

MAPPA

Multi-Agency Public Protection Arrangements
Annual Report 2021-22
North Yorkshire



Protection through partnerships



Probation
Service



Yorkshire and the Humber

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Foreword

The North Yorkshire MAPPA Annual Report 2021-2022 provides insight and recognition of the excellent work undertaken daily to protect the public from serious harm.

Across the county we pride ourselves on the high quality proactive and responsive work we deliver with key partners, to provide the best risk management and greatest chances of reducing reoffending and rehabilitating offenders. While Police, Probation, and Prisons hold the prime responsibility for the effectiveness of MAPPA, they are actively supported by a diverse group of organisations including Youth Offending Teams, Children's and Adults Social Care, Health and Mental Health, Education, Home Office Immigration Enforcement, Accommodation and Electronic Monitoring providers, to name just some. The aim is to get the right organisations around the table for each individual case when necessary.

As well as pooling the professional expertise of these organisations, MAPPA also benefits from the involvement of the lay advisor. Their role is to represent the public, by asking questions of MAPPA on behalf of local communities and by developing a sound knowledge of the operation of MAPPA, including observation of MAPP meetings for individual cases.

It is important to note that during 2021-2022, the Probation Service as one of the three key authorities, was unified and this brings the significant benefits of sharing good practice under prior probation delivery arrangements, further development of skills and a joined up approach to managing people on probation, whether in the community or serving custodial sentences.

The last year has been a further significant challenge for all agencies in putting organisational recovery from the pandemic effectively into place. However, there have been many outstanding innovative developments and achievements e.g., a greater focus on preventing domestic abuse and stalking, and the development of interventions and guidance to manage and reduce the risks this offending presents. Undoubtedly the dedication and commitment of all partner agencies to do their best for our local communities feeds into MAPPA as an essential respected framework, working together to protect all people across North Yorkshire.

On behalf of my colleagues in the Prisons, Police and the Probation Service I would like to thank all agencies and staff involved in MAPPA for their commitment and professionalism in collectively managing risk and safeguarding victims. I look forward to us continuing to build strong partnerships.

Maggie Smallridge

Head of York Probation Delivery Unit
Chair or MAPPA Strategic Management Board



What is MAPPA?

MAPPA (Multi-Agency Public Protection Arrangements) are a set of arrangements to manage the risk posed by the most serious sexual, violent and terrorist offenders (MAPPA-eligible offenders) under the provisions of sections 325 to 327B of the Criminal Justice Act 2003.

They bring together the Police, Probation and Prison Services in each of the 42 Areas in England and Wales into what is known as the MAPPA Responsible Authority.

A number of other agencies are under a Duty to Co-operate (DTC) with the Responsible Authority. These include Social Services, Health Services, Youth Offending Teams, Department for Work and Pensions and Local Housing and Education Authorities.

Local Strategic Management Boards (SMB) comprising senior representatives from each of the Responsible Authority and DTC agencies are responsible for delivering MAPPA within their respective areas. The Responsible Authority is also required to appoint two lay advisers to sit on each MAPPA SMB.

Lay advisers are members of the public appointed by the Minister with no links to the business of managing MAPPA offenders who act as independent, yet informed, observers; able to pose questions which the professionals closely involved in the work might not think of asking. They also bring to the SMB their understanding and perspective of the local community (where they must reside and have strong links).



How MAPPA works

MAPPA-eligible offenders are identified and information about them is shared between agencies to inform the risk assessments and risk management plans of those managing or supervising them.

That is as far as MAPPA extend in the majority of cases, but some cases require more senior oversight and structured multi-agency management. In such cases there will be regular MAPPA meetings attended by relevant agency practitioners.

There are 3 categories of MAPPA-eligible offender:

Category 1 - subject to sex offender notification requirements;

Category 2 - mainly violent offenders sentenced to 12 months or more imprisonment or a hospital order; and

Category 3 - offenders who do not qualify under Categories 1 or 2 but who currently pose a risk of serious harm.

A fourth category for terrorist and terrorist risk offenders was introduced by the Police Crime Sentencing and Courts Act 2022 after the period covered by this report.

There are three levels of management to ensure that resources are focused where they are most needed; generally those presenting the higher risks of serious harm.

Level 1 is where the offender is managed by the lead agency with information exchange and multi-agency support as required but without formal MAPPA meetings;

Level 2 is where formal MAPPA meetings are required to manage the offender.

