



# **A REVIEW OF PROBATION APPROVED PREMISES IN NORTHERN IRELAND**

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A REVIEW OF HOW EFFECTIVELY  
PROBATION APPROVED PREMISES  
CONTRIBUTE TO RESETTLEMENT,  
REHABILITATION AND PUBLIC  
PROTECTION OUTCOMES IN  
NORTHERN IRELAND

**MARCH 2023**



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# A REVIEW OF PROBATION APPROVED PREMISES IN NORTHERN IRELAND

A REVIEW OF HOW EFFECTIVELY PROBATION APPROVED PREMISES CONTRIBUTE TO RESETTLEMENT, REHABILITATION AND PUBLIC PROTECTION OUTCOMES IN NORTHERN IRELAND

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**March 2023**

Laid before the Northern Ireland Assembly under Section 49(2) of the Justice (Northern Ireland) Act 2002 (as amended by paragraph 7(2) of Schedule 13 to The Northern Ireland Act 1998 (Devolution of Policing and Justice Functions) Order 2010) by the Department of Justice.

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# LIST OF ABBREVIATIONS

|                       |   |
|-----------------------|---|
| <b>ACE</b>            | Assessment, Case Management and Evaluation              |
| <b>B&amp;B</b>        | Bed and Breakfast                                       |
| <b>CCTV</b>           | Closed Circuit Television                               |
| <b>CJI</b>            | Criminal Justice Inspection Northern Ireland            |
| <b>CJOs</b>           | Criminal Justice Organisations                          |
| <b>DoJ</b>            | Department of Justice                                   |
| <b>DRM</b>            | Designated Risk Manager (within PPANI)                  |
| <b>GP</b>             | General Practitioner                                    |
| <b>ISU</b>            | Intensive Supervision Unit                              |
| <b>MoJ</b>            | Ministry of Justice England and Wales                   |
| <b>LAPPP</b>          | Local Area Public Protection Panel                      |
| <b>NPT</b>            | Neighbourhood Policing Team (within the Police Service) |
| <b>NIHE</b>           | Northern Ireland Housing Executive                      |
| <b>NIPS</b>           | Northern Ireland Prison Service                         |
| <b>PBNI</b>           | Probation Board for Northern Ireland                    |
| <b>OIU</b>            | Offender Investigation Unit (within the Police Service) |
| <b>Police Service</b> | Police Service of Northern Ireland                      |
| <b>PPANI</b>          | Public Protection Arrangements Northern Ireland         |
| <b>PPT</b>            | Public Protection Team (within PPANI)                   |
| <b>SOPO</b>           | Sexual Offences Prevention Order                        |
| <b>SP</b>             | Supporting People                                       |
| <b>sROSH</b>          | Significant Risk of Serious Harm                        |

# CHIEF INSPECTOR'S FOREWORD

Having a home when you leave prison is a key determinant for successful rehabilitation and preventing further offending. Approved premises and the dedicated people who work in them have a vital role in our community. They provide a safe place for those who need additional supervision to manage their risk and keep the public safe immediately following their release from prison. But they are meant to be a place of transition not a permanent home nor a sticking plaster for a housing shortage or effective risk management in the community.

We carried out this inspection at the request of the then Minister of Justice. It was the first full inspection of all approved premises simultaneously in nearly a decade and gave us an opportunity to review the authorities and arrangements for carrying out these inspections. I have asked the Department of Justice to progress a legislative amendment that clarifies the inclusion of approved premises inspections in our statutory remit. Obviously, the current lack of a Northern Ireland Assembly and legislature, never mind a suitable draft Bill and slot on a legislative programme, means that will not happen soon. Nevertheless, it is something we aspire to in the future and will not lose sight of.

The number of different voluntary and community sector organisations with varying staffing models providing services to increasingly complex and challenging service users across Northern Ireland means that a shared vision and strategy for service demands, quality delivery and improved outcomes is needed.

