RR3 Special Interest Group on Commissioning 2023-2024: Recommendations Paper

About

The Reducing Reoffending Third Sector Advisory Group (RR3) provides the key interface between the voluntary sector, and the Ministry of Justice (MoJ) and His Majesty's Prison and Probation Service (HMPPS), in order to increase mutual understanding and build a strong and effective partnership. The group is made up of senior leaders from the voluntary sector and meets quarterly with civil servants to provide guidance and feedback on MoJ policy developments.

The RR3 convenes Special Interest Groups (SIGs) to advise on specific areas of policy and practice as the need arises. This SIG has convened to provide the voluntary sector perspective on the next generation of Commissioned Rehabilitative Services (CRS), with a specific focus on the role of small, specialist organisations.

The SIG held two evidence sessions comprised of 18 voluntary organisations and officials from the Ministry of Justice (MoJ) and His Majesty's Prison and Probation Service (HMPPS).

Introduction

The final session of the SIG on Commissioning focused on practical recommendations to be considered by HMPPS ahead of the upcoming re-tendering of the Commissioned Rehabilitative Services (CRS). These recommendations are based on the findings from the Groups previous session and are focused on the following areas:

1) Communication between relevant stakeholders
- Access to information
- Diagnosis of need
- Clearly assigned responsibilities
- Clarity on the 'direction of travel' and 'understanding the offer'

2) Reducing dependencies/demand on probation
- Reducing bureaucracy and assigning responsibility
- A strengthened partnership approach
- A shared understanding that balances risk with need

3) Incorporating smaller, specialist providers into the commissioning process

4) Developing a robust outcomes framework

5) Catering for an increased demand on services

6) Supporting people with complex needs, enabling service user involvement and ensuring person-centred services.

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Section 1: Communication between relevant stakeholders

Access to information

SIG participants strongly agreed on the importance of greater access to detailed information about service users, which would enable providers to be more responsive to service user need. For example, providers were not aware of other agencies involved with any given service user and therefore the ability to work in a multi-agency way was hindered without significant input and coordination from the probation officer.

By ensuring greater access to the right information, significant barriers to effective multi-agency delivery would be removed, as having sight of engagement across all elements of the supply chain would allow for more considered interventions and avoid the possibility of duplication. HMPPS has subsequently confirmed that it will be commissioning the next round of services as 'combined, whole-person services, rather than as separate pathways'. Within such a model, it remains essential that access to information is ensured for each element of the supply chain in each region.

Participants also highlighted access to nDelius as a key requirement and noted that the refer and monitor system does not provide enough detailed information, nor does it provide ongoing information such as changes in risk, future appointments and probation case notes, all of which support effective interagency working. It was also raised that the more information requested as part of a referral, the less likely it would be that the provider would receive the referral given the additional burden the information request would place on probation.

Recommendations

1) Ensure that providers can access the information contained within nDelius on an ongoing basis throughout the intervention

2) Create a standardised baseline of referral information that providers will receive that incorporates the following:

- Detailed risk information shared on an ongoing basis (given that risk changes), beyond the referral stage. Information to be focused on the person and the areas of concern, alongside an initial analysis of need.
- Accurate, up-to-date contact and location details.
- Community/custody. If the person is in prison: what prison are they in and for how long? Where in the prison are they?.
- Information on additional needs including (but not limited to) – mental health, disability and neurodivergence.
- Information on all organisations within a proposed supply chain.
- Scheduling information (next appointments) and availability (if they are working and need to be seen out of hours, for example).

Clearly assigned responsibilities

It was noted that a clear assignation of responsibilities – for both statutory and non-statutory stakeholders – is essential for effective interventions. These responsibilities must be reinforced during the pre-release process, underpinned by a mapping out process across as long a timeframe as possible across the support agencies responsible for working with people ahead of their release and on their release into the community.

Diagnosis of need

Participants also referenced that complexity levels are often not reflected in the services that are being commissioned. This occurs as the level of treatment required is determined by referrals from the probation practitioner. However, this process often fails to accurately reflect the support needs of individuals. The knock-on impact is services being commissioned without sufficient funding to deliver the services needed to support increased complexity.

Participants called for the identification of need and the subsequent model for intervention to reflect complexities and to avoid arbitrary distinctions. The practical example given was for people who do not attend a specific appointment. In this instance, it was argued that there should not be an automatic recall and that a greater understanding of the issues that could have led to the non-attendance, and then action to address this, would be more beneficial with regards to outcomes.

Recommendations

1) Probation to identify need but providers to diagnose the level of need through undertaking the initial assessment and agreeing with probation proposed model for intervention.

