertakings (Protection of Employment) Regulations (TUPE) protect employees’ terms and conditions of employment when a business is transferred from one owner to another. Employees of the previous owner when the business changes hands automatically become employees of the new employer, on the same terms and conditions. It is as if their employment contracts had originally been made with the new employer. Their continuity of service and any other rights are all preserved. Both old and new employers are required to inform and consult employees who are affected directly or indirectly by the transfer. ACAS http://www.acas.org.uk/TUPE.
Following the restructure, there were 12 custody based case managers, each with a caseload of between 40 and 60 offenders. They were supported by 11 full time equivalent (FTE) case support workers. There were also two housing coordinators, one ETE coordinator and a business support officer.

The case managers used a case management system to identify the support needs of each offender. The case management system included an assessment of needs for ten reoffending routes identified by the Alliance: accommodation; education, training and employment (ETE); health and wellbeing; addiction; children and families; finance, benefit and debt; attitudes, thinking and behaviour; immigration and legal status; social capital; and Veterans in Custody (VIC) eligibility. The case management system was an additional assessment and did not replace pre existing ones, such as OASys assessments, which were still completed for those that required them.

4.3 Alliance model pathways

At the start of the pilot it was intended that all offenders would receive the same level of case management. Serco and Catch 22 identified within the first six months, however, that intensive case management in custody for all offenders was not the most efficient use of resources. The Alliance therefore developed four intervention ‘pathways’ for different types of offenders:

- **Pathway one**: All high/very high risk of harm/Imprisonment for Public Protection (IPP) offenders.
- **Pathway two**: Offenders sentenced to 12 months and over, but not high/very high risk/IPP.
- **Pathway three**: Offenders sentenced to less than 12 months and not high/very high risk/IPP.
- **Pathway four**: Individuals in the prison on remand before trial and sentencing.

Between 1 October 2012 and 30 September 2014 (cohorts 2 and 3), 18% of eligible offenders were classified as pathway one, and a further 18% were classified under pathway two. The remaining 64% fell into pathway three. Individuals under pathway four were either released without charge or sentenced. If they were given a custodial sentence in HMP Doncaster they were subsequently allocated to one of the other three pathways.

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10 Social capital consists of the networks of relationships among people who live and work in a particular society.
11 IPPs were introduced from 2005 to ensure that dangerous, violent and sexual offenders stayed in custody for as long as they presented a risk to society. Under this system a person would be given an IPP if the offence committed was not so serious as to merit a life sentence.
12 The first year data could not been captured because the pilot started with a paper based case management system, which later evolved into an electronic system. The paper based data capture was not as detailed as the electronic system. Therefore the pathways for the first cohort of offenders cannot be accurately provided.
The support offered varied according to each pathway. A description of each pathway is also summarised in Figure 1.

**Figure 1: Intervention pathway overview**

<table>
<thead>
<tr>
<th>Pathway</th>
<th>Within 8 weeks of arrival in custody</th>
<th>Management in custody</th>
<th>6 to 8 weeks prior to release</th>
<th>Community support</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pathway 1</td>
<td>INTA by Catch22</td>
<td>OASys and sentence plan by probation</td>
<td>Support led by probation</td>
<td>CMA by Catch22</td>
</tr>
<tr>
<td>Pathway 2</td>
<td>INTA by Catch22</td>
<td>OASys and sentence plan by Catch22</td>
<td>Support led by Catch22</td>
<td>CMA by Catch22</td>
</tr>
<tr>
<td>Pathway 3</td>
<td>Catch22 allocated case manager</td>
<td>CMA by Catch22</td>
<td>Support led by Catch22</td>
<td>Handover to community based Catch22 case manager</td>
</tr>
</tbody>
</table>

** whilst on remand**

Pathway 4

| INTA by orderlies | Catch22 and orderlies facilitate INTA actions | Custodial sentence in HMP Doncaster: onto Pathways 1, 2, or 3 | or | Custodial sentence elsewhere | or | Non custodial sentence | or | Released without charge |

**Key**

INTA = Initial needs triage assessment  
CMA = Case management assessment

Pathway one

These offenders were subject to statutory offender management in custody. South Yorkshire probation managed this group of offenders throughout the pilot.

Probation staff completed the OASys assessments and sentence plan. A Catch22 support worker completed an immediate needs triage assessment to identify needs such as drug and/or alcohol dependency when the offender first arrived at the prison. A case management assessment was undertaken by a case worker approximately eight weeks prior to release. This identified any needs upon release, such as housing. The Probation Service led the community support and the Alliance community based case manager liaised with the Probation Service to stay informed of the individual’s progress and offer any additional support on request.

Pathway two

Catch22 led the case management of this group of offenders in custody. A case worker completed an immediate needs triage assessment and within eight weeks of arrival a case manager completed an OASys assessment and sentence plan. As with pathway one, a case management assessment was undertaken by a case worker eight weeks prior to release. The Probation Service also managed the community support of pathway two offenders, with the Alliance being informed of progress.
Pathway three
This group were the main focus of the Alliance model because Serco and Catch22 identified it as the key cohort where reconviction rates could be reduced. Reconviction rates were high among this group. In 2012, adults who were sentenced to less than 12 months reoffended at a rate of 57.9% compared to 33.9% for those who served sentences of 12 months or more (MoJ, 2015b). Also, in the pre PbR delivery model, offenders sentenced to less than 12 months received no probation supervision in custody or in the community.

Under the Alliance model, each offender in this group was allocated a custody based case manager within two weeks of arriving at the prison. The case manager completed the case management assessment and produced a support plan for the offender. The case manager was the single point of contact for the offender and facilitated access to the required interventions.

On release, pathway three offenders received no statutory probation supervision. In the Alliance model they were offered community support, provided by the Alliance community based case managers. This group of offenders were not statutorily required to receive community support and therefore participation was voluntary.

Pathway four
When the Alliance model was first implemented there was no provision for remand prisoners. This was because, as they had not been convicted of an offence, they did not form part of the cohort against which the reconviction target was measured. Before the PbR pilot, however, a remand prisoner could request support from the CRT. Staff reported that the most common request for support from remand prisoners was help in keeping their tenancy while they were in custody.

With no support available, staff identified that an individual’s problems could intensify until they were convicted or acquitted. In the case of housing, this could put an individual’s return to the community at risk if their tenancy had subsequently been lost. In response, a fourth pathway was developed. Orderlies\textsuperscript{13} completed an immediate needs triage assessment for remand prisoners. Any subsequent support needs were facilitated with support from Catch22 staff.

\textsuperscript{13} Offenders who undertook work for the Alliance in prison while serving their sentence.
4.4 Alliance model in the community

Six to eight weeks before they were released, offenders’ case management files were transferred to a community based case manager. Staff reported that intended good practice was for a tripartite meeting to be held between the custody based case manager, community based case manager and the offender. Due to the number of releases each month (approx. 200) and resource constraints however, these meetings did not always occur. Staff did not perceive this to have a negative impact on the handover process because the information about each of the ten reoffending routes was available on the case management system. Staff also stated that custody based and community based staff communicated directly about more complex cases.

There were six community based case managers, who supported offenders released into South Yorkshire. Two community based case managers were assigned to Sheffield and a further two to Doncaster, while Barnsley and Rotherham had one assigned to each of them. Offenders released outside the South Yorkshire area were offered telephone support from a community based case manager. In all cases an offender’s engagement with Alliance community provision was voluntary.