Level 3 is where risk management plans require the attendance and commitment of resources at a senior level at MAPPA meetings.

MAPPA are supported by ViSOR. This is a national IT system to assist in the management of offenders who pose a serious risk of harm to the public. The use of ViSOR increases the ability to share intelligence across organisations and enables the safe transfer of key information when high risk offenders move, enhancing public protection measures. ViSOR allows staff from the Police, Probation and Prison Services to work on the same IT system for the first time, improving the quality and timeliness of risk assessments and interventions to prevent offending.

MAPPA and Terrorism

The government published an Independent Review of the MAPPA used to Supervise Terrorist and Terrorism-risk Offenders on 2 September 2020 and published its response on 9 December. Both documents are available at <https://www.gov.uk/government/publications/multi-agency-public-protection-arrangements-review>.

The report made a number of recommendations, several of which have been implemented via the Counter-Terrorism and Sentencing Act 2021 and the Police, Crime, Sentencing and Courts Act 2022. The Secretary of State has also revised the statutory MAPPA Guidance on terrorist offenders.

The Probation Service, via its National Security Division, has created a specialist dedicated and highly skilled workforce, which provides an enhanced level of management and intervention for the most high-risk, complex and high-profile offenders in the community. This includes the management of terrorist connected and terrorist risk offenders. The NSD and Counter-Terrorism Policing work closely with local SMBs to ensure the robust management of terrorism cases.

All MAPPA reports from England and Wales are published online at: www.gov.uk



Health partnerships

The Head of Safeguarding in Leeds and York Partnership NHS Foundation Trust (LYPFT) occupies the role of MAPPA strategic lead.

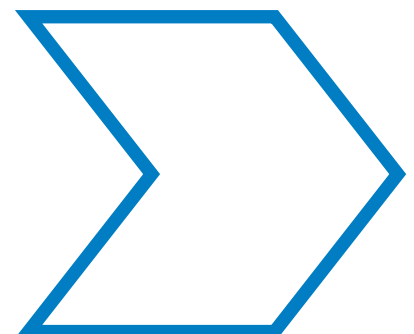
The Trust recently appointed a MAPPA specialist practitioner to provide operational and clinical leadership to teams with regards to MAPPA and working with MAPPA eligible service users in LYPFT. This includes representing the Trust at initial Level 2 and 3 meetings in Leeds and for those service users at Clifton House Hospital, York.

Tees, Esk and Wear Valleys (TEWV) NHS Foundation Trust also have mental health leads to provide a similar key role across North Yorkshire.

The LYPFT MAPPA Specialist Practitioner also:

- Supports the Trust in all the functions of MAPPA. The Trust are involved in audits, inputting, analysing and interpreting data and providing training and supervision to those Trust practitioners working with MAPPA eligible offenders.
- Acts as the source of advice on MAPPA processes in relation to specific mental health service users and the appropriateness and implications of various treatments/interventions, mental health issues, mental health legislation and other related matters which might be of significance.
- Acts as Liaison between MAPPA and health care professionals, facilitating their presence at meetings or the production of information and reports where attendance is not possible.
- Considers, in consultation with MAPPA, what confidential information can be shared with teams providing care and support to service users who are subject to MAPPA.

- Is able to access confidential information held by MAPPA on individuals involved with the Trust who are subject to MAPPA Level 2 and 3.
- Liaises appropriately with other health care professionals involved in MAPPA processes, e.g., child protection nurses, safeguarding leads.
- Ensures that the Trust's MAPPA policy has been reviewed, updated and ratified in line with the MAPPA Guidance and that Heads of service are aware of and familiar with their responsibility to ensure the policy is implemented and that as a Duty to Cooperate agency the Trust complies with requirements outlined in the MAPPA Guidance.



Safeguarding partnerships

The North Yorkshire and York clinical commissioning groups (CCGs) Adults and Children's Designated Safeguarding Professionals and Primary Care Safeguarding team have been actively involved in MAPPA processes for over four years.

In response to a learning lessons review, whereby a lack of information sharing to GP practices was highlighted as a potential risk, we developed a process for sharing 'relevant and proportionate' information with health services.