Committed staff and good teamwork in approved premises and strong links with other approved premises as well as effective partnerships and collaboration with local Probation Officers, Police Officers, Northern Ireland Housing Executive staff and others was encouraging.

Staff in approved premises are interacting with service users every day so it makes sense that they need to know service users risk profiles and better contribute to Probation caseplans and local public protection arrangements to improve risk management and support service user resettlement.

While approved premises were sensitive to the perceptions of the communities they were present in, there was an opportunity to raise awareness within and beyond the criminal justice system about what they do and the outcomes they achieve. This inspection report will help with that but further steps should be considered.

The strategic recommendation in this report aims to enable existing partnerships to be further strengthened under a framework, shared and understood by all, that enables approved premises to develop their services and formalise the important contribution they make in the criminal justice system.

This would support any future Department of Justice preventing reoffending strategy and reflect the important role approved premises play now and how this could be developed.

This inspection was led by Maureen Erne supported by James Corrigan, Rachel Lindsay, Dr Roisin Devlin and Muireann Bohill and I am grateful for all their work.

My thanks also to the managers, staff and service users in all the approved premises we visited and spoke to during this inspection. Also, to the staff and officers in the Northern Ireland Housing Executive, the Probation Board for Northern Ireland, the Northern Ireland Prison Service and Police Service of Northern Ireland who assisted this review.

**Jacqui Durkin**

Chief Inspector of Criminal Justice  
in Northern Ireland

**March 2023**



# KEY FACTS: 2021-22

**7** Number of approved premises in Northern Ireland

**91** Number of approved premises' beds

**2** Number of approved premises that accommodate women

**4** Number of approved premises which only accommodate individuals referred by the Probation Board for Northern Ireland

**90%** Average occupancy rates of approved premises (Probation only referrals)

**£2.88**  
MILLION<sup>1</sup>

Funding provided by Supporting People, Northern Ireland Housing Executive

**6%** Proportion of all immediate custody releases required to reside at an approved premise (86 of 1,337)

**81** Number of residents who successfully moved on from an approved premise

**122**

Number of new residents referred to an approved premise

**6%** Proportion of approved premises' residents who were recalled to custody (10 of 176)

**75%** Proportion of residents who were assessed as high likelihood of reoffending when referred to an approved premise (91 of 122)

**29%** Proportion of referrals subject to Public Protection Arrangements Northern Ireland (34 of 122)

**11** Average weeks stay at an approved premise (range 4-26 weeks)

<sup>1</sup> This figure is the total Supporting People funding provided and includes the funding provided to those premises which accept other homeless clients in addition to those referred by the Probation Board for Northern Ireland.

# EXECUTIVE SUMMARY

Having accommodation on release from custody is one of the key elements which supports people leaving prison desist from offending and contributes to their rehabilitation. For some people where there are concerns about their risk of serious further offending, there are additional considerations about how the public will be protected in the early stages of their release. Approved premises provide short term accommodation for such people to help them make a successful transition from custody to community in a structured and supportive environment.

In this review Criminal Justice Inspection Northern Ireland (CJI) examined the contribution approved premises made to resettlement, rehabilitation and public protection outcomes in Northern Ireland. We also assessed the role of criminal justice organisations, including the Probation Board for Northern Ireland, the Northern Ireland Prison Service and the Police Service of Northern Ireland in supporting the work of approved premises.

It has been almost 10 years since CJI conducted its last thematic review of approved premises although a series of unannounced visits had been conducted by Inspectors in the intervening period, and other thematic inspections had touched on aspects of the work of approved premises. CJI recognise that the work of approved premises is challenging both in terms of the risks and complex needs of the people that reside there but also the wider context in which they operate. Approved premises provide an essential service to the criminal justice system.

The learning identified in this review aims to support the strategic development of the service and enhance operational practice.

The findings are reported under Strategy and Governance, Delivery and Outcomes.