The community based case manager met the offender within the last six to eight weeks of their sentence to establish if they wanted support and to identify their needs on release. All eligible offenders were allocated a community based case manager even if they received statutory provision from probation in the community. Of the 30 offenders interviewed, 29 met their community based case manager while still in custody. The one individual who did not meet their case manager while still in prison reported that at the time he did not want any help. Following his release, however, he decided he would like some support from Catch22.

Regardless of which agency led community support, there were compulsory review periods for all offenders: one week after release, two weeks after release, one month after release and monthly thereafter for 12 months following their release. These review periods required the community based case manager to maintain contact with the offender or lead agency.

The community based delivery staff stated that about 50% of their time was spent in the prison working with offenders about to be released, and the other 50% of their time working in the community with offenders who had been released.

Community based case managers often had caseloads of between 100 and 120. This included pathway one and two offenders whose case management was led by probation. Community based case managers could work with an individual for up to 12 months following
their release, or until they were reconvicted of an offence. If an individual was reconvicted within 12 months of their release they were counted against the reconviction target for that cohort year. The Alliance therefore chose to withdraw support from these individuals, freeing up resources to focus on offenders who had not been reconvicted. The Alliance put in place a structured withdrawal of support that was safe and ethical by referring these individuals to other agencies.

Therefore community based case managers’ caseload fluctuated and often reduced towards the end of a cohort year because individuals released earlier in the year had reoffended.

In addition, not all community based case managers’ caseloads required the same resource. To help ensure efficient case management support in the community, a RAG\textsuperscript{14} system and fortnightly risk meetings were introduced. Community based case managers were required to categorise each of their current caseload as one of:

- red – non engagement;
- red – critical risk of reoffending;
- amber – risk of reoffending; and
- green – unlikely to reoffend.

The categorisation was informed by p-NOMIS records,\textsuperscript{15} the public protection unit, risk assessments, the Offender Group Reconviction Scale (OGRS),\textsuperscript{16} observations of their behaviour in custody and the community, and the individual’s current needs and lifestyle.

Delivery staff reviewed RAG scores weekly. Every two weeks senior staff from Serco and Catch22 reviewed the RAG scores to monitor activity and establish how individuals were being supported. A disengagement strategy was developed as a result of these fortnightly meetings in order to provide a formal process for individuals choosing not to engage with the service. Over a four month period, case managers attempted to make contact with an individual using a variety of methods including phone calls, texts, letters and personal visits. If after four months no contact had been made, the individual’s case file was officially closed.

The community based case manager provided individualised offender led support based on their identified needs. One offender described the community based case manager as a ‘trusted adviser’ who they could talk to about the problems they were facing. The most

\textsuperscript{14} Red, Amber and Green.
\textsuperscript{15} Prison-National Offender Management Information System (p-NOMIS) is the centralised national database of offender information.
\textsuperscript{16} OGRS is a predictor of reoffending based on age, gender and criminal history.
common support needs were finding suitable accommodation, help with finances and benefits, finding furniture, referrals to other agencies and obtaining food.

The Alliance did not provide any discrete community interventions, such as employment courses or rehabilitation services. Community based case managers helped individuals to access the existing support services and staff reported that they helped offenders ‘deal with the everyday elements of life’. Delivery staff identified that in their experience those with chaotic lifestyles frequently failed to organise things like their bills, benefits and housing, quite often through inactivity. What therefore started as a small problem, such as a late bill, could often escalate into a large problem. This could then increase their likelihood of reoffending, turning to crime to resolve the issue.

The community based delivery staff stated that early intervention on an offender’s release was important to ensure they attended their initial appointments and established ‘good habits’. Of the 30 offenders interviewed, 13 had met with their community based case manager on the day of release and a further 10 were met within two to three days after release.

The offender led nature of the community provision meant that the support provided by case managers was flexible. Offenders reported that they had received a variety of support. This included the case manager accompanying them to court to discuss family access, helping to read and respond to post and being taken to doctor’s appointments. Case managers commonly met offenders at their homes. It was also the Alliance’s policy to allow offenders to travel in case managers’ cars, which facilitated attending appointments together. All support interventions for each offender were risk assessed by Catch22 to ensure they were appropriate and safe for staff.

Community based case managers reported that it was important to help establish a stable lifestyle in the first three months to reduce the risk of reoffending. As such, staff worked more intensively with offenders over that time. The interviews with offenders identified that in the first month of their release 13 out of 29 still receiving support saw their case manager two to three times a week, and a further 12 saw them once a week. After two to three months of release only seven out of 25 still receiving support saw their case manager two to three times a week, while 12 still saw them weekly. When respondents were asked if they had seen their case manager frequently enough, all 30 stated that it had been sufficient for their needs.

Staff reported that only a very small proportion of offenders received support for the full 12 months. This was either because they had reoffended or were now living more stable lives and no longer required support. Staff stated that for the minority still requiring support after
12 months they were referred to other organisations such as housing charities which provided case management support.

4.5 Role of volunteers

The Alliance model included the use of volunteers to support delivery in custody and in the community. The Alliance had a target of 50 active volunteers at any one time, although staff reported that numbers fluctuated below this over the lifetime of the pilot. For example, the number of active volunteers would decrease over the summer months. Volunteers were recruited through advertising with volunteering agencies, local universities, volunteering websites and on Catch22’s own website. In the 12 month period from August 2013 to July 2014, 8,140 volunteer hours were recorded.

A volunteer coordinator delivered and arranged training. Before someone could start volunteering they had to attend two days of training. Volunteers reported that the training was useful. It provided an important insight into the types of issues offenders were most likely to face as well as relevant health, safety and safe working information.

Staff reported that in custody volunteers shadowed case managers and undertook administrative tasks. Security protocols meant that volunteers could not access prison computers unless they had advanced security clearance. Staff stated that very few volunteers had this enhanced clearance because most did not come into the prison regularly enough to warrant it. This meant volunteers were restricted to paper based administrative tasks.

A Catch22 volunteer scheme called Veterans in Custody (VIC) provided specific support to ex forces offenders in the prison. Former servicemen, who were sometimes ex offenders, came into the prison weekly to meet offenders in group sessions. The meetings provided an opportunity for servicemen to share their experiences. Staff and VIC volunteers interviewed reported that the VIC volunteers provided informal mentoring and helped offenders see that others had ‘got their life back on track’.

In the community, volunteers shadowed case managers and mentored offenders. Shadowing involved accompanying the case manager to their appointments with offenders. Mentors met with offenders unaccompanied. Interviews with volunteers, offenders and staff identified that this was commonly to meet for a chat over coffee. The interviewed offenders also stated that volunteer mentors had accompanied them to appointments and helped them to fill in forms. Mentors were issued with a phone, and were required to check in before and after every meeting. Staff stated that there were ten phones available for use by mentors.
Volunteer mentors typically met offenders weekly, and the majority only supported one offender at a time. It was identified that a minority would support two at a time. This was determined by how much time a volunteer mentor could commit each week and if they wanted to mentor more than one person at a time.

Volunteer mentors were matched with offenders by the case managers and volunteer coordinator. The case managers identified offenders and liaised with the volunteer coordinator to find a volunteer mentor. Whenever possible, the Alliance sought to match volunteer mentors with offenders with similar interests and backgrounds. For example, the volunteer coordinator would attempt to match an offender who had previously served in the forces with a volunteer who had also been in the forces, if one was available.

Before meeting the offender a volunteer mentor received full disclosure of the offender’s previous convictions and information contained in the case management system. The volunteer mentor then attended meetings with the offender and case manager. If the offender and volunteer mentor were both still willing, they started meeting independently.

