



**Policy name:** Community Accommodation Service Tier 1 (CAS1) - Approved Premises Policy Framework

**Issue Date**: 25 September 2025. **Implementation Date**: 25 September 2025.

Replaces the following documents (e.g. PSIs, PSOs, Custodial Service Specs) which are

**hereby cancelled:** Probation Instruction 32/2014 – Approved Premises.

Service Specification Document for Approved Premises.

Introduces amendments to the following documents: N/A

### Action required by:

	HMPPS HQ		Governors
$\boxtimes$	Public Sector Prisons		Heads of Group
$\boxtimes$	Contracted Prisons		The Probation Service
	Under 18 Young Offender Institutions	$\boxtimes$	Other providers of Probation and Community Services
	HMPPS Rehabilitation Contract Services Team		

Mandatory Actions: All groups referenced above must adhere to the Requirements section of this Policy Framework, which contains all mandatory actions.

#### For Information:

Regional Probation directors, Heads of Public Protection (Residential), Independent Approved Premises (AP) Managers and Prison Governors must ensure that any new local policies that they develop because of this Policy Framework are compliant with relevant legislation, including the Public-Sector Equality Duty (Equality Act, 2010).

Annexes A and B of the Policy Framework contain guidance to implement the mandatory requirements set out in section 4 of this Policy Framework. Whilst it will not be mandatory to follow what is set out in this guidance, clear reasons to depart from the guidance should be documented locally. Any questions concerning departure from the guidance can be sent to the contact details below.

#### Scope

This framework applies to HMPPS staff and leaders working directly or by contract in CAS1 AP, probation regions, and prison staff in resettlement-related roles.

It does not apply to HMPPS run Immigration Removal Centres, Under 18 Young Offender Institutions or Secure Training Schools.

How will this Policy Framework be audited or monitored:

Probation Service – compliance is monitored regionally by Heads of Public Protection (Residential) and nationally by the HMPPS Community Accommodation Service Head of Performance and Quality.

Contracted Independent AP (IAP) are monitored through the standard contract management process by the HMPPS Community Accommodation Service Head of IAP Contract Management.

Quality assurance is provided by HMPPS Performance, Assurance, and Risk and Resilience Group and Senior Business Owner reporting.

HM Inspectorate of Probation has commenced a programme of individual AP site inspections. We will work closely with the Inspectorate, including reference to this policy framework and operational instructions during the inspection process.

### **Resource Impact:**

This Policy Framework describes and mandates the application of the shared core principles for operating the AP estate in England and Wales, including AP managed independently under contractual provisions (IAP). Where any aspect of this Framework applies only to the public sector estate this will be clearly stated.

The existing AP operational guidance, available on the Probation EQuiP portal and MoJ AP SharePoint pages, provide the detailed steps on how core principles can be delivered operationally and demonstrate practice suggestions and best practice examples. Other than requirements to take reasonable steps to apply the principles, the policy framework does not add any prescriptive new mandatory actions requiring new resources. This strikes a balance between setting clear and high aspirations, without imposing rigid new requirements that have resource impacts.

Contact: cas-stakeholderengagement@justice.gov.uk

**Deputy/Group Director sign-off:** Manjinder Purewal, Probation Director, Community Accommodation Service (England Approved Premises) and Nicola Davies, Regional Director for Wales Probation (Wales Approved Premises).

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**Approved by OPS for publication:** Helen Judge, Chair, Operational Policy Sub-board, September 2025

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#### 1. Purpose

1.1 The legal basis for the Community Accommodation Service Tier 1, more commonly known as Approved Premises (AP,) is set out in Section 13(1) of the Offender Management Act 2007 which states:

The Secretary of State may approve premises in which accommodation is provided—

- (a) for persons granted bail in criminal proceedings (within the meaning of the Bail Act 1976 (c. 63)); or
- (b) for, or in connection with, the supervision or rehabilitation of persons convicted of offences:

and in this section "approved premises" means premises which are for the time being approved under this subsection.

- 1.2 HMPPS currently delivers AP across England and Wales to accommodate higher risk male and female prison leavers and people on probation. Specifically, men must be classified as High Risk of serious harm and women can be High or Medium risk of serious harm in order to be considered for placement.
- 1.3 AP provide a high level of supervision in a controlled environment and are closely integrated with Multi Agency Public Protection Arrangements (MAPPA). This framework sets out the mandatory expectations for the operation of our AP estate and describes the application of our key principles in delivering the CAS1 AP service. It should also be read alongside the <a href="https://mapple.com/hmpps/mapple.com/hmp
- 1.4 A more detailed description of the CAS Tiers 2 and 3 service can be found at Annex D.
- 1.5 The core purpose of AP is:

To protect the public by addressing and managing complex needs and behaviours for those who are referred, within a rehabilitation and recovery-focused environment, tailored to each individual and, in female AP, designed for the specific needs of women in the criminal justice system.

## 2. Evidence

- 2.1 The Principles in this Policy Framework and the associated Operational Guidance were developed through extensive consultation with around 100 HMPPS operational staff in AP and probation regions, and discussions with men and women living in AP, with lived experience of the criminal justice system. Consultation also included a range of subject matter experts and leaders spanning most areas of HMPPS policy.
- 2.2 The research evidence base specifically for AP is limited though there are findings both specific to AP and more broadly about managing risk and desistance:

Risk and Desistance: A Blended Approach to Risk Management (Kemshall, 2021) Social capital building supporting the desistance process (Albertson, 2021) Desistance, recovery and justice capital (Kemshall and McCartan, 2022)

## Realising the Rehabilitative Potential of AP (Marston and Reeves, 2023)

2.3 HM Inspectorate of Probation has published findings from its core and thematic inspections and have recently commenced individual AP site inspections. We will continue to develop policy and practice based on the recommendations of these inspections in future.