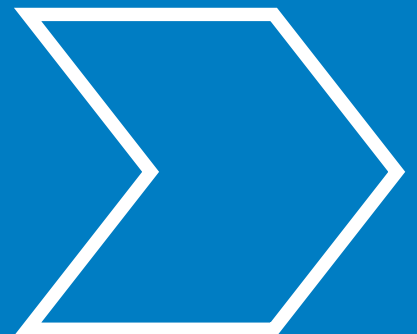
A member of the CCG Safeguarding Team prioritises attendance at all initial level 2 and level 3 MAPPA meetings where, as a standard item within the meeting it is agreed what information will be shared with the MAPPA-eligible offenders' GP practice and where required any other relevant health provider. The receiving of this information is essential in order that health services are able to manage any risks related to the offender within the service itself, safely provide appropriate health care and refer to specialist services where necessary. Moreover, the sharing of this information also enables health services to identify any additional risks that may occur and share relevant information to safeguarding adults and children.

Annual audits of the process adopted are completed by the safeguarding team which enables refinements to be made providing assurance that the process is fully embedded across GP practices and hospital safeguarding teams in North Yorkshire and York.

The initiative was further developed as a result of this audit process to ensure that once the MAPPA-eligible offender is removed as a MAPPA level 2 or 3 client, that health services can be informed of this change and records updated.

As a team we recognise the critical importance of the being involved in the MAPPA multi-agency arrangements and we are proud to say that the innovative involvement of primary care continues to make a difference in keeping people safe and supporting the health needs and vulnerabilities of MAPPA-eligible offenders. Additionally, involvement in this process and the associated sharing of relevant information with health services and associated training events has raised awareness of multi-agency public protection arrangements with health practitioners.

As a consequence of the raising of awareness the safeguarding team has seen a rise in practitioners contacting them in order to raise concerns in relation to offenders, thereby enabling discussions to ensure safe and appropriate management and support of these individuals.



Child to parent violence

York Youth Justice Service (YJS) run a voluntary intervention programme based around child to parent violence.

National recognition following the Covid pandemic revealed unsurprisingly that there was an increase in violence within family homes. The Child to Parent Violence (C2PV) programme was developed further in response to peoples isolation, which was highlighted in the formative stages of the initial lockdown in March 2020.

Child to parent violence has been prominent in youth justice statistics for a significant period of time as has the fact that a significant number of children and young people who are being supervised by youth justice services have been witness and have experience of domestic violence in their family homes.

Child to parent violence is usually not a primary offence or behaviour that our service has identified in our intervention with children and young people, this is often only discovered after working with children and parents for a period of time.

The York YJS manager is involved with the Police, Fire and Crime Commissioner's work looking further into child to parent violence as they are looking to develop future work in this area for York and North Yorkshire. The current data held in York identifies that we have received around 100 referrals since April 2020. That figure includes the initial stages of launching the programme, where initially referrals were slow. For an up to date picture, we are presently averaging around four referrals per month, predominately from children social care. Although we do accept referrals from Early Help Services in the City.

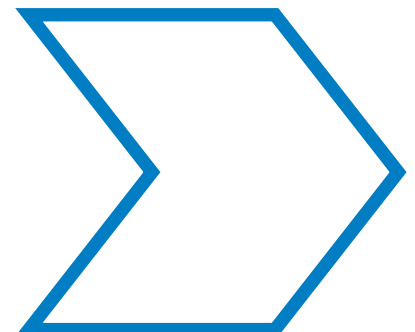
Recently we have received enquiries into the programme from North Yorkshire Police, so we are expecting some increase in the referral figures.

When considering the number of incidents in the wider city, it is difficult to ascertain as child to parent violence does not sit in the remit of domestic violence, due to the age of the child (under 16) and therefore cannot be monitored by police systems.

Intervention for C2PV varies in length, some children and young people engage in short term support (normally four sessions) whereas, those presenting at a higher risk level, are offered a more intense support package. All YJS staff team members are trained in delivering a specific C2PV support package for our children and young people, so cases are allocated across the team.

Moving forward, YJS are working in collaboration with other services within Children Social Care to complete a whole family approach to address the concerns and offer supporting around and for parenting of the child instead of working just with the child and young person directly. Often the work that is agreed is completed, we have agreed and left the family with an exit strategy and plan to help challenge further behaviour, however there is often the parent who is requiring ongoing support from services.

Our work with targeted intervention services is hoping to expand this offer.



Prison saved my life

“Prison saved my life, there is no other way to put it.”

I was slowly killing myself and in denial about my addiction. Alcohol was my downfall - it took a year in prison to admit that I am an alcoholic, that I have a problem and that I had to change and sort myself out.