## Strategy and Governance

The development of approved premises provision had evolved over time. There was strong evidence that approved premises operated in line with the vision and ethos of the voluntary sector organisations who managed approved premises and day-to-day operational practice was good. However, there was a lack of clarity around ownership of vision and strategy for the development of approved premises and around lines of accountability in respect of their role in supporting the criminal justice system. Inspectors did not see evidence of how demand for this service was being monitored and planned at a strategic level and how service delivery was being developed to meet the assessed risks and needs of service users.



Criminal justice agencies did not have a role in monitoring the quality of service provided by approved premises or what they were achieving. Working relationships between approved premises and those agencies directly involved with their work were good, but the role was less well understood by wider stakeholders and among some staff in criminal justice organisations. Inspectors found there were opportunities to enhance training for approved premises staff and increase awareness among criminal justice practitioners and stakeholders about the specific role of approved premises.

### Delivery

Referrals mostly came to the approved premises weekly allocation panel on a timely basis and the quality of information submitted had improved. At the time of the Review, demand for places was high, decisions about placement were being taken close to planned release dates and allocations were mostly made on the basis of where a bed was available. There was no separate provision for women and the approved premises were having difficulty in supporting the needs of people with underlying health conditions. As priority was given to those subject to licence, sufficient places were not available, at the time of the inspection, to support the testing of long-term prisoners at the latter stage of their sentence.

Often those released from prison could not be told where they would be living until shortly before their release and there were therefore consequential impacts on processes to support their transition from custody. Issues identified in previous inspections about continuity of medication, registration with general practitioners, availability of photographic

identification, access to benefits and bank accounts at the point of release persisted despite work taken forward by the Northern Ireland Prison Service to improve this.

Approved premises' staff Inspectors met were inspiring, caring people and highly committed to their work. Service users spoken to mostly reported very positive relationships with approved premises staff and we observed this too. Approved premises had needs and support plans in place but Inspectors did not see strong evidence of how these linked to the Probation Board for Northern Ireland caseplans and we found that approved premises were not fully conversant with the current risk profile of residents. Inspectors also felt that approved premises staff should have a greater involvement in public protection arrangements in support of their role. Inspectors saw evidence of good monitoring and supervision provided by approved premises staff and timely communication of relevant issues to supervising Probation Officers.

The delivery of services had been impacted during the COVID-19 pandemic and were recovering but not all services and programmes had resumed. Homelessness inclusion nurses were now supporting approved premises and this service was very good but accessing timely mental health and addictions support in the community was an issue. Move-on planning could be improved but accessing suitable sustainable accommodation in the community was challenging especially set against the wider issues in the housing sector in Northern Ireland. A number of residents were spending too long in approved premises.

## Outcomes

Approved premises provided an invaluable service to the criminal justice system in terms of public protection and enforcement. Data provided by the Probation Board for Northern Ireland demonstrated that the majority of residents occupying approved premises beds were assessed as high likelihood of reoffending, almost one third were assessed as posing a significant Risk of Serious Harm and approximately one third were subject to Public Protection Arrangements Northern Ireland. While the proportion of residents recalled to custody was higher than the average recall rate, this was not unexpected given the risk and needs profile of residents referred to this service. Effective systems were in place to monitor the behaviour of residents and there was evidence of alternatives to recall appropriately being considered and implemented to sustain people living in the community. There was a low level of serious further offending involving approved premises' residents.

While there was evidence available in individual cases and much anecdotal material reported to Inspectors about outcomes in terms of resettlement and rehabilitation, this was an undeveloped area in terms of measurement and monitoring. The lack of sustainable longer-term accommodation was hampering efforts to successfully support residents move on from approved premises beds when they no longer required to live there for risk management purposes.