#### 3. Outcomes

- 3.1 AP will deliver the core purpose outlined in para 1.5 by ensuring:
  - The public are protected with effective multi-agency and community arrangements, drug and alcohol testing, and robust, proportionate, enforcement decisions.
  - A rehabilitative and recovery-focused approach with effective relationships between staff and those living in AP that enable individuals to build on their strengths alongside the delivery of keywork and rehabilitative activities appropriate to each individual.
  - There is a safe, healthy, and dignified environment for people living in AP and staff working in AP.
  - That all AP seek to attain the externally accredited Enabling Environment award which uses standards providing a flexible and adaptable framework to support improved relationships and well-being for all.
- 3.2 HMPPS AP leaders will ensure:
  - Effective and robust strategic, operational and interpersonal leadership and governance
  - That staffing levels meet the 24/7 operating model that is in place, with appropriate training offered for all staff roles alongside all necessary supervision and support

## 4. Requirements

- 4.1 All AP, whether directly run by HMPPS or run under contract with independent providers, must follow the nationally agreed processes and procedures that are available on EQuiP and which as a minimum, cover the following areas:
  - Referrals.
  - Pre-arrival/Induction.
  - Safety.
  - Risk Management.
  - Inter-agency working and Community Engagement.
  - Diversity and Inclusion.
  - Recovery Focused and Rehabilitative Activity.
  - Health and Wellbeing.
  - Human Resources (specific to AP staff).
  - Corporate Support.

- 4.2 This list is not exhaustive; AP managers may decide to formulate additional specific process guidance to reflect particular local priorities. This must be done in agreement with their Area Head of Public Protection (Residential) or, for IAP, through the contract management processes. All changes and updates that directly impact staff practice, training and resource requirements must be carried out in consultation with Trades Unions.
- 4.3 The following core principles must be applied by all staff involved in managing individuals referred to and living in AP, including probation and prison staff in the period prior to arrival at the site where applicable:

#### **Public Protection**

- 4.4 AP must provide a high level of supervision in a controlled environment and be closely integrated with Multi Agency Public Protection Arrangements (MAPPA). They must have strong and effective relationships with local police forces to deal with recalls to prison, prevention and detection of crime and, sometimes, crisis management.
- 4.5 All sites must be staffed 24 hours a day, with arrangements for 'out of hours' recall processes, operate a curfew and closely monitor licence conditions. CCTV must be in operation at all sites.
- 4.6 Enhanced Security AP must ensure additional safety measures are in place so that they are able to house those people who present the highest levels of risk through terrorism. This will include as a minimum enhanced CCTV, body worn cameras and biometric systems.
- 4.7 Those living at AP will be Higher-risk prison leavers and people on probation. Medium-risk and complex women will be eligible for referral to the female estate. AP must have clearly set out eligibility criteria and HMPPS will review these criteria from time to time as deemed operationally necessary.

#### **Rehabilitation and Recovery Focus**

- 4.8 Beyond their role in public protection, AP must also play a key role in improving the rehabilitation of prison leavers, ensuring they have a place to stay upon release, and a stable environment from which to engage with wider support including helping source employment opportunities and engage with drug, alcohol, and mental health treatment and care. This will include engagement in rehabilitative activities within the AP and with organisations in the local community.
- 4.9 AP managers and staff must adopt a rehabilitation and recovery-focused emphasis to people on probation in their care, fostering a stable environment from which to engage with wider support including helping source employment opportunities and engage with drug and alcohol treatment. To enable this, all AP must provide rehabilitative activities.
- 4.10 In relation to recovery-oriented approaches, treatment care and support for those with substance use disorders is based on a holistic definition of recovery as 'a self-directed process of change through which individuals improve their health and wellbeing, have greater autonomy and independence, and strive to achieve their full potential'. AP operational guidance will reflect this approach, and build on learning obtained from recent recovery-focused pilot sites.
- 4.11 In addition, the <u>HMPPS Drug and Alcohol Operational Framework (internal link only)</u> was published in January 2025. It describes the aim of a recovery-oriented system of care through which the criminal justice system works collectively to rehabilitate those at risk of

- drug and alcohol dependency. The framework recommends actions for prison and probation staff to inform day-to-day practice, which should be adopted within AP.
- 4.12 Managers must also ensure their AP works closely with sentence management practitioners and local authority partners to ensure those in their care are fully prepared and have a place to stay upon departure. In particular, where there is a risk that a person living in an AP may become homeless on departure, AP staff should assist the community probation practitioner with referral activity under the Homelessness Prevention Act, known as Duty to Refer (England) and Application for Assistance (Wales).

#### **Pre-Arrival Preparation**

- 4.13 HMPPS will aim to create a seamless journey for a person on probation, from custody or the community, into an AP, whilst maximising opportunities for them to move on to settled accommodation in the longer term.
- 4.14 Probation practitioners must use the digital referral system to route all referrals to the National Central Referral Unit which oversees assessment for suitability and eligibility, match individuals to placements, whilst maximising occupancy and use of national capacity. This approach enables HMPPS to improve timeliness and allow greater consistency and responsivity, underpinned by our demand analysis.
- 4.15 To ensure successful outcomes for people on probation due to live at an AP staff within prisons and community probation teams must ensure every effort is made to carry out timely and comprehensive pre-arrival work with the individual.
- 4.16 Ideally this process should begin well in advance of a prison leaver arriving at an AP, where an admission date is known, and as soon as practicable if there is a shorter time frame. Where practicable preparation for a person's admission should start at least six months in advance. The more time given to preparation activity and the referral process also increases the likelihood of a place being secured.

### **Inter-agency Working and Community Engagement**

4.17 AP managers must ensure that they and their staff develop, promote and maintain effective lines of communication with criminal justice agencies and with other bodies in the community that may be involved in offender management.