I used alcohol as self-medication because ultimately it worked and put a stop to my anxiety/panic attacks. What I was oblivious to was the downward spiral into addiction I was in. At the rock bottom of my addiction, I was drinking up to three bottles of spirits a day, usually vodka. I would wake up at 5am and start drinking, so I very rarely had a hangover. I only came out of my bedroom when, basically, I was drunk. I didn't see it as addiction, alcohol was just something I was using to get me through that day.

The journey down into addiction was gradual, ongoing for about seven years, from the time I was 14 to the age of 21, when I inevitably ended up in prison. I am not proud of it, but I pinched a bottle of sherry from my grandmother's house and started walking into town which was about 7 miles from where I lived. This happened a lot and at one stage it was a nightly occurrence. I drank the whole bottle so it's fair to say I was drunk. I ended up collapsed in the middle of the road on a blind corner almost getting run over by the police van that my mother had called after reporting me missing. I was brought back home after scrapping with the police and spent the night on the kitchen floor comatose. I woke up the next morning feeling ashamed, very ill, but liking the feeling that gave me. Did it put me off alcohol? No.

My teenage school years were a disaster. When I was 13, I started running away. It wasn't that I was unhappy at home - I was escaping something but to this day I haven't got the answer to that. I liked school, I liked learning, but I couldn't deal with the bullies at school. I knew I was different and was tormented horribly so I started skipping school in year eight.

It started with me just staying in town until eventually being picked up by police, then it escalated to where I would go up to the nearby A168 and run across the carriageways for the buzz it gave me.

I was excluded several times and eventually expelled and sent to a pupil referral service, but I would run away from there as well, so I was home schooled for the last two years. I took my GCSE exams at home.

At 16, I went to college - that was the best time of my life. I was studying Uniformed Public Services and I loved it. I made some good friends who I am still friends with today. I was myself and didn't have to put on a front or pretend to be someone I wasn't. Because of the travel my parents bought me a moped so that I could get to college. During that short time, I was focused, getting good grades - Distinction * at the end of the first year - and enjoying life, but alcohol was still there and having my own transport the risk to me and others only increased.

“When I turned 18 things really took a turn for the worse, I was now able to buy alcohol and my drinking escalated.”

At 19, I moved out of home and into supported accommodation where things went from bad to worse. I had the freedom and the money to drink what I wanted, and I did.

I started missing appointments with the mental health team and with support staff at my accommodation. I was getting into trouble with the police more - I would go on the train tracks whilst drunk and play chicken with the trains. How I didn't get seriously hurt I don't know. I was arrested loads of times for doing that. I ended up getting evicted for setting myself on fire.

At 20, I moved in with my grandmother, to look after her as she was/is bedbound, which I did but I was still drinking. Carers came in to look after grandma and I would usually be drunk by the time they arrived on a morning. Not fall over drunk but drunk, and while I tried to hide it, they saw right through it.

My drinking was escalating, I got Tesco deliveries and was spending most of my benefits on alcohol. I would order four 75cl bottles of gin and four 75cl bottles of vodka and one or two bottles of whiskey and a box of beers along with a few munchies. I would hide bottles in different places but sometimes they didn't last the week, I was drinking over 40-60 units a day, and at that time nothing else mattered, as long as I had enough alcohol to get me through. My room was an absolute mess littered with clothes, uneaten takeaways and I was a mess.

“Being in prison has enabled me to see the impact alcohol was having on others around me, as well as the damage it was doing on my health.”

It's not that I didn't care, I just didn't see it. Coming into prison as an addict and coming off it was the hardest thing I have ever done. It wasn't so much the physical side of the addiction it was more the mental side. Initially I was on remand. I spent two weeks on the detox wing. It hadn't sunk in that I was in prison it felt more like I was in police custody, plus I thought I was only going to be there for a few days. Oh, how I was mistaken. The court case was adjourned for some reason and re-scheduled sometime after Christmas. The next court hearing was scheduled for some time in March, so after another two weeks on the induction wing, I was moved into the main prison and was placed on A wing. Things were pretty much the same - I was ticking the days off and was just getting on with prison life.

The court hearing eventually came around and I packed my room up the night before as I thought I would be released. I was appearing on video link at the court, I first had a meeting with my solicitor, and I was convinced I was getting out. Well, I was wrong. I was sentenced to 27 months inside. Walking back to the wing after being sentenced I was still in denial. It didn't feel real, it only hit me a few days later, and that's when the reality of being away and without access to alcohol sunk in and the real hard work was beginning.

