Key findings from a survey of IOM implementation

This paper presents a summary of findings from a national survey of a broad range of partners engaged in the strategic development and operational delivery of local Integrated Offender Management (IOM) approaches, incorporating the local Prolific and other Priority Offender (PPO) and the Drug Interventions Programmes (DIP)\(^1\). The survey was conducted online between December 2010 and January 2011 and was sent out to Community Safety Partnership (CSP) Chairs, DIP strategic leads and operational practitioners. This was a confidential survey which means that it is not possible to provide a breakdown of the locality of respondents. This means that the survey may have included multiple respondents from different agencies, who operate in the same areas.

The research covered key questions around: the degree and perceived success of implementation; issues and barriers to implementation; views on and overview of tools currently used by local decision-makers and operational staff; the knowledge and support local partners would like to see; as well as drawing out implications for local and national decision-makers.

The survey was completed by 493 respondents\(^2\). This paper refers to respondents in three categories (individual respondents may have been included in more than one category where their responsibility covers several areas):

- IOM respondents – involved in local planning and delivery of IOM.
- PPO respondents – involved in management of or implementation of a local PPO scheme.
- DIP respondents – involved in management of or implementation of a local DIP scheme.

The purpose of the survey was simply to provide a national snapshot of IOM implementation, including the ongoing management of DIP and PPO, and the integration of these into local IOM arrangements. It also aimed to obtain information about the barriers and challenges currently identified by local partners, along with benefits and efficiencies.

Implementation

IOM provides a local framework for agencies to work together to ensure that those offenders whose crime causes most damage locally are managed in a co-ordinated way, bringing greater coherence to the delivery of relevant local programmes and approaches to tackle crime and reduce re-offending.

The survey findings suggested that substantial progress had been made with the implementation of IOM. As illustrated in Figure 1, 31 per cent of IOM respondents indicated that IOM was fully established in their area; a further 61 per cent indicated that it was partially established, while 7 per cent stated that it was not yet established. Co-location and centralised services were considered to be common indicators of implementation.

---

\(^1\) Community Safety Partnerships (CSPs), Drug and Alcohol Action Teams (DAATs), Police Strategic Leads for the Drug Interventions Programme (DIP), and had been forwarded to relevant partners.

\(^2\) Responses also covered at least 142 (43 per cent) of the 329 CSPs in England and Wales.
PPO is one of the building blocks of IOM. Launched in 2004, the approach covers all CSP areas in England and Wales, specifically targeting the most active or damaging offenders in every area. It incorporates three strands, Catch & Convict (primarily enforcement focused, ensuring that PPOs are brought swiftly to justice), Rehabilitate & Resettle (to address the factors linked to re-offending) and Deter Young Offenders (earlier identification of the next generation of PPOs). Areas were invited to “refresh” their local schemes in 2009, in the context of IOM, to ensure that the focus remained on those who are currently the most problematic offenders and that these offenders are prioritised for the most intensive activity. Seventy-seven per cent of PPO respondents said that their PPO scheme had been successfully refreshed.

DIP was launched in 2003 and provides interventions for drug misusing offenders throughout their criminal justice journey, from drug testing and assessment in the custody suite to post-release care planning and case management in the community with the aim of promoting recovery from drug misuse and reducing re-offending. It is part of the foundations for IOM specifically targeting drug-misusing offenders. Around half of police forces in England and Wales operate drug testing on arrest in the custody suite, while all areas have Criminal Justice Integrated Teams (CJIIts) to identify, assess and case manage offenders according to local priorities. Implementation was strengthened with the publication of the DIP Operational Handbook in February 2010 which sets out the framework for delivering DIP. Forty-six per cent of DIP respondents considered their area to have fully implemented the Handbook and a further 38 per cent had partially implemented it.

Partners who would like further support on developing or embedding their approaches can access a range of toolkits on the Home Office Reducing Reoffending website www.homeoffice.gov.uk/crime/reducing-reoffending/ or contact the IOM inbox: IOM.Info@homeoffice.gsi.gov.uk

**Alignment of local offender management approaches**

The IOM Key Principles\(^3\) sought to enable areas to build on existing local programmes, and to embed these within a local strategic framework. Seventy-five per cent (228) of IOM respondents indicated that IOM built appropriately on existing offender management programmes in their area, with a further 19 per cent (58 respondents) agreeing that it did so ‘partly’. Three percent (9 respondents) said that it did not build appropriately on existing approaches.