#### Female AP

- 4.18 The Ministry of Justice Female Offender Strategy Delivery Plan (2023) recognises that women in contact with the criminal justice system are amongst the most vulnerable in society. Many women experience trauma, domestic abuse, poor mental health, or have a history of alcohol and drug misuse. Factors that can lead men and women to commit crime, and to reoffend, can vary significantly. An approach that takes account of the different needs and backgrounds of women is most effective in addressing their offending behaviour.
- 4.19 Managers and staff at female AP must manage women in their care according to the principles outlined in the <a href="HMPPS Women's Policy Framework">HMPPS Women's Policy Framework</a>. This Policy Framework describes and mandates the application of the HMPPS core principles to support working in a Gender Specific, Trauma-Informed (GSTI) way with women in prison and in contact with probation.
- 4.20 All staff employed in female AP will be female. This is in line with The Equality Act 2010 which allows an employer to recruit staff of a particular gender for posts where there is an occupational requirement.

4.21 More detailed factors to consider in relation to women living at AP can be found at Annex B.

## 5. Guidance

5.1 Annexes A and B provide high-level guidance in relation to the core expectations for each of the subject areas outlined in section 4. Each subject area is supplemented with detailed national operational guidance, which will be updated as needed, and is available for staff to access on the AP SharePoint and probation service EQuiP. All national guidance on AP, including updated versions, is approved by the Head of Operations, HMPPS Community Accommodation Service, in consultation with key stakeholders and Trades Unions.

#### Annex A – Further information on AP Core principles and requirements

N.B. Detailed operational guidance for AP is contained on the AP SharePoint and probation EQuiP and should be used in conjunction with this policy framework.

## **Referrals**

To support a consistent approach to eligibility, people in prison or people on probation who are managed at the following risk Tiers would be eligible for referral to AP:

A3
A2
A1
B3
B2
B1
C3 (Women Only)

Probation Practitioners who refer individuals for release to an AP should be aware that all referrals will be subject to an assessment of suitability for placement. This will assess the purpose and expected benefits of the proposed AP placement prior to allocation. **The purpose of AP placement is not to address homelessness.** 

In line with National Standards, AP Referrals should be completed 6 months prior to a placement commencing unless there are exceptional reasons such as a short sentence or a change in risk or other circumstances. Timely referral supports probation practitioners in developing robust risk management plans in addition to supporting people leaving prison with an understanding of their release plans. It also supports AP staff to complete high quality pre-arrival work to plan for placement which will increase the likelihood of successful outcomes.

Supporting guidance for specific types of referral can be found in the AP Eligibility Guidance on Equip. This will include:

- Women
- Psychologically Informed Planned Environments (PIPE) (specifically designed contained environments where staff have additional training to develop an increased psychological understanding of their work)
- National Security Division Managed Cases / Enhanced Security AP
- Post Sentence Supervision
- Release on Temporary Licence
- Rail
- Community/Suspended Sentence Orders
- Non Statutory Placements
- Foreign Nationals

Probation practitioners should note that additional eligibility criteria applies to PIPE referrals:

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- The person must be screened into the Offender Personality Disorder (OPD) pathway and this should be recorded on NDelius
- A recommendation from the community OPD service that the person would be likely to benefit from the relational approach offered in a PIPE AP.

Referrals for Release on Temporary Licence (ROTL) placements should only be made where an AP placement will be required as part of the risk management plan upon eventual release, providing all other eligibility criteria in respect of tiering is met. ROTL to AP can be effective in preparing a person in prison for their eventual release, supporting the longer-term chances of a successful licence period. Most ROTL referrals to AP would be for people subject to Restricted ROTL rather the Resettlement Overnight Release (ROR) as people in prison who are likely to be eligible for AP will be serving an indeterminate or extended determinate sentence and/or be assessed as posing a high or very high risk of serious harm. Where ROTL referrals are required, these would need to continue to be completed by the identified Community Probation Practitioners where handover has commenced. If the referral is required prior to Offender Management in Custody (OMiC) handover, there may need to be a request made to community teams for the referral to be allocated for completion where Prison Probation Practitioners do not have access to NDelius.

A Central Referral Unit (CRU) within the HMPPS National Approved Premises Team manages AP placements comprising of application, assessment, matching and booking provisions. This is supported by a digital service. Prison leavers from Wales have a separate referral unit, supported by the national digital tool, to manage bespoke needs for Welsh prison leavers requiring AP placement. Women in Wales who require AP placement can be referred to a site in England as there are currently no female AP in Wales. Likewise, if there is a specialist provision not available at a Wales AP, such as a Psychologically Informed Planned Environment (PIPE), a Welsh prison leaver can be placed at a suitable site in England. Practitioners should refer to the detailed guidance on the referral system available on EQuiP and the AP SharePoint.

Where an individual is subject to complex care needs such as end of life or other personal care protocols they are highly unlikely to be suitable for an AP placement. In these circumstances practitioners may wish to consider referral options under the Complex Move On service available to HMPPS. Further details can be obtained by contacting: referrals@langleytrust.org.cjsm.net.

In relation to transgender people on probation who may require referral to an AP, the procedures outlined in the HMPPS Policy Framework <u>The Care and Management of Individuals who are Transgender should be followed.</u>

#### Pre-arrival/Induction

All AP should have an effective induction process in place to ensure that each new arrival has full knowledge about what is expected of them and should have the information necessary to enable them to comply, engage constructively with the regime and, if they choose to, appropriately resolve any concerns they may have.

This process should begin well in advance of a prison leaver arriving at an AP, where an admission date is known, and as soon as practicable if there is a shorter time frame. It is important that any mobility or accessibility issues are included in the referral process to ensure that individuals are placed at AP with appropriate facilities.

Referrals to AP with an up-to-date risk assessment using the appropriate HMPPS tools should be made well in advance of the expected release date of an offender from prison. This will facilitate, in appropriate cases, a well-planned decision for admission where the person on probation has

been fully informed of the expectations outlined in the supervision plan prior to release. Referrals should be made by the probation practitioner responsible for the person.

Good sentence planning requires advance preparation. Preparation for a person on probation's admission to the AP should start at least six months in advance and, to improve the chance of securing the admission, at least three months in advance.