As I used alcohol to cope with my anxiety and mental health issues, I had to find a way to cope in prison. I had managed over the last few months because I thought I was going home. Over the next few months however I had to cope with everyday situations without alcohol, plus I was still in denial. The scary part came when it felt like I was dissociating because I didn't know who I was sober. My anxiety was at an all-time high to the point that I was terrified to come out my room - not because of the other lasses but because I thought I was going to have a panic attack and I didn't know how to deal with them as I had always had them, and I had always relied on the alcohol to control/numb them.

Halfway through my sentence, I started having meetings with psychology, they were hard but worth it in the end. I learned ways to battle my anxiety and mental health and within a few months of attending these meetings I could see the difference, and so could my family. I would insist that alcohol wasn't the problem and would get quite defensive about it, but eventually and after a year or so in prison, I finally admitted to myself that I did have a problem.

“Admitting I was an alcoholic was hard, but it felt like a big weight off my shoulders.”

The first time I ever admitted it I wasn't expecting it and it was bit of a shock, it came out in a conversation with one of the prison officers and I remember getting quite emotional as it was a very big moment for me.

Having admitted it, I could no longer hide behind it, I had to address it and that was tough.

“I began to work with drug and alcohol services in prison and along with the work I was doing on my mental health issues I knew I had to look at how I was using alcohol as an excuse for my behaviour and the poor choices I made.”

The last few weeks of my sentence I was in two minds - I was excited about getting out sober and I had a plan of what I wanted to do with my life, but also, I was terrified about being sober, but I was confident that I would be ok.

I was released to a Probation Approved Premises. I wasn't happy about this and had some reservations but there was nothing I could do to change probations mind, so I went.

I was getting used to being out of prison and it was strange. Having learned how to cope with my anxiety and mental health in prison, being out was very scary as I was now sober and had to deal with everyday situations myself with no prop. Being sober in prison and being sober in the community are two completely different things.

In prison you don't have access to alcohol, and everything is controlled, which means there is no temptation and gradually I didn't think about alcohol, so I thought I had mastered it. I had done the hard part but now it was just a test of will power. I had been sober for 14 months by this point, I knew I didn't need it, and ultimately, I didn't want to drink. I had found myself again - the real me was back - and I didn't want to lose that.

Temptation is a weird thing it's like a little voice in the back of my head which would creep up on me, for example when I was out shopping and was near a pub or saw alcohol in the shops that voice would say things like "just one " no one will know" and " you deserve it - and I would convince myself that I did deserve just the one.

I knew these were all lies so I dealt with it by removing myself from the shop or wherever. I truly believed that I really did want to do well. I had been at the Approved Premise for three weeks, I had not given into temptation, I was doing well and was proud of myself, but it all when wrong.

On the night I got arrested and recalled, other girls were drinking. I'd stayed away before as I didn't want to be involved but on this night when they asked me to join them I buckled and ended up drinking with them. I then began drinking on my own in my room. This led to the self-harming as a self-punishment for letting myself and my loved ones down. I ended up in hospital, sedated and eventually recalled and taken to New Hall.

I take full responsibility for my actions, and I understand that it wasn't nice for the staff to have to deal with that situation.

I am thankful for the second chance that the Approved Premise has offered me. I am still a bit nervous about being put in a place where the other residents can put temptation in your way but if you want to you can always find an excuse to give in. I know I really want to succeed. As part of the conditions of my release I will have a sobriety tag which I think will be a big help.

“I remain positive that I can succeed at the approved premises and with their support, re-engaging with Together Women and Alcohol Services I am beginning to look to the time when I can put my life and work experiences into practice and move forward with my life.”

The article 'Prison saved my life', was written by a female prisoner on her reflections since being recalled to prison.



MAPPA in action



A case study from Foundation Housing

XY is an adult male who was convicted of a serious sexual assault against a female under 13. He received a 6-year custodial sentence.

As a child XY was diagnosed with serious illnesses which left him with significant psychological impairments including a very low IQ, memory problems, difficulties processing information and extreme anxiety. He was also left with significant mobility problems.

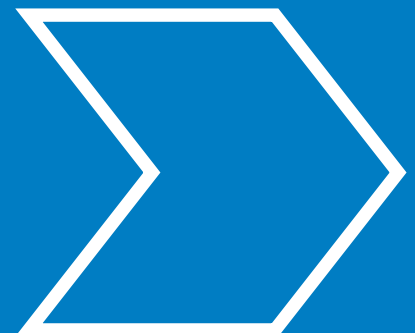
As XY had not previously lived independently before the Probation Service submitted a referral to Foundation Housing for supported housing six months prior to his release date.