2) Consideration to be given to the volume of work undertaken which does not pertain directly to the referral made under the CRS – for example, dealing with complex safeguarding issues or incidents.

Example of best practice

Probation 'core' teams in North Wales – a team within probation responsible for compiling and submitting referrals. Probation practitioner meets with the core team to run through the needs of the referral and then submits, which ensures the provision of better quality information.

Clarity on the direction of travel and 'understanding the offer'

Participants noted that a shared understanding of the 'direction of travel', with a renewed focus on outcomes, would strengthen the relationship between the commissioner and the provider, as well as the person on probation. Ensuring that values are aligned is considered key to success, and sector events - encompassing statutory and voluntary stakeholders - to support this would be beneficial.

There needs to be a strong understanding of what the offer is, with probation and prison staff aware of what is available, with the next round of commissioning setting out a 'cast-iron' offer that clearly highlights what each person has available to them, and what they can expect from CRS's. This will require engagement with probation on what this cast iron offer is, and will ensure absolute clarity for probation staff about what different services can and cannot do, setting out the service offer and who is responsible for providing the service. This support that is on offer must then be applied consistently.

Recommendations

1) Develop guidance for probation practitioners — setting out services delivered by the providers and what constitutes high, medium and low need.

2) Explore constitution of sector engagement events, coordinated by Clinks, to bring together statutory and non-statutory stakeholders, aimed at ensuring clarity and a shared understanding of the CRS direction of travel.

Section 2: Reducing dependencies/demand on probation

Reducing bureaucracy and assigning responsibility

Participants highlighted that frontline practitioners are not always aware of what the CRS's aim to deliver. As a result, the role of the probation officers needs to be reduced from being involved at every point of the service user's journey as this is not an effective use of probation's time. In many instances, the provider is best placed to make informed decisions, particularly given that many people leaving prison can be distrustful of statutory organisations and therefore are more likely to share important information with a voluntary provider. Further, there is significant bureaucracy involved for probation in terms of administering the services, which reduces the focus on delivering successful interventions.

Recommendations

1) Responsibility for a person's initial assessment to sit with the provider to ascertain the level of need.

2) Provider to return to probation with a recommendation, including a mapping of proposed interventions.

3) When determining the level of need, the provider would need to be supported by quality assurance measurements to ensure that the level of complexity was being measured appropriately.

Strengthened partnership approach

By enabling greater visibility of the organisations involved with each person as they move through the CRS pathway, as well as prior to release. This needs to begin with identification of need at the BCST stage and the recognition that effective partnership building takes time. This allow for probation to focus on its coordination role, aligning services and the sequencing of interventions, as well as ensuring greater transparency and reducing the need for constant back and forth/transactional communication with probation regarding a person's engagement with different providers.

Recommendations

1) Ensure that providers have access to information on the services that a person is engaging with, beyond their own provision, through improving the functionality of the refer and monitor system.

2) Incorporating a scheduling function within the refer and monitor system would improve this visibility by enabling providers to have sight of the range of appointments being attended by each service user.

3) Providing opportunities for stakeholders to share experiences on the ground in order to build relationships across those responsible for supporting the service user.

A 'shared understanding' that balances risk with need

The current system is complex, with an emphasis on risk management over addressing need. Establishing a shared understanding between providers and probation would alleviate this issue, preventing interventions from being structured solely based on the remaining time on a license/order rather than focusing on reducing reoffending. . While managing risk is central to the work of probation, decision-making around what the most appropriate support is should consider three elements : risk, need and the available time frame for providers to engage with individuals. . Striking a balance between the time/sessions allocated to address a problem and the breadth of needs is essential. Currently, it is difficult to measure what can be achieved within a set time-frame, as outcomes are dependent on a service user's needs.

Recommendations

1) Explore the viability of commissioning providers to deliver an agreed number of hours against each complexity level, but monitor delivery of hours to ensure that this agreed number continues to be the average level of intervention.

For example, if a provider delivers an average number of 20 hours against high need cases versus a planned average of 10, it would be reasonable that the provider can only work with 50% of the profiled cases. We would suggest that this is an ongoing element of contract management to discuss delivery against expected hours and review either the length of intervention and activity in scope (to align back to profiled volumes), or flex in volumes based on level of delivery required.

2) Further, probation officers should be enabled to create a second referral (if the need continues to require intervention) once the level of delivery by the provider has exceeded that which the provider has modelled – in this case 10 hours.

- Such a model would enable further flexibility within the model to adhere to changes in need.