# RECOMMENDATIONS

## STRATEGIC RECOMMENDATION

### STRATEGIC RECOMMENDATION 1

Within nine months of the publication of this report, the Department of Justice, in conjunction with the Probation Board for Northern Ireland, the Northern Ireland Prison Service, the Police Service of Northern Ireland, and the Northern Ireland Housing Executive and organisations managing approved premises, should:

- develop a strategic framework which clarifies the vision, strategy, oversight arrangements and respective organisations' roles and expectations for approved premises;
- review the current delivery model to ensure that systems are in place to periodically monitor and respond to demand and supply of approved premises places;
- clarify the preferred staffing model to inform future funding requirements;
- develop and implement a strategic plan for joint training and produce and deliver a plan to enhance understanding of the role of approved premises among practitioners and stakeholders; and
- identify a strategic mechanism to measure and monitor the quality of service delivery of resettlement, rehabilitation and public protection outcomes.

(paragraph 2.52)

## OPERATIONAL RECOMMENDATIONS

### OPERATIONAL RECOMMENDATION 1

Within three months of the publication of this report the Northern Ireland Prison Service should engage with the Probation Board for Northern Ireland to remove barriers to resettlement such as provision of photographic identification, and the creation of email accounts and bank accounts prior to discharge from custody to improve outcomes for those transitioning from custody to approved premises.

(paragraph 3.9)

## OPERATIONAL RECOMMENDATION 2

Within six months of the publication of this report, the Probation Board for Northern Ireland, in conjunction with approved premises providers, should clarify its expectations in relation to:

- case planning to ensure that approved premises' key workers are closely involved in risk and need assessment and management processes; and
- move-on planning to ensure there is a clear focus on the timescale, actions and progress required to move on from an approved premises placement.

Both should be reflected in the Probation Board for Northern Ireland case plans and approved premises support plans.

**(paragraph 3.29)**

## OPERATIONAL RECOMMENDATION 3

The Joint Chairs of the Public Protection Arrangements Northern Ireland Policy and Practice Sub group should immediately ensure that approved premises key workers are fully involved in public protection risk assessment and management arrangements.

**(paragraph 3.32)**

# CHAPTER 1: INTRODUCTION

## APPROVED PREMISES EXPLAINED

- 1.1 Approved premises act as a transition or half-way house between prison and settlement in the community for high risk offenders leaving custody. They have two main roles:
- to help rehabilitate and resettle some of the most serious offenders leaving custody; and
  - to make sure the public are protected in the offenders' early months in the community.
- 1.2 All residents are supervised by the Probation Board for Northern Ireland (PBNI) and managed in accordance with PBNI practice standards.<sup>2</sup> A proportion may also be subject to monitoring by the Police Service of Northern Ireland (Police Service) and under the Public Protection Arrangements Northern Ireland (PPANI).<sup>3</sup>
- 1.3 There are seven approved premises across Northern Ireland which currently provide 91 places. Two premises accommodate women in mixed gender establishments. Four accept only those individuals referred directly by the PBNI; the remaining three also provide accommodation for people who are homeless (referred to as generic beds). There are other hostels across Northern Ireland which provide accommodation to support the management of offenders, including individuals being supervised by the PBNI, but what distinguishes them from approved premises is that they primarily address a homelessness rather than a risk management need.
- 1.4 Approved premises are staffed 24 hours a day and are managed by voluntary and community sector organisations. They are funded by the Northern Ireland Housing Executive (NIHE) under the Department for Communities Supporting People (SP) Programme<sup>4</sup> and are designated as 'short term' supported accommodation for up to a maximum of two years.

2 Probation Board Practice Standards provide expectations of what is required, and by whom, in relation to all aspects of probation practice. The most up to date version of the standards (May 2021 v1.7) have not been published.

3 The Public Protection Arrangements for Northern Ireland are multi-agency arrangements introduced to provide effective assessment and management of the risks posed by certain sexual and violent offenders, including individuals who have committed violent offences within a domestic setting.

4 The Supporting People Programme helps people to live independently in the community. The programme grant funds 86 delivery partners that provide over 850 housing support services across Northern Ireland.

- 1.5 Table 1 summarises some key details about the approved premises in Northern Ireland.