---

\(^3\) The IOM Key Principles were published in March 2010, and draw out key principles for the development of local IOM arrangements, based on the experience of a number of areas. The Key Principles can be accessed from the Home Office website: www.homeoffice.gov.uk/crime/reducing-reoffending/
Respondents views varied on how IOM related to supporting local approaches and programmes, from being a ‘natural progression’ to ‘radically different’. Areas varied in their approaches – some expanding the offender management approach taken under PPO to a larger cohort of offenders; while others appear to have carried out a far more substantial strategic integration. Ninety-four percent of IOM respondents reported that their area’s PPO and DIP schemes were either fully (52%) or partially (42%) aligned within their overall IOM approach.

Respondents from PPO and DIP schemes also commented on how embedded these approaches were within the local IOM framework. Seventy-one percent of PPO respondents stated that PPO was fully embedded and a further 21 per cent that it was partially embedded. Forty per cent of DIP respondents indicated that DIP was ‘very’ embedded and 38 per cent that it was ‘quite’ embedded within IOM.

Partners who would like further support on aligning their local offender management approaches can contact the IOM inbox: IOM.Info@homeoffice.gsi.gov.uk

Partnership working

Partnership working under IOM was reported to be extensive and broad ranging – primarily focussing on police, the probation service and local authorities. To a lesser extent, partnerships additionally involved drug and alcohol treatment services, Youth Offending Teams and Prisons. Responses suggested that there may be scope to increase the involvement of the Voluntary and Community Sector (VCS) particularly at strategic level – 27 per cent of respondents indicated that they were working with the VCS at a strategic level and just under half (47%) at an operational level. Respondents identified a broad range of potential future partners such as housing providers (private and council), Primary Care Trusts, Mental Health Services, and Employment and education providers amongst others.

During 2010/11, the Home Office worked with Clinks, the national membership body that supports the involvement of VCS organisations in the Criminal Justice system, to deliver VCS involvement in the IOM programme. This aimed to explore different approaches to engaging the VCS as an equal partner in IOM, at a strategic level. More information about the programme is available on the IOM pages of the Home Office website.

Views on barriers to implementation

IOM

The survey findings suggest that alignment of local schemes under IOM arrangements and implementation is not trouble free, and a range of issues were identified for further consideration by local decision-makers. Critical barriers identified by IOM respondents included:

- A lack of co-ordination, co-location or partnership working.
- A lack of understanding of and/or engagement with IOM amongst partners, as well as lack of consensus about the definition of IOM.
- Absence of information-sharing protocols or technological barriers to data sharing.
- Difficulties understanding and demonstrating performance.
- Difficulties identifying and obtaining accommodation for offenders.
- Scarce funding and resources.

PPO

Thirty-one per cent of PPO respondents stated that problems or barriers arose during the PPO programme refresh process; these tended to relate to managing long-term PPOs, general issues
concerning selection and de-selection of PPOs, and problems in engaging partner agencies in the PPO refresh.

**DIP**

DIP respondents identified a range of issues and observations concerning the implementation of the DIP Operational Handbook: 28 per cent of DIP respondents stated that they had experienced some problems in this area. The most frequently identified problems were a lack of partnership working, lack of support for conditional cautioning from the police, restrictive regulations that stop some partners sharing information, information-sharing protocols that are not fit for purpose and management of limited resources.

Twenty-one per cent of DIP respondents said that they had used alternative processes to those outlined in the DIP Operational Handbook in their area.

Please see the relevant toolkits available on the Reducing Reoffending website or contact us if you have specific queries.

**Efficiency gains from IOM**

IOM is intended to increase effectiveness and identify efficiencies through better alignment and reduction of duplication. A wide range of efficiencies were identified by IOM respondents. Just under half (46%) of 324 IOM respondents reported that IOM had resulted in efficiencies.