It is vital that those due to be released from a custodial sentence to an AP should understand what will be expected of them on release and the location of the AP they have been placed in. This preparation for arrival at the AP will be enhanced during information exchanges with prison staff such as pre-release teams. This, together with good pre-release preparation by the probation practitioner, is essential to ensuring an effective transition from custody to the AP.

Before release from custody, it is important that the prospective resident is fully aware of the national AP Rules (see Annex C) and the house rules, and of the activity in which they will be required to participate in, prior to admission.

The induction should be divided into two sessions. The first session should begin as soon as practically possible after arrival to cover the basics of living at an AP, with a second session to occur within 48 hours of arrival which might be used to ensure the individual has understood fully what was covered at the first session.

Induction may include, but not be limited to, coverage of the following aspects:

- The resident understands and accepts the rules and signs a copy if they have not already done so prior to admission. Their status as a person living in the AP must be made clear, i.e. it is not a tenancy
- Health and safety within the AP, including fire procedures, is explained,
- There is an assessment of self-harm issues, including notification of overdose risks linked to reduced tolerance to substances, which are clearly recorded
- There is an assessment of other factors that may make the person living in the AP vulnerable in one way or another (e.g. bullying, mobility issues, sexual orientation, neurodiversity)
- Ethnic background and specific cultural, dietary or religious issues are considered and taken account of (e.g. translations of key documents, translation services, catering requirements)
- An explanation of the requirements of the Sex Offenders Act 1997 is given if applicable
- Curfew times, signing-in requirements and the consequences of breaking these are explained
- An explanation of the AP routine is given, e.g. meal times and rehabilitative activity, and mandatory activity
- Details relating to financial arrangements, including applying for benefits, and maintenance charges and their collection, are explained
- The keyworker system (including weekly meetings) is described, and the name of the allocated keyworker is provided
- The complaints procedure is explained including the role of the Prison and Probation Ombudsman
- A description is given of how the management structure works

#### Safety and Security

AP work with the highest-risk offenders and are a vital element in public protection arrangements. Effective safety and security measures are therefore essential for public protection and for the safety of staff and those living at AP alike.

APs will be managed according to the expectations and commitments stated in HMPPS Health and Safety Policy (and equivalent policies for IAP) to provide a safe and healthy workplace for all employees, those living in AP, visitors and contractors. This is set out in detail in the National AP Health and Safety Policy available on EQuiP. We will work closely with Trades Unions in ensuring robust guidance and instruction is available and updated on safer working practices and 'out of hours' provisions.

Risks will be effectively managed, and accidents, injuries and occupational ill health will be reduced as far as is reasonably practicable, to support the overall performance of the service.

Security arrangements in AP should be designed around the fact that an AP is - at heart - a community setting, rather than a custodial one. At some times of the day all those living at an AP will be in the building; at others, some may be free to go out into the community, while others may be under more restrictions. Security therefore needs to be flexible in both design and operation.

All AP operational guidance will include processes to be followed in the following key areas of safety and security:

- Staffing
- Waking Night Cover
- Personal Safety
- Suicide and Self Harm
- Manging Violence
- Security Equipment
- Staff and Visitors (including contractors)
- Searches
- Mail
- Entry and Exit control
- Curfews and Movement Restrictions
- Information Security
- Duty Manager Arrangements
- Use of Body worn cameras
- CCTV
- Arson risk management
- Disposal and replenishment of Personal Protective Equipment (PPE)

#### **Risk Management**

AP operate on a '24/7' model and managers and senior leaders within AP operations will ensure all sites are resourced to manage risk robustly. This includes the implementation of contingency measures where exceptional circumstances arise.

Places in an AP should be prioritised for those representing a higher risk of causing serious harm to the public and who need an enhanced level of supervision. Some AP are not suitable for referral of those convicted for sexual offences against minors due to their close proximity to schools or other facilities provided for children.

AP are an important part of the criminal justice system and work best with clear, reciprocated links with partners such as probation practitioners, prison staff, Multi Agency Public Protection Arrangements (MAPPA), police, health and local authorities, local and national charities and other supporting groups. AP staff have a valuable role in sharing information around health and other vulnerabilities that could potentially have a positive impact in securing successful outcomes with future placement activity with Local Authorities.

The AP's contribution to the risk management of each person required to live in an AP, including move-on arrangements, should be clearly defined in the probation practitioner's risk management and sentence planning and will include:

- the proposed outcome of residence in an AP
- the move-on plan
- how the risk of harm will be managed including, if necessary, to AP staff
- what the person needs to achieve
- what role AP staff are expected to play in the supervision and management of the resident

Each AP is expected to implement a Support and Safety Plan (SaSP) and Collaborative Approach to Risk and Emotion (CARE), in line with the detailed guidance available on EQuiP, to ensure a better approach to those people in AP who are at risk of causing harm to themselves. Information provided from the Assessment, Care in Custody and Teamwork (ACCT) during the individual's time in prison should form an important part of those plans.

AP are also expected to ensure that probation practitioners are provided with timely information regarding an individual's behaviour, risk indicators and relevant progress in respect of the Risk Management Plan. This will include, but not be limited to:

- Public Protection Measures
- Victims
- Recording

Managers and staff within the AP play a vital role in the management of risk posed by people on probation in the community. The majority of these individuals will be managed within the MAPPA framework. In order to undertake this work it is essential that effective lines of communication are promoted, developed and maintained to achieve this aim. As well as clarity of purpose, this will ensure that proper links exist between the AP and other facilities in the community such as community safety teams and neighbourhood policing.

In line with operational guidance available on EQuiP, all AP should have risk management features in place for managing a fire. It is good practice to have an identified room which would be used to locate an arsonist/fire starting behaviour resident.

AP operational guidance available on EQuiP and AP SharePoint will also include clear advice and good practice in relation to continuity of care for prison leavers with mental health issues, as well as information sharing agreements

## Managing the personal possessions of a person living at an AP

Staff working in AP should be mindful of the need to treat the personal possessions brought in by people living there with care and respect. We know that women are more likely to arrive at an AP with the entirety of the personal possessions they own, and managers in female AP should be mindful and sensitive of this in their storage processes.