Section 3: Incorporating smaller, specialist providers into the commissioning process

The incorporation of the specific, and local, expertise of smaller specialist providers was highlighted as an essential component of the CRS re-tendering process. In particular, participants noted the need for statutory stakeholders to better understand the work that smaller organisations do, whilst acknowledging the value of this work – specifically in working with smaller numbers of people in a more in-depth manner. It was recognised that contracts could cost more per unit by bringing specialist organisations into the supply chain, however such an approach would lead to the more effective delivery of specialist services.

Recommendations

1) Creating formalised support mechanisms.

Ensuring that larger organisations support smaller, specialist providers. This could be achieved through the implementation of a 'responsible and ethical' framework designed to support smaller organisations to work within prisons and probation.

2) Expectation of supply chains demonstrating local and specialist provision.

Aligned to the social value element of the tender, the re-tendering of CRS's will include an expectation that providers can demonstrate local connection and/or supply chains which demonstrate specialist provision

Recommendations (cont.)

3) Commissioning a wider range of organisations, and across smaller geographical locations.

To ensure that smaller providers are not impeded due to unrealistic referral volumes and overly bureaucratic targets. Smaller contracts would enable organisations to collaborate and deliver in partnership with other local services. If contracts are commissioned at regional level, there should be an expectation that providers understand and are embedded into local networks/infrastructure.

4) Capacity building.

Of smaller organisations through the provision of statutory support to scope out the required capacity building for smaller organisations. This would create an understanding of the capacity building that smaller organisations require, before the tendering process begins. Such an approach can be supported by sector engagement events to scope what capacity building is required in order to build up effective partnerships between smaller and larger providers

5) More detailed information on contracts.

In advance of the bidding window would be required, alongside a greater lead-in time to ensure that providers have a realistic timescale within which to build models and meaningful partnerships ahead of the bidding process, beyond the current six-week timeframe.

6) Affordable subcontracting.

With larger providers assuming to cover off specific costs and responsibilities, such as providing approved level ICT kit and systems to avoid smaller providers having to gain ICT accreditations, when appropriate, so that smaller organisations can be subcontracted in an affordable manner.

7) Fair terms.

Incorporating criteria to ensure fair terms are passed down to smaller providers – so that there is fairness across supply chains and so that risk is proportionately shared between providers.

8) Reforms to the current invitation to tender (ITT) process.

Including the release of the envelopes for each region and the specifications, eight weeks prior to wave one of the invitations to tender.

9) Earlier information on the financial envelope.

To allow for partnerships to be built, alongside longer timeframes for submitting bids, allowing for at least 12 weeks to create meaningful partnerships.

Section 4: Developing a robust outcomes framework

Participants discussed the outcomes that should be incorporated into the forthcoming round of CRSs, exploring how impact could be measured more effectively, and how to model a more consistent application of outcome measurements. The Group then developed the following recommendations.

A focus on outcomes not inputs

The right outcomes are needed, but there must be recognition that these outcomes can take a period of time to develop, with collaborative development essential in order to create shared outcomes between providers and probation colleagues.

Incremental outcomes

Implementing a framework that caters for incremental outcomes, with a degree of flexibility, that build towards an overarching outcome, with access to nDelius highlighted as enabling access to the information that would support the ascertaining of a person's general progress or regression. Embedded within any proposed outcomes framework should be a shared understanding of the ultimate ambition of services with an overarching focus on reducing reoffending linked to additional ambitions including improved wellbeing and resilience, and the building of relationships and connections in the community.

Ongoing impact development

Contracts should initially incorporate a limited amount of KPIs (2-3), to be further developed as the contract progresses. To support this work, the Group recommended including a clause within contracts stipulating that providers will work with the authority to develop these impact measures over an agreed period of time, while allowing for a degree of flexibility acknowledging that progress for services users is not always linear. Given that progress can be uneven, it was acknowledged that there needs to be a diversity of impact sub-metrics, with outcomes sitting alongside soft skill metrics. This as it may not be possible to measure an outcome with an individual after a certain amount of sessions, but that it will be possible to measure progression via a range of soft skill metrics.

The initial development of impact measurements could draw from the data collected over the course of the current CRS contracts and included within end of service reports.

Outcomes and sustainment

In order to effectively map progression, outcomes should divide into initial outcomes – such as supporting a person into accommodation; and sustainment outcomes – evidencing what has worked most effectively to make a sustained impact which in this instance, would be sustaining a tenancy. Sustainment outcomes are likely to be recorded by probation officers given that the majority of interventions with CRS providers are short term (<6 months) and time limited (except perhaps women's provision where cases are held for longer periods).

Implementing a 'distanced travelled' tool

A 'distanced travelled tool' – to look at a person's progress at the start, mid-point and end of their involvement with CRS's. This would map their progression, capture the right information, and measure it in a sustained way, and then beapplied consistently across regions as well as provide an evidence base as to what interventions are having the greatest impact.