**Table 1: Key details of approved premises in Northern Ireland**

| As of 31 May 2022              | Bonds Hill                       | Centenary House    | Dismas House | Edward Street                    | Innis Centre   | MUST           | Thompson House  |
|--------------------------------|----------------------------------|--------------------|--------------|----------------------------------|----------------|----------------|---|
| <b>Management organisation</b> | Simon Community Northern Ireland | The Salvation Army | Extern       | Simon Community Northern Ireland | Extern         | Extern         | Council of Social Witness, Presbyterian Church in Ireland |
| <b>Location</b>                | Derry/Londonderry                | Belfast            | Belfast      | Portadown                        | Belfast        | Cookstown      | Belfast   |
| <b>Premises Owner</b>          | Choice Housing                   | The Salvation Army | Extern       | Choice Housing                   | Radius Housing | Choice Housing | Radius Housing  |
| <b>PBNI places</b>             | 4                                | 13                 | 14           | 15                               | 20             | 6              | 19  |
| <b>Accommodate females</b>     | ✓                                | ✗                  | ✗            | ✗                                | ✗              | ✓              | ✗   |
| <b>Access</b>                  | Mixed                            | Mixed              | PBNI only    | PBNI only                        | PBNI only      | Mixed          | PBNI only   |

### Why this thematic review?

- 1.6 CJI published two previous reports on approved premises, in 2008 and 2013, and in the intervening period Inspectors conducted a series of unannounced visits to assess experiences and outcomes for those placed there. The last of these visits were conducted in late 2019/early 2020. CJI inspections of *Resettlement in the Northern Ireland Prison Service (2018)*,<sup>5</sup> *Public Protection (2019)*<sup>6</sup> and *Probation Practice (2020)*<sup>7</sup> also considered matters related to approved premises.
- 1.7 Despite the role that approved premises have in supporting the criminal justice system to manage high risk offenders transition from custody to the community, and notwithstanding the previous inspection activity conducted by CJI, the inspection of approved premises is not currently included within CJI’s statutory remit. This has been a longstanding issue and CJI’s 2013 report recommended that the Department of Justice (DoJ) should clarify the arrangements for the inspection of approved premises but no progress was made.
- 1.8 During 2021 CJI reviewed its approach to the inspection of approved premises, including raising the issue of our role in inspecting approved premises, with the DoJ. The DoJ is now taking forward work to resolve this. For the purposes of this thematic review, the then Minister of Justice requested CJI to conduct a review under Section 47(4) of the Justice (Northern Ireland) Act 2002 in May 2021.

5 CJI, *Resettlement: An Inspection of Resettlement in the Northern Ireland Prison Service, May 2018* available at <http://www.cjini.org/getattachment/1ded7a6c-034e-4a62-bf02-96ee30584645/report.aspx>

6 CJI, *Lawful Duty: Public Protection Inspection III: A thematic Inspection of the Public Protection Arrangements for Northern Ireland October 2019* available at <http://www.cjini.org/getattachment/f7eba58b-6973-484d-a5b3-b9740f0a9184/report.aspx>

7 CJI, *Probation Practice in Northern Ireland, An inspection of the Probation Board for Northern Ireland.* available at <http://www.cjini.org/getattachment/03375ddc-40ed-4359-9094-17eadd41b2ae/report.aspx>

1.9 This review provided a timely opportunity - following the review of our approach to inspecting approved premises and since the COVID-19 pandemic - to assess the contribution that approved premises made to resettlement, rehabilitation and public protection outcomes in Northern Ireland. Inspectors also wanted to assess what progress had been made against previous recommendations and issues which had been identified in unannounced visits.

### Legislation and policy framework

1.10 The Probation Board (Northern Ireland) Order 1982<sup>8</sup> set out the function of the PBNI in relation to the provision of premises for offender assistance and supervision. Article 4(2) stated that the PBNI may, with the approval of the DoJ (now), provide and maintain probation hostels and may enter into arrangements with voluntary organisations to provide and maintain such hostels. The PBNI adopted the model of externally managed establishments and this is the legislative basis for the current provision. The DoJ did not formally approve hostels to operate as approved premises.