Efficiency gains were particularly identified in the areas of joint working, co-location, and information sharing. Respondents cited examples where they felt that rationalisation of roles and efficient use of resources across professional groupings resulted in better offender journeys, reduced duplication of effort and improved performance.

The Home Office has published the IOM Efficiency Toolkit on the IOM pages of the Home Office website. This includes the “IOM Efficiency Toolkit Phase 1: Maximising Local Efficiency and Effectiveness” which provides a framework for identifying local efficiencies and a number of case studies.

Phase 2 of the toolkit; VFM tool and associated economic evaluation handbook, will further strengthen the case for local IOM arrangements by allowing local areas to quantify efficiency gains and demonstrating improved value for money (VFM).

**Existing tools for IOM, PPO and DIP**

From the results of the survey, it was clear that respondents appreciated and made good use of existing tools in this area.

- Seventy per cent of IOM respondents were aware of the IOM Key Principles Self Assessment tool. Of those, 72 per cent said that they had used the tool. Eighty-three per cent of those who reported using the IOM Key Principles Self Assessment tool said that it had been helpful (69%) or very helpful (14%).
- Sixty-eight per cent of the 232 PPO respondents stated they were aware of the PPO Traffic Light Self Assessment tool. Of those, 76 per cent stated that they had used the tool. Eighty-eight per cent of those who had used the tool thought that the tool was quite helpful or very helpful.
- Seventy-three per cent of DIP respondents said that the DIP Operational Handbook was either very helpful or quite helpful.
- Seventy-eight per cent of DIP respondents reported that they were aware of the DIP Self Assessment tool. Of those, 83 per cent had used the tool, with the majority of these (63%) indicating that it had been either quite helpful or very helpful.
Seventy-eight per cent of DIP respondents reported that they were aware of the DIP Dashboard. Of those, 90 per cent reported that they had used the dashboard. Just over half (56%) of those who had used the dashboard reported it had been either quite helpful or very helpful.

Survey respondents highlighted a wide range of uses for the data provided in the DIP dashboard. Dashboard data is seen as instrumental in identifying key gaps and weaknesses in services and the accessing of treatment. The DIP data dashboard was highlighted as an effective tool when supporting the facilitation of local meetings, strategic boards and steering groups. Some respondents did highlight limitations with the dashboard saying that the data can be too complex and local data was sometimes seen to be more accurate.

All of these existing tools can be found on the Reducing Reoffending website: [www.homeoffice.gov.uk/crime/reducing-reoffending](http://www.homeoffice.gov.uk/crime/reducing-reoffending)

### Effective practice information

Around three-quarters of IOM respondents stated that they thought it would be helpful or very helpful to receive effective practice information/assistance on both the strategic planning and operational implementation of IOM from Government.

Fifty per cent (91 respondents) of PPO respondents said they would like to receive information about the PPO refresh, while 56 per cent wanted to receive further information about embedding PPO within IOM. Fifty-seven per cent (105 respondents) said they would like to receive further information on the PPO Traffic Light Self-Assessment tool.

### Implications for decision makers

The barriers identified and the observations offered suggest that there are a number of implications for local and national decision makers to consider.

- It is clear that there is a great deal of partnership working taking place as part of the development of local IOM arrangements, with a wide range of partners involved at both strategic and operational levels.
- There may be scope for greater involvement of a broader range of partners, including the VCS.
- There is clearly an appetite for greater support and clarity around roles and responsibilities, concepts and rationale behind IOM and associated approaches.
- There is also an appetite for effective practice on a range of topics, as well as high levels of existing expertise and mature practice on a wide range of topics which areas can access.

### Conclusions

The survey findings suggest healthy levels of engagement with, and understanding of, IOM, PPO and DIP. The survey identified a range of key topics and issues for further consideration and is an important source of information which will help to shape the relationship between central Government Departments and local areas for the future.

The Home Office, working closely with the Ministry of Justice, the Department of Health and other departments, will continue to provide support to assist local areas in developing their approaches, including through the development and publication of tools to assist local areas in taking forward IOM, PPO and DIP.