### 4.6 Partnership working

Housing providers were the most common type of partner organisation accessed by case managers. These included housing charities, local authorities, letting agents and private landlords. This reflected the fact that housing was identified as the most common support need, both by the interviewed offenders and staff.

In each area the community based case managers reported having contact with probation, the police, and drug and alcohol teams. This was principally because case managers were co-located with the Integrated Offender Management (IOM) teams in each area and joined the IOM meetings, which were attended by these agencies. The IOM meetings provided a weekly opportunity to discuss known offenders and monitor their progress. There was an IOM team for each area of South Yorkshire.

The IOM teams led the case management of offenders identified by the police as Serious Acquisitive Crime (SAC) offenders, either through conviction or intelligence. The Catch22 case manager supported as necessary. Interviews with the police and delivery staff identified that joint working had occurred to support offenders.

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17 IOM is an overarching framework enabling local agencies to come together to coordinate the management of offenders.
Probation led the case management of all offenders released on licence. A community based case manager was assigned to each of these offenders to monitor their progress. It was identified by staff that the case manager did not typically have a direct relationship with the offender, but would stay informed of their progress by the probation officer.

Interviews with delivery staff identified that, apart from the SLA in the prison with South Yorkshire Probation Trust, relationships with partners were principally based on informal arrangements. Delivery staff identified 20 different third sector organisations that they had informal relationships with. These included housing and homeless charities, food banks, and counselling and addiction services. Private sector relationships identified by delivery staff included one training provider and a fluid mix of letting agents and private landlords.

The interviews with staff and partner agencies established that it was up to community based case managers to identify and maintain relationships with the agencies operating within their geographical remit. Partner agencies interviewed identified that relationships existed at a personal level with individuals. Frequently, these personal relationships predated the start of the PbR pilot.

Senior staff identified strategic links at a corporate level with some partners. This included Catch22’s links with the Local Criminal Justice Board, attendance at Reducing Reoffending Steering Group meetings, Reducing Crime and Reoffending Group meetings and Catch22’s membership of the IOM Team Strategic Board.

4.7 Summary

The key changes to service delivery as a result of the introduction of the PbR contract can be summarised as follows:

- Serco and Catch22 entered into an Alliance to deliver the contract. This included the TUPE transfer of staff from Serco to Catch22 and new job roles.
- Offender case management was implemented. Every offender, whether in custody or community, was allocated a Catch22 case manager.
- Access to services in custody changed from a reactive to a proactive system. The ‘first come, first served’ approach was replaced by case managers designing a tailored support package for each offender.
- Voluntary community based case management was provided by the Alliance to offenders who were sentenced to less than 12 months, which addressed a previous gap in provision. Community based case managers provided offender led support and helped coordinate interventions from other agencies.
• Volunteer mentors and VIC volunteers provided additional support to offenders. The volunteers provided practical support, such as with form filling, as well as mentoring.

• Informal relationships with partner agencies frequently existed prior to the start of the PbR pilot. These relationships continued under the pilot. It was identified that relationships had been established with the IOM teams to discuss offenders and monitor their progress.
5. **Strengths and weaknesses of delivery**

This chapter addresses the following research questions:

- **Q2:** How, and to what extent, might these approaches have influenced reoffending rates?
- **Q3:** What were stakeholders' views of the strengths and weaknesses of the contractual model, as implemented?
- **Q4:** How, and to what extent, did the pilot encourage greater efficiency?
- **Q5:** How, and to what extent, did the pilot encourage innovation?

### 5.1 Staffing

The TUPE of staff from Serco to Catch22 at the outset of the pilot was reported by senior staff as unprecedented in terms of transferring private sector employees into a charitable organisation. Senior stakeholders described the transfer of staff from the private to the third sector as an innovative approach to deliver the new case management model.

Staff were transferred into new job roles. Under the Alliance model, staff did not have any custody officer duties, which they previously did as part of the OMU. This meant that some staff had to adapt from an enforcement role to a supportive case management role. Delivery staff stated that they had found the transition to a new organisation and new job roles challenging.

Staff reported that at the outset of the pilot all custody based roles were intended to be generic. In practice, however, due to the expertise required for particular areas of support case managers found providing appropriate advice difficult. In response, the Alliance created specific roles for two housing coordinators, one ETE coordinator and a business support officer.

Senior staff identified that overall expenditure on offender support had not changed with the introduction of the Alliance model. This was cited as an important aspect in delivering the new approach. No new staff were employed, and existing staff were transferred into new roles.

As part of the transfer of staff, the Alliance created six community based case manager posts to help reduce reoffending rates. At the same time there were 13 custody based case managers and ten FTE custody based case workers. Staff felt this to be an imbalance of resources to reduce reoffending most effectively. This was because staff felt that intensive support needed to be provided to people in the community to reduce their likelihood of reoffending. Senior staff acknowledged that additional community based staff would have been beneficial. There was no budget, however, to employ new staff, and no custody based
roles could be transferred to the community because of the statutory duties required in prison, such as staying up to date with OASys assessments.

5.2 Case management

All staff interviewed regarded the proactive case management approach to be a strength of the delivery model. It replaced a reactive system which required offenders to ask for support. Staff noted that often the individuals who did not ask for help were the ones who needed it most. The case management approach meant offenders met with a dedicated case manager to identify and address any support needs they had.

The case management system recorded support needs across ten reoffending routes,\(^\text{18}\) which was regarded as a useful tool by delivery staff. This was because it provided a clear basis to identify support needs and which were the most pressing. Based on the support needs identified, case managers referred the offender to other services as appropriate. The interventions available in custody and community did not change as a result of the new delivery model, but it provided a new way for offenders to access them. Interviewed offenders were positive about this approach because they were able to see the same person every time, who understood all their specific needs. This was preferable to having to repeat different elements of ‘their story’ to a variety of people.

Delivery staff reported that the RAG system provided some help in categorising their caseload.\(^\text{19}\) While they stated that they knew which of their caseload needed the most support, the RAG system was more a management tool. Staff also reported that it was not always helpful to categorise all individuals not engaging with the service as red. This was because some people chose not to engage with the service because they did not have any support needs.

Delivery staff stated that the characteristics of this type of person typically included first time offenders, in permanent employment, with a stable home life and no substance misuse. Case managers typically called these individuals monthly to check how they were doing, and they were categorised as green. Case managers reported, however, that after a few months these individuals often stopped answering their calls because ‘there was nothing to say’ and it reminded them of their time in prison. Under the RAG system they were then moved to red non engagement. Delivery staff stated that it did not feel like an efficient use of resources trying to maintain contact with this type of offender.

\(^{18}\) The ten routes were: accommodation; ETE; health; substance misuse; families; debt; thinking skills; immigration and legal status; social capital; and Veterans in Custody eligibility.

\(^{19}\) The RAG system provided a high level snapshot in time. It was not used to track the proportion of the caseload as either red, amber or green over time.
5.3 Alliance community delivery

Delivery approach

The introduction of community based case management for offenders sentenced to less than 12 months was identified as innovative by staff. It provided dedicated community based support to a group of offenders who would otherwise not have received coordinated support. The service provided was described by staff as ‘flexible’, ‘holistic’ and ‘offender led’. This meant the support provided depended on the needs and wishes of each offender.

The flexible approach was regarded by staff as key to successful delivery. This meant being able to help offenders in many different ways including sourcing furniture, applying for grants, organising benefits, contacting housing providers and arranging appointments with other agencies. It was reported by staff that just being there to listen to individuals and demonstrate an interest in them was important to an offender’s self esteem and rehabilitation. This was reflected in the views of the offenders interviewed. One stated “[my case manager] has been excellent. Anytime I have needed advice or just a chat, [they] will always come and see you.” Another said their case manager was “available to chat, will always respond to texts and phone calls, really flexible and willing to help”.