AP staff will endeavour to move a person's property to storage as soon as practicable following their departure. Property will be disposed of if not collected within the following timescales:

- Planned move-on in the community 7 days
- Unplanned move-on in the community 2 weeks
- Unplanned move on to custody (recall) 3 months

Perishable items, liquids, aftershaves/perfumes and toiletries will not be stored and will be disposed of immediately.

If a person living at an AP arranges for someone to collect property on their behalf, they must produce a signed authorisation letter and some form of identification.

Only property that has been approved by AP managers will be allowed onto the premises. Electrical items can only be brought onto the premises provided they are made available for electrical safety testing. Usage of such items will only be permitted after the item has passed a safety inspection. All electrical items will require authorisation.

Further detail on handling and storage of possession can be found on Equip.

### Rehabilitative and Recovery-Focused Activity

Each AP is expected to providing high quality rehabilitative activities based on individual needs to help people change their lives and reduce reoffending.

A rehabilitative activity can help people living in AP feel better, live a healthier life, build on their strengths, give hope which all can lead to the individual realising their potential and lowering the risk of re-offending. It can be:

- Planned or unplanned in small groups or on a one to one or
- Delivered by staff, those living in AP or other organisations in or out of the AP. The length of the activity can vary as it is based on the quality of the sessions rather than fixed time.

For example: A person on probation comes to the AP reception in a distressed state and a member of staff spends 15 minutes listening to and helping the individual explore and find ways of managing the issue without it leading to a negative outcome. The person and staff member can identify how the activity has helped the individual.

To achieve positive rehabilitative and recovery-focused outcomes AP leaders and managers should promote a culture of lived experience; one that, where appropriate, encourages the sharing of personal experiences by those living at the AP for better inclusion and understanding. This will help to reduce stigma, challenge stereotypes, encourage meaningful engagement through dialogue and involve lived experience communities.

In order to achieve the right balance between support and public protection, all AP should have a positive, rehabilitative culture, with activities being delivered that are part of the overall work to reduce reoffending. This will include substance misuse and drug strategy work, mental health work, and a range of wider rehabilitative activity.

Mutual aid fellowships such as Alcoholics Anonymous and Narcotics Anonymous offer peer-led support, which can be accessed whilst a person is living in the AP but also crucially as part of the move on package/plan for leaving.

Drug strategy and policy in AP should baseline, monitor and provide evidence of a 'recovery journey' for residents. The <u>AP (Substance Testing) Act 2022</u> creates a statutory framework for drugs testing in sites, including testing for psychoactive substances and the abuse of prescription and pharmacy medicines. All sites should follow the guidance provided on EQuiP to ensure that they are operating mandatory substance misuse testing in a robust and comprehensive way

Our overall commitment to developing an open learning culture, which embraces diversity and inclusion, will also extend to ensure our work is informed by a diverse range of lived experience in how we provide an AP service. This will include a greater focus on the impact faith and religious observance has on the journeys of people on probation towards rehabilitation and recovery.

Guidance and examples of the work being undertaken around the AP estate is available to staff in the resource library on the HMPPS SharePoint pages.

#### Commissioned Rehabilitative Services

AP staff and Community Offender Managers should work closely to ensure that those in their care are referred to Commissioned Rehabilitation Services (CRS) to support their immediate needs for accommodation, personal well-being, finance, benefits and debt, and dependency and recovery services. Where relevant an accommodation referral should be made shortly after someone moves into an AP to support move on accommodation. CRS Providers will be able to support probation staff in Duty to Refer referrals and ensure that necessary housing applications and other activity is undertaken to maximise the chance of someone gaining/maintaining accommodation. In addition, a personal well-being referral can support with services such as emotional well-being, integrating back into family life and supporting behaviour around lifestyle and associates. Women in APs should similarly be referred to Women's CRS for support with housing, employment, substance misuse, financial and well-being needs linked to their offending.

### Inter-agency working and Community Engagement

To work effectively sites will need to develop, promote and maintain effective lines of communication with criminal justice agencies and with other bodies in the community that may be involved in offender management. Managers and staff should work closely with the police in supervising those who live in AP, and AP staff and police can reinforce each other's public protection work by sharing intelligence about residents. It is therefore essential to have a good working relationship with them at all levels. This applies both to formal contact with police public protection units, and to less formal contact at station and beat level. Effective working can be helped greatly by promoting the APs effectiveness as a form of supervision and enabling police colleagues to familiarise themselves with the AP and its services.

Good relationships with other agencies that facilitate positive reintegration opportunities should be nurtured, as they enable residents to make the best use of their time in the AP and to move on in a managed and planned way. Strong links should be maintained with other organisations through developing and maintaining the local directory of rehabilitative resources—for example:

- Links with courts and court open days
- Training for court clerks, the Crown Prosecution Service, (new) magistrates and judges
- Local councillors and MPs
- Local law centres, Citizen's Advice and Immigration Advocacy services
- Community safety or crime and disorder committees
- Community plans and local forums
- Supporting People teams
- Health service providers
- Prison Drug Strategy Leads
- Organisations with a focus on neurodiversity
- Health and Justice Partnership Managers and Co-ordinators
- UK Health Security Agency

AP should also have a considered approach to community engagement that appropriately reflects local circumstances. Factors that will need to be considered are:

The desirability and suitability of proactive community engagement, e.g. through establishment of a liaison forum, staff involvement in local community groups, resident participation in local community events

- A strategy to respond effectively to community concerns, e.g. in the wake of a serious incident or adverse media coverage
- Senior managers and managers available to provide briefings to MPs and local councillors as necessary
- Senior managers and managers available to meet local neighbours as required
- Policy and procedures for dealing with complaints from neighbours
- Effective liaison with police in respect of managing community concerns, e.g. use of police intelligence, community impact assessments

### **Diversity and Inclusion**

HMPPS has a legal responsibility to promote equality and prevent unlawful discrimination. There are nine **protected characteristics** defined under the Equality Act. These are:

- Age
- Disability
- Gender reassignment
- Marriage and Civil Partnership
- Pregnancy and Maternity
- Race
- Religion and Belief
- Sex
- Sexual Orientation.