1.11 The PBNI Case Management Standards (community) set out practice standards for approved premises. These document the expected level of contact between supervising Probation Officers and approved premises staff and standards relating to induction, caseplan and conduct of tripartite meetings.

1.12 As the approved premises are funded by SP, they are required to adhere to SP guidance and policy framework, and are subject to accreditation by the NIHE.

1.13 A discussion of the strategy and governance arrangements is set out in Chapter 2 of this report.

### Background to this review

1.14 The review adopts the CJI Inspection Framework. The three main areas examined were: Strategy and Governance, Delivery and Outcomes. Equality and Fairness form an integral part of any inspection undertaken by CJI and these themes were also examined.

1.15 Inspectors assessed the approved premises against a set of criteria<sup>9</sup> developed by CJI and published on CJI's website. The criteria, drawn from previous inspections of approved premises and informed by His Majesty's Inspectorate of Probation's inspection standards, effective practice guides and research, was used to assess the quality of work undertaken by approved premises.

8 *The Probation Board (Northern Ireland) Order 1982* available at <https://www.legislation.gov.uk/nisi/1982/713>

9 *CJI, Review Framework, Criteria for assessing how effectively approved premises contribute to resettlement, rehabilitation and public protection outcomes in Northern Ireland, May 2022* available at: <http://cjini.org/getdoc/65da33f7-c2c3-40a3-8660-6db9f9cbfd7b/CJI-AP-Review-framework-23052022.aspx>

### The 2022 review

- 1.16 The terms of reference for the review were published in May 2022 (see Appendix 1) and fieldwork was conducted from June to September 2022.
- 1.17 Full details of the methodology for the review can be found at Appendix 2. Prior to the commencement of fieldwork, the seven approved premises, the PBNI, the Police Service and the NIPS completed a self-assessment against the framework and assessment criteria. This included providing supporting documentation and data.
- 1.18 CJI met with seven stakeholder organisations prior to the development of the terms of reference and commencement of fieldwork and their contributions helped inform the focus of the review.
- 1.19 The visits to the approved premises were unannounced and were conducted over a 22-day period during June and July 2022. During each visit Inspectors spoke with staff, managers and residents. Inspectors viewed the facilities, examined records and conducted a number of in-depth case reviews. Several of the case reviews are highlighted in the body of the report. The names of people used in the case reviews have been changed and details of the placement and dates have been omitted to protect the identity of the residents.

### Previous inspection recommendations

- 1.20 A list of recommendations made by CJI in previous inspections of approved premises and in other CJI reports is included at Appendix 3. At the last inspection we made five recommendations. In the course of this review we assessed that two of the previous recommendations had been achieved, one had been partially achieved and two had not been achieved. Comment on recommendations still relevant at the time of this review is reflected in the body of this report.

### The approved premises population

- 1.21 Data provided by the PBNI and the approved premises showed a reduction in the number of referrals to approved premises over the last three financial years (see Table 2). This was believed to be as a consequence of the COVID-19 pandemic when there were fewer movements to and from approved premises. Data on the number of referrals refused or where a place was not available was not collated but the PBNI and approved premises estimated the numbers of such cases were very small.
- 1.22 The majority of people referred to approved premises were assessed as presenting a high likelihood of reoffending and just over a third of all referrals were subject to public protection arrangements (35%, 199 of 562). The majority of those referred were subject to post release supervision on licence (92%, 518 of 562).