Staff also identified that if they could quickly help an individual with one of their support needs it helped to gain their trust and therefore their ongoing engagement. Staff described this early intervention as having an important preventative role. Community based case managers sought to help resolve issues before they became worse, such as resolving benefit payment delays and housing problems. Staff reported that offenders often lacked the life skills required to solve these problems. As a consequence, an individual could end up with no income or losing their home, which staff stated could in turn increase their likelihood of reoffending.

The flexible delivery included community based case managers meeting at offenders’ own homes and allowing offenders to travel in community based case managers’ cars. These initiatives were risk assessed as part of Catch22’s standard working policies.

Staff reported that meeting at offenders’ homes was an easier and cheaper option for offenders compared to meeting elsewhere. This facilitated their engagement with the service. Staff also allowed offenders to use their work mobiles to make phone calls in order to resolve problems, such as with benefits, housing, drug support and debts. Staff stated that individuals typically had little income and could not afford the cost of lengthy phone calls to these agencies, which were often premium rate numbers.
Allowing offenders to travel in community based case managers’ cars was stated as a strength of the delivery and an efficiency gain. Case managers frequently accompanied offenders to their different appointments, such as drug support, housing advice and benefit claims. Interviewees thought that taking offenders directly to the appointment, instead of meeting them there, resulted in higher attendance than otherwise. This meant the case manager had not wasted their time and the offender had benefited from the intervention. Staff stated that this was particularly successful for individuals with chaotic lifestyles who often failed to keep appointments. One offender stated that they “wouldn’t have got to half my appointments if it wasn’t for [my community based case manager]”.

The offenders interviewed valued the support and help they had received from their community based case manager. They were asked to rate the helpfulness of their community based case manager. In the offender survey 23 out of 30 participants ranked their case manager five out of five – very helpful; four gave their case manager four out of five for helpfulness; and three offenders gave scores of three out of five.

Out of area releases

The Alliance acknowledged that supporting offenders released outside of the South Yorkshire area had been less successful. This group of offenders only received telephone support from case managers. Staff also stated that since they did not have relationships with agencies in other discharge areas, they were less able to provide effective support. Senior staff reported that they had tried to establish links with partner agencies and had explored using Serco’s and Catch22’s other operations based across England to deliver coordinated support, however this had not been realised in practice.

Delivery staff stated that because of the limited support provision, engagement with offenders released outside of South Yorkshire was harder. Staff reported, however, that they spent a lot of time trying to make contact with out of area releases because it was the Alliance’s policy under the RAG system to maintain contact. Delivery staff considered that their time was more effectively spent working with their in area caseload.

Staff identified that increases in the number of out of area releases, particularly for cohort three, had placed extra pressure on trying to maintain relationships with this group at the expense of in area releases. In the first cohort, 24% of releases were out of area, in the second year 20% were out of area, while 30% of cohort three releases were out of area. This

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20 October 2013 to September 2014.
was a substantial minority of individuals who were included in the outcome measure, yet the Alliance had limited ability to help influence their reoffending behaviour.

5.4 Offender engagement

Offender engagement was defined as meeting with case managers. This included face to face and telephone contact. The custody and community provision provided by the Alliance was entirely voluntary. Staff reported that there were no particular characteristics which determined whether an individual engaged in the community support or not, beyond simply a willingness to be helped. Staff did state that offenders who had a more stable lifestyle, such as a regular job and strong family ties, chose not to engage. This was because they did not need the support provided by the Alliance.

The Alliance collected community engagement data. This recorded the number of people engaging with community case managers after their release from custody. It did not distinguish, however, between offenders released under licence, who were required to engage, and non statutory offenders, who could choose whether to participate or not. Therefore the community engagement data was artificially high. The data also included all in area and out of area releases. Given these data limitations, engagement rates for the first six months of 2014 showed that 60% of all released offenders were engaged in community provision one month following their release. After two months 60% were still engaged, and after three months this had fallen to 55%. Engagement rates dropped off rapidly after this point so that less than 30% of offenders were still engaged six months after their release and thereafter.

This was supported by interviews with delivery staff, which identified that the first three months following release were ‘crucial’ to establishing a stable lifestyle in order to reduce the likelihood of reoffending. Staff stated that engagement frequently dropped off after three months, primarily because an individual had either reoffended or become more self sufficient and no longer felt they needed the support. It was reported that few offenders continued engaging with support for the full 12 months.

Staff reported that offenders who engaged recognised that they required support and were prepared for Catch22 to help them. Case managers also identified that offenders who did not have positive family or friend networks tended to be more receptive to support. Those on short sentences (less than six weeks), however, were regarded by case managers as less likely to engage. Staff thought this was because there was less time for case managers to build relationships with offenders prior to their release.
The interviewed offenders responded very positively to the community support they had received. Offenders particularly valued the support because they had not received it before. Responses included:

“Never had help like this before. First time in 45 years. Already feel it’s making a positive difference to my life.”

“It’s better! Last time I had no clue as to where I was going or what I was doing! This time I knew I wouldn’t just be thrown out on the street. I met [my case manager] on my release and [they] helped sort things. It was reassuring.”

“The difference is immense. Previously never needed assistance. But the last few times I have needed it. I now realised I needed the help, whereas before I didn’t think I needed it.”

The offenders who were interviewed were engaging with the community support, and therefore they were more likely to consider it useful. This was because, as engagement was voluntary, if it was not helping them they would have been unlikely to continue engaging. Delivery staff reported that the voluntary nature of the support was an advantage of the service delivery. This was because offenders did not feel they were ‘being made’ to do anything but were choosing to engage on their own terms, while staff were able to focus their limited time more efficiently. Staff identified that this resulted in more productive discussions and an effective allocation of resources.

5.5 Partnership working

Since the Alliance model did not include the delivery of any specific interventions, the Alliance was dependent on partner agencies which provided community support functions. The majority of partner agencies were third sector organisations, and the research identified that these services were ‘stretched’ and ‘under pressure’ due to limited funding, constrained resources and high demand.

Alliance staff also stated that community interventions between the four local authority areas of South Yorkshire differed. This was because many of the services were non statutory, such as housing charities. Staff identified that this meant an individual’s likelihood of reoffending was often dependent on the availability and suitability of community interventions, and therefore outside of the Alliance’s control.

The research does not include the perspectives of any offenders who did not engage with community based provision. This is because, since they were not working with the Alliance, it was too difficult to establish their whereabouts and include them in the research.
Delivery staff identified forging partnerships as an important element of their role. This was to ensure their caseload could access services which were beneficial. Community based case managers were given autonomy to develop relationships with partner agencies. This was on the basis that they were best placed to work with agencies in their geographical area. The interviews identified that some community based case managers spent a lot of time developing relationships with private landlords and letting agents, while others established successful links with training agencies. Without these relationships, delivery staff stated that they would not have been able to support their clients as effectively.

Partner agencies and delivery staff reported that relationships operated on a personal level. This was viewed as a strength because it “helped things to get done”. It was also recognised by senior staff however, that if, and when, case managers left it meant that relationships had to be re established by a new case manager. It also meant that the ability to develop successful relationships was dependent on the skills and attributes of the individual case manager.

The relationship between the Alliance and the police was identified as a strength by both parties. Community based case managers attended weekly IOM meetings and the IOM teams operated out of the prison. It was reported that this resulted in excellent information sharing and partnership working. The IOM teams and case workers liaised to ensure they delivered a coordinated approach to supporting offenders. The police and delivery staff both stated that joint working had occurred to support offenders. It was noted that this was particularly successful if the offender did not wish to have a relationship with the police.