Foundation assessed him as suitable for a placement and actively engaged in MAPPA Level 2 meetings to ensure an appropriate and adequate accommodation support package was in place to enable him to develop skills to live independently and re-integrate into the community.

In preparation for release and during the initial stages of XY's resettlement the Probation Service, Police, Foundation, mental health and education worked collaboratively with each other to develop a comprehensive robust risk management plan which addressed all XY's key risks and safeguarding issues.

As a result of this partnership work, commitment to risk management and the rehabilitation of XY, coupled with his engagement, he has fully complied with licence conditions and Sexual Harm Prevention Order prohibitions. He is doing extremely well in developing his independent living skills, reintegrating into the community and making positive choices in his life, as well as undertaking voluntary work to learn new skills and contribute to the community.

This partnership approach to risk management has been really effective in this case and has undoubtedly reduced XY's risk of reoffending and helped to protect the public.



MAPPA in action



**A case study from Adult Social Care,
North Yorkshire County Council**

The MAPPA case is one of an individual subject to both MAPPA and the Mental Health Act section 37/41 conditional discharge. Adult social care has worked collaboratively with colleagues in NHS mental health teams to support assessment of needs under both the provisions of s117 aftercare and the Care Act.

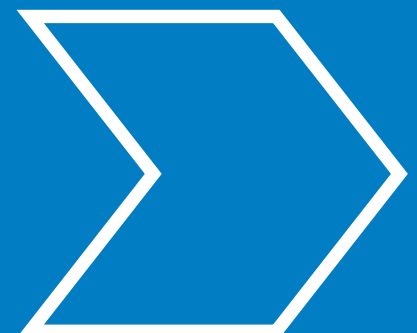
Adult social care involvement has been important in this case in order to support appropriate understanding and application of relevant legal powers and duties. While the provisions of s117 aftercare can provide support to ensure the individual's mental health needs are met to avoid a mental health deterioration, they cannot be used to enforce restriction or risk management plans. Similarly, the Care Act may provide ability to offer assessment and support in relation to identified needs but is optional for the person to engage with.

Within both the MAPPA framework and social supervision under conditional discharge there is a need to assess and manage risk. Adult social care is able to contribute knowledge of support measures available which may facilitate this but also have knowledge on where this may not be enforceable or compatible with individual choice and human rights.

In this case while the individual was entitled to s117 aftercare, this only applied to needs related to the mental disorder. On assessment of this it was concluded by the consultant psychiatrist that the individual was no longer suffering from a mental disorder, was no longer receiving treatment and no longer required the framework of the Mental Health Act in order to manage the risk. The consultant applied for an absolute discharge of the person's restrictions under section 37/41 with the Ministry of Justice.

MAPPA forums work well in terms of being able to share knowledge through different disciplines to jointly manage high risk cases. We were able to use knowledge of the provisions available under the Mental Health Act and Care Act to identify what support could be made available to manage risk.

We are also able to balance this with knowledge of Human Rights and Mental Capacity legislation to ensure that risk management was not overly restrictive and that the professional judgements of medical colleagues were taken into consideration in relation to the current as opposed to solely historical risks.



MAPPA in action



A case study from the Probation Service

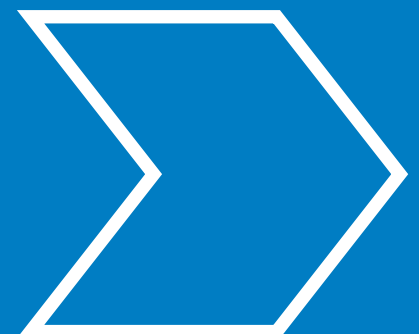
‘James’ is a complex MAPPA offender.

James is a complex case with a lengthy offending history, his first dealings with the police being at a young age for aggravated vehicle taking. Since then, James has been stuck in a repeat cycle of offending behaviour due to childhood trauma, substance misuse, negative associations, and severe mental health difficulties. His offences ranged from petty thefts to physically violent assaults, with his behaviours at times being unpredictable and perpetrated towards intimate partners and family members. James’ paranoia and behaviours saw him spend time in a high security Psychiatric unit, where he demonstrated traits of Schizophrenia and Personality Disorder.