Annual continuous improvement plans shared between CRS provision and probation

Developed not just as a response to underperformance but shared between providers and contract management teams and based on the needs of the region. Incorporate service user feedback within these plans to ascertain areas in need of development and potential areas for innovation.

Section 5: Catering for an increased demand on services

The Lord Chancellor's package of measures, announced in October, aimed at tackling overcrowding in prisons, is likely to lead to an increase in the number of people accessing services in the community. Combined with an increase in the complexity of need, as set out in this report, the Group discussed how the next generation of CRS's could cater for an increased demand on services. The following areas were explored.

Resourcing the front end of prisons and the more effective use of diversion

The initial period of a person's prison sentence needs to be resourced more effectively, in order to address need at the earliest possible stage. This is as the complexity of need will only increase if this opportunity is missed. A better use of diversion schemes which would be more cost effective given the complexity of need would likely to be less at this earlier of stage. Earlier interventions can reduce caseloads further down the line.

Support navigating the system

The focus should not just be on increased demand, but on the type of service that will be required. This specifically concerns the 'revolving door' cohort, which requires support to access other services and to engage with other services. Peer support to navigate the system would therefore be beneficial.

Reducing the volume of inappropriate referrals

Participants highlighted the volume of inappropriate referrals, specifically those that failed to accurately reflect the need of service users.More considered referrals would reduce the time spent by
providers in processing referrals that are inappropriate. Upskilling of probation officers to fully understand the CRS 'offer' should mitigate against this, along with further refining of the referral process to streamline it and make it less onerous for probation staff.

The current conversion rate for referrals is problematic across all services, with providers managing higher than expected referral volumes which they are unable to administer and assess with the existing resource which is based on 'starts'. Providers noted that the number of starts remains consistent with the current bandings, however the number of referrals and therefore front-end administration and assessment is in some instances double the volume of starts. Providers haven't modelled on this basis and had expected referral numbers to be more closely aligned to starts (i.e. a much higher conversation rate), however this isn't achievable given the inflated referral volumes.

> ## Recommendation
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> **The next generation of CRS's should base volume band numbers on the number of referrals, and not starts, but with an expectation on the provider that they will convert a % of referrals into starts.**

Section 6: Supporting people with complex needs, enabling service user involvement and ensuring person-centred services

Supporting people with complex needs

Avoiding generic commissioning

This is a significant challenge for probation. It is easier to refer people into generic services, which are then responsible for determining need and required interventions. Yet it is rare that the issue a person is referred with is the full extent of what they require support with. There is a real need for flexibility in commissioning, less prescriptiveness and a move away from a one-size-fits-all, generic approach. A more flexible approach should be pursued with a view to how providers can work together in partnership to support people with complex and often overlapping needs.

Flexibility in contracting

One proposed recommendation was for a two-tier change mechanism within the new services. The first being informal and agreed between providers and local contract management teams. It would be used for reasonable changes which do not impact on budget or staffing structures but may alter the type or nature of interventions based on shifts in local need. For example – if the provider identifies a gap in CRS or external provision which can be addressed by amending the CRS interventions, this would be proposed to the contract management team for discussion/agreement. Likewise, if the contract management team identify an overlap of CRS provision, but a gap in a particular intervention, they would approach providers to discuss how the service offer could be amended to avoid duplication and fill the identified gap.

The second tier would be triggered for formal changes which impact on the terms, budget or staffing structure. Developing this two-tier system would allow for flexibility to respond to need on a local basis and to amend delivery to meet need over time.

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Enabling service user involvement

The Group developed a set of recommendations designed to ensure the incorporation of service user involvement/lived experience within the commissioning of services. Participants highlighted their concerns that vetting continues to be a significant barrier to recruiting lived experience.

Co-production in the design and commissioning of services

There should be a focus on incorporating lived experience into the design stage of services, and within all processes. This will lead to services that are more person-centred and trauma-informed, with support at the heart of them.

Capture service user feedback

Service user feedback is not captured in the current generation of services. To mitigate this, service user feedback should be part of an impact measurement framework and a contractual requirement.

Person-centred services

Participants highlighted movement away from the co-location of services as an impediment to effective partnership working and the delivery of person-centred services. As a result, the Group recommended a focus on co-location for CRS provision moving forward to boost partnership working in understanding the needs of individuals. Such an approach will ensure a greater understanding of client need and progress between agencies and streamline the service offer for clients. To date, evaluation of existing services from participants has produced positive feedback on the co-location of services, particularly where services are delivered in community hubs, with probation offices not viewed as environments conducive to person-centred work.