5.6 Volunteering
Volunteering activity included the VIC scheme, mentoring and shadowing staff. The VIC scheme was viewed positively by staff, volunteers and partner agencies. It was reported that the scheme was important to help ex servicemen who were in prison to share their experiences with people who had gone through similar experiences.

Volunteer mentors were identified as an asset to the Alliance model by staff. This was because volunteer mentors met independently with offenders in the community, freeing up community based case managers’ time. Case managers stated that volunteer mentors who regularly met with an offender to build a relationship and provide practical support were very useful in helping to reduce a person’s risk of reoffending. Case managers did identify, however, that the role and support to be provided by the volunteer mentor was not always clear. Case managers reported that in practice the role of the volunteer mentor was determined by the capabilities of the mentor. For example, some volunteer mentors were
able to help an offender complete housing and benefit forms, while others did not feel comfortable undertaking this task.

Delivery staff also expressed frustration at some volunteer mentors who cancelled their appointments with offenders, or simply forgot to attend. While staff recognised that this was a facet of working with volunteers, they were concerned about the impact it could have on the offenders. Staff also noted that a high proportion of the volunteers often did not have very similar life experiences to the offenders (e.g. they were students), which staff felt made creating effective relationships harder. Delivery staff also stated that, due to the conviction history of some of the offenders, it was not suitable to pair them with some volunteers (e.g. young females).

Not all offenders received a volunteer mentor. Of the 30 interviewed, 13 had met with a volunteer mentor. Community based case managers worked with offenders to agree if a volunteer mentor would be beneficial. A suitable volunteer mentor would also need to be available. The 13 interviewed offenders who had a volunteer mentor all appreciated the support they had received.

Delivery staff considered that volunteers who only shadowed their activities did not add to service delivery and that it increased their workload on occasions where they had to go and pick up volunteers. Staff did however recognise the benefits of shadowing: for example, a high proportion of volunteer mentors had started out by shadowing case managers, learning about service delivery, understanding support requirements and meeting offenders. Nevertheless, staff were unhappy when they invested time allowing volunteers to shadow them but those volunteers did not subsequently become volunteer mentors.

It was reported that becoming a volunteer mentor helped individuals gain relevant employment experience. Six volunteer mentors were reported to have successfully gained full time roles with Catch22.

In summer 2014 the Alliance was planning to introduce a rewards booklet (formerly the ‘Volunteer Passport’) for volunteers to reward them with training and certificates for volunteering hours completed. The volunteers interviewed were keen to receive more training, particularly on mental health. Alliance staff stated that they were keen to provide more training and felt it could encourage volunteer engagement. Due to a lack of budget, however, the training had to be free, which therefore limited the availability and quality of training.

Of the interviewed offenders, 14 would consider becoming a volunteer mentor, to give something back and share their experiences with others. Only three said they would
definitely not want to be a mentor and the remaining 13 said they were unsure because they had never thought about it before.

5.7 Outcome target
The binary measure of reconviction was agreed by NOMS and HMP Doncaster at the outset of the pilot as the simplest approach to measuring success. If an offender was reconvicted within a year of their release they were counted as a reconviction for the purposes of the outcome measurement.

As a consequence, the Alliance undertook a structured withdrawal of community based case management support from this group of offenders in order to focus resources on individuals who had not reoffended and were within the cohort.22 Delivery staff were frustrated that they could not continue working with these offenders. Staff interviewed stated that individuals who were reconvicted had often made progress in their behaviour and actions, and withdrawing support at that point undermined the support that had already been provided. Staff also reported that the binary reconviction measure did not reflect potential wider outcomes such as reductions in the severity and frequency of reconvictions by offenders.

5.8 Data management
Collecting and managing data was more complex than the Alliance envisaged. The data management system was not fully operational at the beginning of the pilot because of a delay in agreeing appropriate accreditation. This meant that all data management was paper based for the first nine months of the pilot. Staff reported that the paper based system made it harder to manage offenders efficiently, since case files could not be electronically accessed and viewed in different prison locations or by different people.

Alliance staff reported that they did not have full confidence in the data management system. This included the ability to input data correctly and the accuracy of case management reports. As a result the Alliance team did its own data collection and analysis. Delivery staff also stated that they each developed their own individual data management systems to track their caseload. This meant that delivery staff frequently completed three different data management systems with the same information. The lack of an efficient data management system was identified as a frustration among staff, and had an impact on their ability to spend time directly supporting individuals.

22 This was not specified in the pilot design, but was how the Alliance responded to the mechanism for determining outcome payments.
The different agencies also operated their own data management systems. This included probation in custody and community. This meant that the information held by probation on their caseload had to be manually input into the Alliance’s own systems for their own monitoring.

Alliance staff also reported some difficulty in obtaining information about offenders from partner agencies such as probation and drug and alcohol teams. Staff reported that it was very useful to speak to partner agencies to share information about individuals they were both working with, to ensure a coordinated approach. Because the relationships with partner agencies were informal, however, Alliance staff often found that partner agencies cited issues with data protection, preventing information being shared. This was despite offenders signing a consent form agreeing for their data to be shared. Delivery staff reported that this was because the consent form was instigated by the Alliance and therefore not recognised by other agencies.

There was also no formal process for identifying individuals who had been reconvicted. Reconvictions were identified in a number of ways. This included an individual being flagged through OASys or the Alliance’s case management system if they came back into custody. In the community, where case managers and offenders had a good relationship, the offender might disclose their reconviction. Community based case managers also relied on information sharing with IOM teams to identify reconvictions. Some staff reported that they spent time on identifying reconvictions instead of being able to support offenders directly.

5.9 Summary
How, and to what extent, might these approaches have influenced reoffending rates?

The range of delivery approaches identified in this report may have had some influence on the reoffending rates. It has not been possible to determine causality and therefore state definitively the extent to which these approaches have influenced reoffending. Responses from offenders and staff, however, have suggested that the offender led case management approach had a positive impact on individuals’ likelihood of reoffending.

The subsequent research questions provide an assessment of the different approaches and therefore indicate how they might have influenced reoffending rates.
What were stakeholders’ views of the strengths and weaknesses of the contractual model, as implemented?

The strengths of the delivery model included:

- the introduction of a case management approach in custody and community which was holistic, proactive, flexible and offender led;
- providing community based case management support to offenders sentenced to less than 12 months, which they would not otherwise have received;
- providing custody based case management for offenders at the outset of their sentence and initiating community support six to eight weeks before their release;
- having informal relationships with partner agencies, which “helped things to get done”;
- using volunteer mentors, who met independently with offenders, which was regarded as an asset in the delivery of support to offenders;
- the VIC volunteer scheme, which provided informal mentoring and specific support to offenders who were ex forces, and was delivered by former servicemen.

The following weaknesses of delivery were identified:

- Staff found the TUPE process and transition to new roles challenging at the outset of the pilot.
- There were more custody based staff posts than community based posts, which staff felt was an imbalance of resources to reduce reoffending most effectively.
- It was difficult to support offenders released out of area because of a lack of face to face contact and little understanding of the local support landscape.
- The Alliance had limited control over activity which was likely to influence reoffending. This included out of area cases; those led by probation; and interventions delivered by partner agencies.
- Accessing community interventions was dependent on the availability of existing services, many of which were already 'stretched'.
- The binary outcome measure did not capture frequency or severity of reoffending. This resulted in Alliance provided community support being withdrawn from individuals who had reoffended within a cohort year.
- There were issues around the clarity of role and commitment among some volunteer mentors. Volunteers who only ‘shadowed’ staff were considered to not add value to service delivery.
- Staff had little confidence in the data management system. This resulted in duplicating information across databases and obtaining limited management information.
• The informal partnership arrangements meant there were issues with sharing data and the sustainability of relationships.