People living in AP may be vulnerable for a number of reasons, such as age, illness and mobility challenges, as well as mental health; substance misuse or dependency; bullying; ethnic origin; religion and belief; disability; sexual orientation; gender dysphoria, and pattern of offending. AP are required to have strategies for managing vulnerable people that cover such protected characteristics.

Each AP should consider the following specific requirements within a Diversity strategy:

- AP should have a bespoke diversity plan which is aligned to any wider national AP diversity and inclusion plan
- All staff to be trained in diversity issues
- Diversity objectives must be set through staff supervision processes
- In catered AP, provision of meals should cover all dietary needs
- Access to interpreting and translation services
- Sufficient range of rehabilitation and recovery-focused activity available to allow broad access for those who live in the AP
- Provide information about, and forge links with, community organisations and facilities that can meet residents' needs
- Feedback from those who live in AP, broken down by race and other diversity factors, must be used to develop and strengthen policies and working practices. It is essential that AP ask those living there for feedback about their experience of living in the AP, and then act on it
- Periodic review of referral, admission and departure data, by race and other diversity factors, in order to identify and tackle any significant differentials
- Process for dealing with complaints to be made known to residents at induction
- Completion of equality impact assessments where appropriate, e.g. when reviewing policies and procedures.

AP should be places where staff can work in a positive rehabilitative culture, and where the diversity of our staff is recognised as a positive asset. Each AP is required to develop an open learning culture, embed equality, diversity, inclusion and belonging at the forefront of its work. This will include AP managers leading a positive workplace culture, improving training activity and working with HoPPs to make sure that communications to staff are positive and effective.

## **Health and Wellbeing**

AP should develop protocols with Integrated Care Boards (ICB) and/or GPs to facilitate access for people living in AP to treatment on the same fair and transparent basis as that available to other members of the community. This should include access to screening pathways. Managers and staff have a statutory responsibility to ensure that all people living in AP have access to necessary medical and dental treatment. Close links with a specified local GP practice are helpful in terms of developing a constructive well informed medical service for residents. Additional consideration may be required for individuals who face particular challenges, for example, those with uncertain or restricted immigration status.

AP should ensure that those who are vulnerable are able to receive assistance from specialist agencies with dedicated provision. AP managers should be particularly aware of the need for staff to complete the required HMPPS online mental health training modules as outlined in the training role packs on SharePoint. Early negotiation is essential in ensuring a commitment to obligations by external agencies to meet need, such as for residents with ongoing mental health issues and older residents. AP should also ensure close liaison with the local Community Mental Health Team for residents and seek their advice where appropriate.

In developing local practice and procedure, AP will also need to consider a range of health-related issues that may affect the people required to live in AP. This may include, though is not limited to:

- Mental Health
- Drug and Alcohol misuse
- Those screened into the Offender Personality Disorder pathway
- Do not resuscitate (DNR) certificates
- First Aid,
- Medication,
- Food Safety

AP managers and prisons should work together to ensure pathways exist locally for sharing information in relation to all healthcare issues for an individual prior to and during their stay at an AP. This may include but not be limited to:

- Those subject to Assessment, Care in Custody and Teamwork (ACCT) whilst in prison
- Sharing of prescription information
- Ensuring individuals leave prison and arrive at their AP with sufficient supply of medication for the first few days
- Ensuring the AP receives Local Drug Alerts from the Police or other agencies in order to support effective communication re potential risks to staff and people living in the AP
- Where an individual living in an AP is recalled to prison, AP staff should ensure any selfharm or vulnerability information recorded during the person's time in the AP is included on the recall paperwork.

#### Management of Communicable Diseases

AP managers should ensure their sites are familiar with and follow the procedures outlined in the 'Management of Communicable Disease in AP' guidance issued and available on EQuiP. The Physical Environment

In recent times HMPPS has undertaken major refurbishment and renovation work across the AP estate. This will help achieve the aim to better support the mental health needs of people living there and we will continue to focus on the physical environment at our sites.

The types of projects that may prove most beneficial include:

- Storage and furniture that reduces clutter and mess
- Re-decorating in *calming* colours
- Indoor plants
- Complimentary pictures and soft furnishing
- Blinds and curtains that let in more light
- Supplies for creative rehabilitative activities, such as art, cookery and exercise
- Additional indoor and outdoor spaces for wellbeing

Where operational guidance permits, the use of therapy dogs and other animals within AP may also encourage a calmer environment. Staff should refer to current internal operational guidance on EQuip about <u>Animals in Approved Premises</u> (internal link).

It is also vital that AP managers and staff ensure understanding of infection prevention and control measures around environmental cleaning

Whilst financial and other resourcing considerations are a factor in establishing an appealing physical environment, AP managers, in consultation with their regional offices, should consider the most creative and efficient ways to achieve this through the appropriate funding streams.

### **Human Resources (specific to HMPPS AP staff)**

All staff in HMPPS-managed AP will be subject to existing published and internal HMPPS human resource policy and procedures, including the Civil Service Code. Any tailored guidance produced by the national and regional AP teams should be consistent with this and must include Trades Union consultation.

## **Corporate Support**

There are various specific administrative duties and data provision required of AP managers and staff, which should be undertaken in line with established and updated guidance issued by the National AP Head of Operations, and other HMPPS headquarters functions. The AP Performance and Quality team provides oversight of national performance metrics, working closely with Regional Heads of Public Protection (Residential).

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In terms of data provision/metrics this will include:

- All Serious Incidents and Health and Safety Reporting
- Monthly performance monitoring, including:
  - Occupancy
  - 1st Stage Inductions
  - 2<sup>nd</sup> Stage Inductions

- SaSP Assessments
- SaSP Reviews
- Race and Ethnicity Monitoring
- Resident Feedback this is used nationally and locally to improve outcomes
- Complaints

Staff should also be mindful of the need to record any key interaction and work carried out with individuals living at an AP.