Initially James was referred to MAPPA Level 3 due to him being assessed by his probation officer as Very High risk to public and a High risk to staff. His risk and offending behaviours resulted in difficulties securing suitable accommodation, raising concerns for public safety given his mental health difficulties and repeat violent behaviours. His case was discussed on a two/three monthly basis with agencies including Probation, Police, housing, prison staff and Mental health workers via teams. All agencies worked together during MAPPA meetings, sharing crucial information to help minimise reoffending and risk to the public. Multi-agency meetings ensured each agency had a specific role in forming a robust risk management plan to provide a safe move on plan from custody, ensuring James the public and staff working with him would be safe on release.

James was released from custody to supported accommodation. Due to the effective and timely planning undertaken during MAPPA meetings prior to release, James was able to engage immediately with appropriate mental health workers for his needs in the community. He engaged well with professionals, forming positive working relationships; however, information came to light from an agency involved in the meetings that James was in a relationship with a female. The swift information sharing ensured that relevant disclosures were made to the female through Claire’s law, enabling her to make her own assessments on the risks James may present given his background history.

For the first time in his offending history James completed his licence period meaning he was no longer on Probation. Unfortunately, this meant the support he had been receiving from Probation would no longer be provided. Probation and all other agencies involved agreed during a meeting to extend working with James for a voluntary period of six months after his licence period had ended. This voluntary period enabled professionals to work together to slowly reduce the support James required to help him maintain stability in the community.



MAPPA statistics

MAPPA-eligible offenders on 31 March 2022

	Category 1: Registered sex offenders	Category 2: Violent offenders	Category 3: Other dangerous offenders	Total
Level 1	887	229	/	1,116
Level 2	6	4	2	12
Level 3	0	2	2	4
Total	893	235	4	1,132

MAPPA-eligible offenders in Levels 2 and 3 by category (yearly total)

	Category 1: Registered sex offenders	Category 2: Violent offenders	Category 3: Other dangerous offenders	Total
Level 2	28	20	19	67
Level 3	1	2	1	4
Total	29	22	20	71

Registered Sexual Offenders

RSOs cautioned or convicted for breach of notification requirements	31
RSOs having had lifetime notification requirements revoked on application	4

Restrictive orders for Category 1 offenders

SHPOs & NOs imposed by the courts

SHPOs	73
SHPO with foreign travel restriction	0
NOs	1
People subject to notification requirements for breach of a SRO	0

Level 2 and 3 offenders returned to custody

	Category 1: Registered sex offenders	Category 2: Violent offenders	Category 3: Other dangerous offenders	Total
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Breach of licence

Level 2	6	2	4	12
Level 3	1	0	1	2
Total	7	2	5	14

Breach of SOPO/SHPO

Level 2	0	/	/	0
Level 3	0	/	/	0
Total	0	/	/	0

Total number Registered Sexual Offenders per 100,000 population 121.

This figure has been calculated using the 21 March 2021 census population estimate, published by the Office for National Statistics on 28 June 2022, excluding those aged less than ten years of age. Previously, we have based this figure on the mid-year (30 June) population estimate. As such, the current figure may differ from the corresponding figure based on the mid-2021 estimated resident population, which will be published by the Office for National Statistics later this year.

Explanation commentary

MAPPA background

The totals of MAPPA-eligible offenders, broken down by category, reflect the picture on 31 March 2022 (i.e. they are a snapshot). The rest of the data covers the period 1 April 2021 to 31 March 2022.

(a) MAPPA-eligible offenders – there are a number of offenders defined in law as eligible for MAPPA management, because they have committed specified sexual and violent offences or they currently pose a risk of serious harm, although the majority are actually managed at Level 1 without formal MAPPA meetings. These figures only include those MAPPA eligible offenders living in the community. They do not include those in prison or detained under the Mental Health Act.

(b) Subject to Sex Offender Notification

Requirements – those who are required to notify the police of their name, address and other personal details and to notify of any subsequent changes (this is known as the “notification requirement.”) These offenders are assessed and managed by the police. They may also be managed by probation or health services if they are subject to licence or a hospital order. Failure to comply with the notification requirement is a criminal offence that carries a maximum penalty of five years’ imprisonment.

(c) Violent Offenders – this category includes violent and terrorist offenders sentenced to imprisonment or detention for 12 months or more, or detained under a hospital order. It also includes a small number of sexual offenders who are not subject to notification requirements. These offenders are assessed and managed by the Probation Service, Youth Offending Team or Mental Health Services.