How, and to what extent, did the pilot encourage greater efficiency?
The following elements of delivery were identified as efficient:
• The Alliance model was implemented without changing the overall costs of delivery. Serco resources were transferred to Catch22 and restructured to deliver the case management approach.
• The flexible approach to delivery was regarded as efficient by staff. This included meeting in offenders’ own homes and allowing offenders to travel in case managers’ own cars. This encouraged participation and made offender engagement easier (this approach was risk assessed as part of Catch22’s standard working policies).
• Since the Alliance community support was voluntary, it meant staff resource was focused on those individuals who wanted to be supported.

How, and to what extent, did the pilot encourage innovation?
The research identified the following innovation in the delivery of the pilot:
• The TUPE transfer of staff from Serco to Catch22 at the outset of the pilot was seen as innovative by stakeholders. It was regarded as unprecedented in terms of transferring staff from a private sector firm to a charitable organisation.
• The provision of holistic, offender led support by delivery staff was identified as innovative. Instead of only supporting a specific need, such as housing, delivery staff provided a breadth of help. This included ‘soft’ support such as just being there to listen to individuals and demonstrate an interest in them.
• Providing case management in the community to offenders who were sentenced to less than 12 months was identified as a key innovative change produced by the introduction of the PbR pilot. This was because reducing reoffending was incentivised and the Alliance identified a gap in the community support provided to this group of offenders.
6. Implications

The findings from the evaluation of the PbR pilot at HMP Doncaster can help inform policymakers and delivery organisations in the development and provision of more effective offender rehabilitation services. The implications identified below address the final research question:

What lessons can be learnt to inform the development of further PbR projects or the commissioning of offender management services more generally?

Staff transfer
The transfer of staff from a private to a charitable organisation was innovative, however staff found the process challenging. Future offender rehabilitation schemes could introduce early and ongoing communication and training with all affected staff before delivery commences. This would allow for the process of change management and give time for new ways of working to become embedded.

Custody delivery
The introduction of case management resulted in a proactive approach to supporting offenders. It also enabled early intervention with offenders to identify their immediate needs. A case management approach is suggested for providers of future rehabilitation schemes to help provide early and effective support to offenders.

Community delivery
The delivery of flexible, holistic, proactive and offender led community based case management was regarded as a positive intervention by both staff and offenders, particularly for offenders who had been sentenced to less than 12 months. It was felt, however, that there were not enough community based posts compared to custody based roles to best reduce reoffending. Future schemes could maximise offender engagement by offering flexible offender led support. They could also ensure an appropriate allocation of staff posts between custody and community roles so that sufficient resource is dedicated to helping individuals reduce their reoffending.

The pilot was less successful at supporting offenders released outside of the South Yorkshire area. This was because delivery staff only provided telephone support and did not have relationships with partner agencies in other discharge areas. Providers of future offender rehabilitation schemes could ensure they have an appropriate referral system so that offenders can be adequately supported regardless of their destination on release.
Nature of offender engagement
An offender’s engagement with Alliance community based case managers was voluntary, which meant that resources were focused on those who wanted support. The voluntary nature of support also meant there were no sanctions if offenders failed to keep appointments or engagement dropped off. Staff identified that engagement frequently dropped off after three months because an individual had either become more self sufficient or had reoffended. Future schemes, in which community interventions are mandatory, may choose to provide clear instructions to delivery organisations on what constitutes offender non engagement. Providers could learn from the success of the Alliance’s flexible community case management approach, while trying to strike the right balance between encouragement and sanctions to reduce an individual’s likelihood of reoffending.

Working with partners
Relationships with partner agencies were established primarily at a personal level between delivery staff. While this was regarded as useful to ‘get things done’, it resulted in problems of information sharing and sustainability of relationships. Future offender rehabilitation schemes may wish to encourage the development of good relationships between staff from different organisations, which are underpinned by formal agreements at a corporate level.

Availability of community resources
The Alliance model did not deliver any specific formal interventions in the community. This meant the Alliance was dependent on the availability and quality of support services provided by partner agencies, which varied by local authority area. It also meant that the ability of the Alliance to meet the outcome payment target was, in part, dependent on the activities of other organisations. The providers of future offender rehabilitation schemes may wish to identify what services they would directly provide and what services would be available from other agencies. A mapping analysis to match these services with the support needs of offenders could help to identify any potential gaps in support.

Volunteering
Finding and retaining suitable volunteer mentors was a key feature of the service delivery. Volunteer mentors who consistently committed their time, and met independently with offenders, added value to service delivery and supported offenders. Volunteers who only shadowed staff, however, were regarded as adding little to service delivery. The role of a volunteer mentor was determined by the mentor’s own capabilities. For example, mentors with the confidence and ability to help offenders complete housing and benefits forms added more value to service delivery than those that did not. Volunteers consistently wanted further
training, which could have helped address these skills gaps and low confidence. The Alliance was keen to provide this, but a lack of budget for training meant it had to be free, which limited its availability and quality. *Future providers of offender rehabilitation schemes could allocate monies for volunteer training. This could help to keep volunteers engaged and supported, which could benefit offenders, volunteers and the service.*

**Binary outcome measure**

The binary outcome measure of reconviction did not account for any reduction in the frequency or severity of offences. This meant possible improvements in reoffending behaviour for some offenders were not counted. It also resulted in the delivery provider choosing to withdraw community support for individuals who had reoffended. *Future schemes could include the frequency and severity of reoffending in any outcome measures. This could encourage providers to continue providing support even if an individual had reoffended. It could also enable a more nuanced understanding of whether interventions had been successful or not.*

**Data management**

Data collection and management was more complex than the Alliance had envisaged. This resulted in the data management system only going live nine months into the pilot. Also, staff did not have full confidence in the accuracy of case management reports. This resulted in several different data management systems being used, which duplicated activity. *Future offender rehabilitation schemes could benefit from testing the functionality and suitability of management information systems before contract delivery starts. This could help ensure the fidelity of data management systems, which would help deliver a service shaped by robust data reporting.*
References


Ministry of Justice (2015a) HMP Doncaster Payment by Results pilot, final re-conviction results for cohort 2, 30 July 2015. Published online at: <https://www.gov.uk/government/collections/ad-hoc-justice-statistics>.


Glossary

CPA – Contract Package Area
CRC – Community Rehabilitation Company
CRT – Community Reintegration Team
ETE – Education, Training and Employment
IOM – Integrated Offender Management
IPP – Indeterminate sentence for Public Protection
MoJ – Ministry of Justice
NOMS – National Offender Management Service
NPS – National Probation Service
OASys – Offender Assessment System
OMU – Offender Management Unit
PbR – Payment by Results
SAC – Serious Acquisitive Crime
SLA – Service Level Agreement
TR – Transforming Rehabilitation
TUPE – Transfer of Undertakings (Protection of Employment)
VIC – Veterans in Custody
Appendix A

Interviews

Consultation with senior staff, delivery staff, volunteers and partner agencies followed a semi structured interview approach. Each interview lasted approximately one hour. The interviews were informed by topic guides developed for each type of interviewee.

Interviews with offenders were completed with a structured questionnaire, which included open and closed questions. Each interview was conducted on a one to one basis and lasted approximately 30 minutes.