Accurate performance data provides a key driver for senior AP leaders to ensure the core purpose of AP is being carried out effectively and to inform any change activity required where necessary. All AP staff are expected to comply with general HMPPS policy and guidance on data protection in carrying out their work, including data entry tasks.

There are also a range of other financial and administrative procedures which AP managers are required to ensure are completed in line with the appropriate national and/or regional guidelines. These include:

- Maintenance, including management of Contracted Services
- Notification of AP Maintenance Charges
- Benefits
- Bad Debt and Lost Income
- Travelling Expenses
- Release on Temporary Licence (RoTL)
- Council Tax
- TV Licensing
- Insurance
- Residents' Leave of Absence
- Stay in Hospital
- Cash Handling

## Psychologically Informed Planned Environment AP (PIPEs)

PIPEs form a cornerstone of the Offender Personality Disorder pathway (OPD). There are currently twelve sites within the AP estate, commissioned to work with individuals screened onto the OPD pathway, which are specifically designed, contained environments. All sites have benefit from a dedicated NHS Clinical Lead (usually a Psychologist) in post.

Staff members will be required to have additional training, helping them distinguish between rule breaking and risk, to develop an increased psychological understanding of their work. This understanding will enable them to create an enhanced safe and supportive environment, to facilitate the development of people who live there.

Managers at PIPE sites will ensure staff give particular focus on the environment in which they operate; actively recognising the importance and quality of relationships and interactions. This will help to maximise ordinary situations with a psychologically informed approach, paying attention to interpersonal difficulties, for example those issues that might be linked to a personality disorder.

Further information and guidance on PIPEs and OPD pathway services is available on the internal AP SharePoint pages.

## **AP Safety and Security Team**

The HMPPS AP Safety and Security team provides national oversight and specialist security management working with the National Security Division (NSD), Joint Extremism Unit (JExU) and Serious Organised Crime Unit (SOCU) to identify suitable Approved Premises placements. It also supports referrals for Enhanced Security AP and helps to manage the most significant threats to national security within the AP estate.

#### **ANNEX B**

#### **FEMALE APPROVED PREMISES**

Women living in AP have distinct needs that require a different approach. As well as a public protection focus for higher-risk offenders, AP offer placements to women who pose medium risk of serious harm where there are complex needs such as:

- Trauma experienced throughout their lives
- Drug/alcohol misuse
- Mental and physical health
- Family issues
- Domestic abuse

Whilst there remains a need to increase our understanding of outcomes for women with complex needs there are a number of factors that need to be considered in ensuring better results.

In particular, due to the small number of female sites across the country, it is likely that women may be placed a long way from their family. This is especially true where specialist support is needed, such as Psychologically Informed Planned Environments, where there are currently only two female sites.

It is, therefore, vital that those working with women in AP, and probation practitioners who manage individuals living there, adopt a personalised women-centred care approach. The core HMPPS principles for this approach are:

- Adopting a gender-specific, trauma-informed (GSTI) and trauma-responsive approach
- Build relationships and working collaboratively with each woman
- Taking account of women's family and caring responsibilities.
- Providing holistic support to women.
- Equipping our staff with bespoke training and support for working with women.
  - Taking an evidence-informed approach to service design and interventions

More detailed information on these principles can be found in the HMPPS Women's Policy Framework and the associated Operational Guidance. Managers and staff working with women in AP should familiarise themselves with the relevant content in these documents.

The HMPPS National AP Team has developed comprehensive new operational guidance on working with women in the female estate. This establishes the basis for achieving improved outcomes for women in AP and is available internally on EQuiP and Share Point.

## Mental Health Outcomes for Women

Wherever possible, AP managers and staff should work in partnership with health, family services, third sector organisations and other partners to ensure women in their care have regular access to mental health and counselling services, ideally visiting women at the site.

This may involve receiving regular assistance from specialist agencies with dedicated mental health provision. AP managers at female sites should also ensure close liaison with the local Community Mental Health Team for residents and seek their advice where appropriate.

The feedback we gained from women with lived experience residing at AP whilst consulting for this Policy Framework indicated that regular visits from specialist outside agencies and voluntary sector organisations, even those not directly involved with mental health or counselling, can create a significant boost to overall wellbeing. Motivated and engaged staff from outside agencies can provide a vital support to AP staff in managing the wellbeing of women.

Whilst financial and other resourcing considerations are a factor in establishing an appealing physical environment, managers and staff should consider the most creative and efficient ways to achieve this.

#### Menopause

It is estimated that there are around 13 million people who are currently peri or menopausal in the UK, but almost half of these (45%) have never spoken to their GP about their symptoms. The menopause usually occurs between the ages of 45 and 55.

Staff in female sites should be supportive of those living at the AP who are experiencing the menopause and mindful of existing and emerging guidance from the HMPPS Women's Directorate in relation to menopausal people.

#### Staff interaction with women under their care

Women living in AP highly value time spent with staff outside of formal supervisory sessions to raise concerns or discuss general wellbeing and practical issues.

The extent to which staff at AP are able to spend informal time interacting with women in their care can be dependent on availability and resources, and clearly the statutory supervision and safety requirements of managing a site take precedence in allocating staff time. AP managers should however attempt to create an environment of regular staff and resident interaction, outside of the office areas and in the living areas of the site.

As a minimum weekly (or as regular as possible) staff and resident groups should be maintained to discuss general issues and resolve concerns at female AP sites.

#### Women's centres and CFO Hubs

Our consultation in developing this Policy Framework indicates that local women's centres, which offer practical advice and life skills guidance, as well as a motivational environment for women, can play an important role in improving outcomes. Equally CFO hubs, where available, can play an important role in complementing the work of the AP. AP managers should make connections with women's centres and CFO hubs in their area where possible.

#### **ANNEX C**

#### **APPROVED PREMISES RULES**

#### Introduction

I understand that I can live in the Approved Premises for a short time only. I will not be able to live there permanently, and I will live there as a resident – but not as a tenant.