(d) Other Dangerous Offenders – offenders who do not qualify under the other two MAPPA-eligible categories, but who currently pose a risk of serious harm which requires management via MAPPA meetings. These offenders are assessed and managed by whichever agency has the primary responsibility for them.

(e) Breach of Licence – offenders released into the community following a period of imprisonment will be

subject to a licence with conditions (under probation supervision). If the offender does not comply with these conditions, the Probation Service will take breach action and the offender may be recalled to prison.

(f) Sexual Harm Prevention Order (SHPO) (including any additional foreign travel restriction)

Sexual Harm Prevention Orders (SHPOs) and interim SHPOs replaced Sexual Offence Prevention Orders. They are intended to protect the public from offenders convicted of a sexual or violent offence who pose a risk of sexual harm to the public by placing restrictions and/or positive obligations on their behaviour. They require the offender to notify their details to the police (as set out in Part 2 of the 2003 Act) for the duration of the order.

The court must be satisfied on the balance of probability that an order is necessary to protect the public (or any particular members of the public) in the UK, or children or vulnerable adults (or any particular children or vulnerable adults) abroad, from sexual harm from the offender. In the case of an order made on a free standing application by a chief officer, the National Crime Agency (NCA), British Transport Police (BTP) or the Ministry of Defence Police (MODP). The chief officer/NCA/BTP/MODP must be able to show that the offender has acted in such a way since their conviction as to make the order necessary.

The minimum duration for a full order is five years. The lower age limit is 10, which is the age of criminal responsibility, but where the defendant is under the age of 18 an application for an order should only be considered exceptionally.

(g) Notification Order – this requires individuals convicted of qualifying sexual offences overseas to register with the police, in order to protect the public in the UK from the risks that they pose. The police in England and Wales may issue a notification order directly to an offender who is already in the UK or who is intending to come to the UK who has to notify within three days of receipt. Offenders have a right of appeal against notification.

(h) Sexual Risk Order (including any additional foreign travel restriction)

The Sexual Risk Order (SRO) replaced the Risk of Sexual Harm Order (RoSHO) and may be made in relation to a person without a conviction for a sexual or violent offence (or any other offence), but who poses a risk of sexual harm.

The SRO may be made at the magistrates' court on application by the police, NCA, BTP or MODP where an individual has committed an act of a sexual nature and the court is satisfied that the person poses a risk of harm to the public in the UK or children or vulnerable adults overseas.

An SRO may prohibit the person from doing anything described in it, including travel overseas, or place positive obligations upon them. Any prohibition and/or obligation must be necessary to protect the public in the UK from sexual harm or, in relation to foreign travel, protecting children or vulnerable adults from sexual harm.

An individual subject to an SRO is required to notify the police of their name and home address within three days of the order being made and also to notify any changes to this information within three days.

An SRO can last for a minimum of two years and has no maximum duration, with the exception of any foreign travel restrictions which, if applicable, last for a maximum of five years (but may be renewed).

The criminal standard of proof continues to apply. The person concerned is able to appeal against the making of the order and the police or the person concerned are able to apply for the order to be varied, renewed or discharged.

A breach of an SRO is a criminal offence punishable by a maximum of five years' imprisonment. Where an individual breaches their SRO, they will become subject to full notification requirements. Individuals made subject of an SRO are now recorded on VISOR as a Potentially Dangerous Person (PDP).

(i) Lifetime notification requirements revoked on application

A legal challenge in 2010 and a corresponding legislative response means there is now a mechanism in place that allows qualifying individuals to apply for a review of their notification requirements. Persons do not come off the register automatically. Qualifying offenders may submit an application to the police to review their indefinite notification requirements. The police review the application and decide whether to revoke the notification requirements. This decision is made at the rank of Superintendent. Those who continue to pose a significant risk will remain on the register for life, if necessary.

Individuals will only become eligible to seek a review once they have been subject to indefinite notification requirements for a period of at least 15 years for adults and 8 years for juveniles. This applied from 1 September 2012 for adult offenders.



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HM Prison Service

<https://www.gov.uk/government/organisations/hm-prison-service>



National Probation Service

<https://www.gov.uk/government/organisations/probation-service>

A background image showing a wide sandy beach in the foreground with people walking. In the middle ground, there are several large, ornate buildings, including a prominent one with multiple domes. To the right, a Ferris wheel is visible. The sky is overcast and grey.

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