Participation in the research was voluntary for all interviewees and it was made clear that their views and experiences would remain anonymous. This was explained to every individual at the beginning of each interview.

First wave: November and December 2011

Senior stakeholders
- Three senior staff from MoJ
- Five senior staff from NOMS
- Three senior staff from Serco
- Two senior staff from Catch22

Second wave: April to July 2012

Delivery staff
- Two senior case managers
- Six custody based case managers
- Two community based case managers
- Two volunteer coordinators
- Two housing coordinators
- Four case support workers

Offenders
- 51 offenders who at the time of the research (April to July 2012) were serving sentences in HMP Doncaster

Partner agencies
In total, 29 partner agencies were identified at this stage of the research, but only five staff from four agencies were interviewed. Of the remaining 24 partners, 18 did not respond to several email or telephone enquiries, four initially agreed to an interview but the
appointments were not kept, and two refused to take part stating that they had nothing to add to the research.

The partner agencies interviewed:
- Two staff from the Probation Service at Doncaster Prison
- South Yorkshire Probation Trust
- South Yorkshire Housing Association
- Sheffield Council

Third wave: July and August 2013

Senior staff
- Two senior Serco staff
- Three senior Catch22 staff

Delivery staff
- One volunteer coordinator
- Six community based case managers

Partner agencies
- Probation Service at Doncaster Prison
- Sheffield Police IOM Lead
- Two staff from South Yorkshire Probation Trust

Fourth wave: July to September 2014

Staff
- Four senior staff from Catch22
- Four senior staff from Serco
- Seven Catch22 delivery staff

Partner agencies
- Two staff from IOM Sheffield
- Two staff from IOM Doncaster
- South Yorkshire Probation Trust
- Doncaster Rape and Sexual Abuse Counselling (DRASACS)
- Rotherham Council
- Target Housing
- Burngreave Foodbank
- Elevation Training and Development Ltd
- British Legion
- M25 Housing and Support Group
- Phoenix Futures
- Shiloh, Rotherham
- Community Shop

**Offenders**
- Six offenders released into Doncaster
- Six offenders released into Sheffield
- Six offenders released into Barnsley
- Six offenders released into Rotherham
- Six offenders previously released and received community support, but at the time of research (July and September 2014) were back in HMP Doncaster, having reoffended

**Volunteers**
- Three VIC volunteers
- Seven volunteer mentors
Appendix B

Approach for the fourth wave

The consultation with senior staff, delivery staff, volunteers and partner agencies followed a semi-structured interview approach. The interviews were informed by topic guides developed for each type of interviewee. The topic guides contained a suite of questions relevant to the key research questions. The consultations were led by one of the research team, who used the topic guide to structure the conversation.

The direction of each interview depended on the interviewee's involvement and knowledge of the pilot. Delivery staff provided insights into how service users engaged with the pilot, while senior staff provided specific information related to its strategic implementation. Volunteers had less direct understanding of the workings of the pilot, but provided an additional perspective on the support given to offenders. Partner agencies provided an external viewpoint, particularly of partnership working.

Interviews with offenders were completed using a structured questionnaire, which included open and closed questions. Each interview was conducted on a one to one basis. The researchers made it clear that participation in the research was voluntary and made sure each offender understood how their responses would be used. Each interview lasted approximately 30 minutes.

Senior staff

Eight senior staff from Serco and Catch22 were interviewed. Each interview was completed face to face and one to one, led by one of the research team. The senior staff were identified through discussions with Serco and Catch22. All senior staff identified as having an involvement in the pilot were interviewed.

Delivery staff

All delivery staff with community facing roles were interviewed. This included all six community based case managers and the volunteer coordinator. Custody based staff were interviewed extensively for the first phase of the evaluation in November 2012, which focused on the implementation of the PbR pilot in the prison. There was less understanding of how the pilot operated in the community, which was why interviews were completed with community facing staff for this final stage. All interviews were completed by one of the research team and conducted face to face and one to one.
Volunteers
In total ten volunteers were interviewed for the research. A convenience sampling approach was adopted. Volunteers’ participation in the research depended on them being available during the research period. As such, only current volunteers were interviewed, not individuals who had previously volunteered. This means the selection of volunteers interviewed was not representative of all the volunteers in the pilot and there may be some selection bias.

It was originally planned for all interviews with volunteers to be completed face to face and one to one. Due to cancellations, problems with availability and research timetables, four had to be completed using one to one telephone conversations.

Offenders
This phase of the evaluation included consultation with 30 offenders. The focus of the research was to understand their experiences of the community support they had received. Therefore the research was targeted at offenders who had been released from custody and were receiving community based support from the Alliance. The community based case managers were each allocated to one of the four areas of South Yorkshire: Doncaster, Sheffield, Rotherham and Barnsley. Six offenders were therefore interviewed from each area. A further six offenders were interviewed while back in custody, having previously been released and received community support, but then subsequently reconvicted of an offence.

Convenience sampling was used to select the offenders. An offender’s participation depended on them being currently engaged in community support from the Alliance at the time of the research. For the offenders interviewed in custody it depended on which individuals were back in custody having previously received community support while the research was taking place. The offenders were identified by the community based case managers from their caseload.

The findings from the offender survey cannot be considered statistically robust and will have selection bias. The sample of offenders does not include individuals who had previously received Alliance community support (they could have received community support from probation for previous offences), or anybody who had been released to areas outside South Yorkshire. The community support was also voluntary, so the sample does not include any offenders who chose not to receive support following their release from custody. This means the responses to the survey were biased because only individuals who chose to engage with the community provision were interviewed. As such, responses were generally positive since individuals had consciously decided to receive support.
All interviews were face to face, one to one and led by one of the research team. The interviews were conducted either at the individual’s home or in a public place, typically a coffee shop. It was the individual’s choice as to where the interview took place, and of the 24 interviews that took place in the community only two were not completed at the individual’s home. Interviews in the prison were completed in a meeting room and not offenders’ cells.

It was clearly explained to offenders that participation in the research was entirely voluntary, confidential, and would in no way impact on the support they were receiving or their sentence. The delivery staff initially explained the research to offenders and asked if they were happy to participate. For those consenting to participate an appointment was then made with one of the research team.

**Partner agencies**

Interviews took place with 15 individuals from 13 different organisations. Five interviews (three agencies) were completed face to face with staff from Sheffield police, Doncaster police and probation. These individuals were identified at the outset of the research by the Alliance because they all came into the prison on a weekly basis to meet with offenders and Alliance staff.

The other ten partner agencies were identified from the agencies the delivery staff worked with. A convenience sampling approach was used. Identified agencies from each of the four areas of South Yorkshire were involved to ensure a geographic spread of responses. Participation depended on being able to contact the relevant individuals in the agencies and on them consenting to take part. Two organisations from Sheffield were interviewed, two from Doncaster, four from Barnsley and two from Rotherham. There may be selection bias since organisations that were more aware of the pilot were more likely to agree to participate in the research than those who were not. All ten interviews were completed one to one over the telephone.

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23 The limits of confidentiality were explained to each participant: in particular, the researcher’s requirement to disclose harm or risk of harm to participants and others, and disclosure of criminal activity either undertaken or planned.
Appendix C

Offender responses from the fourth wave

In total 30 offenders were interviewed for the fourth phase of the evaluation. All answers were provided by the offenders and the responses represent their experiences, understanding and views.

Of all respondents, 24 offenders who had been released from custody (and at the time of the research were receiving community based support) were interviewed. Six offenders living in each of the four areas of South Yorkshire were interviewed: Doncaster, Sheffield, Rotherham and Barnsley. A further six offenders were interviewed while in HMP Doncaster. These six offenders had previously received community based support but had subsequently been reconvicted.