I agree to share any relevant information with the Approved Premises staff, the Benefits Agency and the GP Practice.

I agree to being photographed so that I can be identified when I arrive at the Approved Premises and as and when necessary, after that.

I understand that staff will tell the police about any offence committed by, or suspected of being committed by, people living in the Premises, regardless of whether the offence was committed in the building, in the grounds or somewhere else.

#### Rules

- 1. I must stay in the building during curfew hours, which are 11pm to 6am, and obey any extra curfew and other conditions set by the Court or set out in my Licence.
  - I must obey any extra curfews and I agree to stay in my own room when Approved Premises Managers ask me to.
- During any outbreak of a communicable disease, whilst in the AP, I must comply with current guidelines around self-isolation and testing based on local risk assessment. This may include social distancing and not congregating in communal areas in a group.
- 2. I must pay the Approved Premises maintenance charges if I am working or entitled to claim benefits.
- **3.** I must take a drug or alcohol test if staff ask me to.
- **4.** I must give all my medicine and drugs to staff (if requested), and take my medicine as prescribed by my doctor.
- **5.** I must see a doctor, nurse or other health worker if staff have good reason to think I need to.
- **6.** I must take part in the Approved Premises Rehabilitative Activity programme, including any group or individual activities that form part of my personal sentence or supervision plan.
- 7. I must let staff search my room and personal things including my vehicle if it is parked in the grounds of the Approved Premises.

- 8. I must pay attention to my personal cleanliness ad keep my room clean and tidy for health and safety reasons. I must also agree to reasonable requests from staff, which may include activities related to the running and upkeep of the Approved Premises, such as household jobs. I must obey all Health and Safety measures in the Premises.
- **9.** I must not smoke in the building. I may smoke outside the Approved Premises in the grounds but only in the area set aside for smokers, if there is one.
- **10.** I must not bring into the Premises including the grounds or carry on me, any weapons, alcohol, illegal drugs or drugs paraphernalia, or solvents or other items that could be dangerous. Some solvents and other dangerous items may be allowed, in special cases, if the Approved Premises Managers agree.
- **11.** I must not damage or try to damage anything that belongs to the Approved Premises, its staff, contractors, visitors or other people living here.
- 12. At all times, I must behave in a way that is not violent, threatening, disruptive, racist, sexist or in any way offensive or prejudiced. I must not do anything that may disgrace the Approved Premises, its staff or other people living here. I must not attract harmful attention to the Premises or do anything that could reasonably be regarded as a nuisance to the neighbours. I must not endanger the health and safety of staff, other people living here, local neighbours, or members of the public.
- 13. I must not bring anyone into the Premises at any time. (Exceptionally visitors maybe allowed via special arrangement following discussion with the Approved Premises Manager).
- 14. I must not bring into the Premises any electrical, electronic or photographic item, unless the Approved Premises Managers allow it. I must make sure that any electrical item I have has a valid portable appliance test (PAT) certificate where necessary.
- **15.** Electric scooters and electric bicycles must not be stored or used on the Premises.
- **16.** I must not:
  - bring in to, display in, share or produce in any format in the Approved Premises materials that may be considered offensive, prejudiced or anti-social
  - photograph, film or video any member of staff, person living here, visitor, or any person near the Premises.
  - use any equipment to record conversations or meetings that take place in the Premises, without the permission of the people concerned.

I have read – or had read to me – these Rules. I understand and agree to abide by them.

I am aware that if I do not obey these Rules that mstances require.

## ANNEX D THE HMPPS COMMUNITY ACCOMMODATION SERVICE (CAS)

HMPPS offers a three-tier structure of temporary accommodation known as the Community Accommodation Service (CAS): CAS1 (accommodation with a public protection focus for higher-risk offenders, known as Approved Premises) and which is the subject of this Policy Framework, CAS2 (low to medium risk offenders on Home Detention Curfew or bail) and CAS3 (up to 12 weeks basic accommodation for prison leavers at risk of homelessness). Whilst CAS2 and 3 are not covered by this HMPPS policy framework a summary of CAS2 and CAS3 is outlined below.

#### CAS2

- Provides suitable gender specific accommodation for Bailees and prisoners eligible for Home Detention Curfew (HDC), who might be remanded or not released due to lack of suitable accommodation.
- It can also be used for people moving on from AP where risk has been de-escalated to medium.
- Additionally, it provides accommodation in some circumstances for those who lose their accommodation whilst subject to licence in the community and accepts referrals for those moving on from CAS1 AP, who meet the risk eligibility
- All individual placements receive weekly support sessions to help ensure successful completion of their residency.
- CAS2 is currently contracted to deliver 1350 spaces across England and Wales by January 2026.
- As part of CAS2 property procurement procedures, the contractor seeks views from the Police and Local Authorities.
- More details can be found in the CAS2 HMPPS Policy framework

### CAS3 – Transitional Accommodation

- CAS3 provides transitional accommodation for up to 84 nights for prison leavers and those
  moving on from CAS1 AP and CAS2, who are supervised by probation, and would
  otherwise be homeless, with basic floating support to move onto settled accommodation.
- The service is delivered by regional probation Homelessness Prevention Teams working in collaboration with contracted accommodation suppliers in 10 regions, and via grant funded arrangements in partnership with Local Authorities Greater Manchester and Wales.
- The current provision is contracted to provide 3253 bed spaces nationally. This provision provides a critical stabilising environment for people on release from prison from which they can address other aspects of their behaviour linked to their risk of re-offending.
- Before placing people on probation into CAS3 properties, HMPPS consults with local partners including the police, as appropriate. All prison leavers are supervised by probation practitioners in the community, who undertake robust risk assessments and support them to address problematic areas of their life. In addition to the supervision of a probation practitioner, prison leavers are also supported by accommodation support workers with a minimum of weekly contact and fortnightly visits at the property with a focus being on sustaining the transitional accommodation and support to secure suitable move on accommodation.