Fifteen of the 30 offenders were aged between 16 and 34 years old, while the remaining 15 were aged above 35.

The most recent sentence length of respondents ranged from two months up to 16 months. The mean and median average sentence length was six months. The number of times in prison ranged from once to 50 times. The mean average number of times in prison was 11, while the median average was five. The mean average was upwardly skewed by seven research participants who had been in prison 20 times or more.

Community based case manager support

Of the 30 research participants, 29 first met their community based case manager while still in custody. The one individual who did not meet their case manager while still in prison reported that at the time he did not want any help; however, following his release he decided he would like some support from Catch22.

Table C.1 shows that 13 of the interviewed offenders first met with their case manager on the day of their release and a further ten were first met within two or three days of their release.
Table C.1: First meeting with case manager following release

<table>
<thead>
<tr>
<th>Age</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>On the day of release</td>
<td>13</td>
</tr>
<tr>
<td>The day after release</td>
<td>0</td>
</tr>
<tr>
<td>2-3 days after release</td>
<td>10</td>
</tr>
<tr>
<td>4-7 days after release</td>
<td>2</td>
</tr>
<tr>
<td>Between 1 and 2 weeks after release</td>
<td>3</td>
</tr>
<tr>
<td>More than 2 weeks after release</td>
<td>1</td>
</tr>
<tr>
<td>Other</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>30</strong></td>
</tr>
</tbody>
</table>

Table C.2 presents the frequency of visits from offenders’ community based case manager. In the first month after release 13 offenders reported that they met their case manager two to three times a week and a further 12 were met once a week. After two to three months, seven were still being met two or three times a week. The ‘not applicable’ responses mean that the research participant, at the time of interview, had not yet been released from prison for the relevant length of time.

Table C.2: Frequency of meetings with community based case manager

<table>
<thead>
<tr>
<th>Frequency</th>
<th>First month</th>
<th>After 2-3 months</th>
<th>After 4-6 months</th>
<th>After 6-12 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>2-3 times a week</td>
<td>13</td>
<td>7</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Once a week</td>
<td>12</td>
<td>12</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>Every 2 weeks</td>
<td>3</td>
<td>5</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Monthly</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Less often</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Not applicable</td>
<td>1</td>
<td>5</td>
<td>19</td>
<td>24</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>30</strong></td>
<td><strong>30</strong></td>
<td><strong>30</strong></td>
<td><strong>30</strong></td>
</tr>
</tbody>
</table>

Ten participants stated that meetings with their case managers typically lasted between 31 and 45 minutes, while eight met their case manager for 46 minutes to an hour. Five stated that meetings typically lasted more than one hour (Table C.3).
Table C.3: Typical length of meeting

<table>
<thead>
<tr>
<th>Length</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 15 minutes</td>
<td>0</td>
</tr>
<tr>
<td>15-30 minutes</td>
<td>5</td>
</tr>
<tr>
<td>31-45 minutes</td>
<td>10</td>
</tr>
<tr>
<td>46 minutes to an hour</td>
<td>8</td>
</tr>
<tr>
<td>More than an hour</td>
<td>5</td>
</tr>
<tr>
<td>Other</td>
<td>2</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>30</strong></td>
</tr>
</tbody>
</table>

Offenders identified the types of support they required from their community based case manager. This was an open question and Table C.4 shows the collated support needs by type. Twenty of the 30 offenders interviewed identified accommodation as a support need, which included support in finding temporary and longer term sustainable housing. In total, 18 research participants required support with accessing benefits and managing their finances. Furthermore, ten required furniture for their accommodation, ten requested help to be referred to other agencies, and ten required support to access food.

Table C.4: Types of support required from community based case manager*

<table>
<thead>
<tr>
<th>Type</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accommodation</td>
<td>20</td>
</tr>
<tr>
<td>Furniture</td>
<td>10</td>
</tr>
<tr>
<td>Benefits/finances</td>
<td>18</td>
</tr>
<tr>
<td>Access to family</td>
<td>5</td>
</tr>
<tr>
<td>Food</td>
<td>10</td>
</tr>
<tr>
<td>Attending appointments</td>
<td>8</td>
</tr>
<tr>
<td>Referrals to other agencies</td>
<td>10</td>
</tr>
<tr>
<td>Employment support</td>
<td>7</td>
</tr>
<tr>
<td>Emotional support</td>
<td>6</td>
</tr>
</tbody>
</table>

*Multiple responses possible

Research participants were asked to rate the helpfulness of their community based case manager. Table C.5 shows that 23 participants ranked their case manager 5 out of 5 – very helpful.
Table C.5: Helpfulness of community based case manager

<table>
<thead>
<tr>
<th>Type</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 – not at all helpful</td>
<td>0</td>
</tr>
<tr>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>5 – very helpful</td>
<td>23</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>30</strong></td>
</tr>
</tbody>
</table>

Research participants were asked to explain the ranking they had given their case manager. Individuals were very positive about the extent of support provided. Responses included:

- “Available to chat, will always respond to texts and phone calls, really flexible and willing to help.”
- “Wouldn’t have got to half my appoints if it wasn’t for [my community based case manager].”
- “I couldn’t ask for more.”
- “Helped with anything I need really.”
- “They were there to listen to me.”
- “Goes above and beyond. Can’t praise [case manager] enough. If it wasn’t for [my case manager] I wouldn’t even be seeing my son.”
- “If it wasn’t for [my case manager] I would be back in jail.”
- “Good support. Feel like I’ve got someone. [My case manager] sincerely wants me to do well. Everything I have needed, [my case manager] has done for me.”
- “[My case manager] has been excellent. Anytime I have needed advice or just a chat, [they] will always come and see you.”

**Volunteer mentors**

Of the 30 offenders interviewed, 13 had received support from a volunteer mentor. Of the 17 who had not had a mentor, 13 were not offered one, two were offered one but did not want a mentor, and two were unsure if they had been offered a mentor or not.

The 13 offenders who had received support from a volunteer mentor provided similar feedback. Offenders typically met their mentor weekly and they would either go for a coffee or the mentor accompanied them to one of their appointments. The research participants reported that they “meet to chat” with their mentors and sometimes they would help with tasks like filling in forms. The offenders interviewed all appreciated the support they had received from their volunteer mentors.
Off the offenders interviewed, 14 would consider becoming a volunteer mentor, three said they would not want to be a mentor and 13 did not know because it was not something they had thought about before.

**Previous support**

Participants who had previously been released from custody stated that they had never before had the amount of support they were receiving from their case manager. Responses included:

- “Never had help like this before. First time in 45 years. Already feel it’s making a positive difference to my life.”
- “It’s been brilliant because never really had any support.”
- “It’s better! Last time I had no clue as to where I was going or what I was doing! This time I knew I wouldn't just be thrown out on the street. I met [my case manager] on my release and [they] helped sort things. It was reassuring.”
- “The difference is immense. Previously never needed assistance. But the last few times I have needed it. I now realised I needed the help, whereas before I didn't think I needed it.”
- “If I didn't have support from [my case manager] I would have reoffended by now because I have had someone to open up to and talk to.”
- “Never had any help before. If it wasn't for [my case manager] I would have no help at all. She has made me feel more positive, that there is a light at the end of the tunnel. Gives me more reasons to be cheerful.”
- “Never had support before. This time is much better! Feeling much more confident being in busier places and around people I don’t know.”
- “I had no support previously. It has made a massive difference. It is good to have someone to talk to and to help out.”