**Table 2: Profile of new referrals to approved premises for 2019-20 to 2021-22**

|   | 2019-20      | 2020-21       | 2021-22      |
|---|--------------|---------------|--------------|
| <b>Number of new referrals</b>  | 273          | 167           | 122          |
| <b>Assessed as high likelihood of reoffending</b>                               | 196<br>(72%) | 126<br>(75%)  | 91<br>(75%)  |
| <b>Assessed as Risk of Serious Harm</b>   | 103<br>(38%) | 27<br>(16%)   | 26<br>(21%)  |
| <b>Subject to PPANI</b>   | 91<br>(33%)  | 73<br>(44%)   | 35<br>(29%)  |
| <b>Average duration of residence in weeks (Range between approved premises)</b> | 13<br>(3-25) | 16<br>(10-23) | 11<br>(4-26) |

Data provided by the PBNI.

- 1.23 The average duration of stays at approved premises had increased during 2020-21 which aligned with the reduced movement during the COVID-19 pandemic. While the average duration of stays was 11 weeks during 2021-22, some residents spent considerably shorter and longer periods at approved premises (see paragraphs 3.56-3.62 -transition from approved premises and accommodation).

## CHAPTER 2: **STRATEGY AND GOVERNANCE**

### **LEADERSHIP AND PARTNERSHIPS**

*The leadership of criminal justice organisations (CJOs) and approved premises enables the delivery of a high quality, individualised and responsive service to residents of approved premises.*

#### **Vision and strategy**

- 2.1 As recommended in a previous review by CJI<sup>10</sup>, each organisation had a statement of purpose for its approved premise(s). These differed but generally set out the ethos of the organisation, described the premise(s), how referrals were made and set out the function of the approved premise(s). Probation practice standards specified the tasks to be completed and information sharing agreements were in place between the PBNi and the approved premises. These included a description of the role of approved premises and were in the process of being updated. As approved premises were funded by SP to provide housing support, they were subject to SP guidance and monitoring. The PPANI *Manual of Practice* detailed the risk management responsibilities of approved premises in relation to residents who were subject to public protection arrangements. PPANI's Strategic Management Board had set a business plan objective to identify and develop solutions concerning accommodation issues for PPANI prisoners.
- 2.2 The vision and ethos of each organisation operating approved premises was clearly evident during the inspection and was reflected in the documentation examined, interviews with staff and observations made. There was, however, no overarching vision or strategy relating to approved premises. Instead policies and practice had evolved over time in response to events, accreditation and inspection. Coupled with this, there was a lack of clarity about who was responsible for setting direction and strategy and lines of accountability were not always understood. The PBNi previously had an accommodation strategy in place (2012) but had decided that as the organisation did not manage or fund approved premises, such a strategy was no longer required. The strategy was helpful in defining how the PBNi supported and worked with others to develop accommodation options for its service users.

10 CJI, *Inspection of Approved Premises, 17 July 2008*, available at: <http://www.cjini.org/getattachment/4a0c3240-f23b-42c8-8f62-2f8e86b098bb/Inspection-of-Approved-Premises-July-2008.aspx>

- 2.3 Although the term 'Approved Premises' had been in common usage for many years and implied some type of formal approval or accreditation in Northern Ireland; this was not the case. In England and Wales similar premises operated to regulations and specifications set by the Ministry of Justice (MoJ). The MoJ Approved Premises Public Protection and Regimes Specification defined the service requirements including the required outcomes and output. Other than the PBNI standards there was no similar specification defined service requirements in Northern Ireland.
- 2.4 The 2008 CJI *Inspection of Approved Premises* classified approved premises as 'Hostels which receive Supporting People funding specifically for offenders, allocate bed spaces for criminal justice referrals and apply PBNI Standards'. The 2012 PBNI Best Practice Framework incorporating Northern Ireland Standards referred to 'approved hostels' which were defined as 'a hostel place to which PBNI can refer in its own right and, where required and relevant, on behalf of the Northern Ireland Prison Service (NIPS), persons who need supported and supervised accommodation'.
- 2.5 Those who were directly involved in the operation of approved premises clearly understood the role, distinct purpose and operating procedures within the criminal justice system. The distinction between approved premises and other hostels was less well appreciated by other practitioners within CJOs and some stakeholders. In addition there was less understanding of the strategic management and oversight arrangements for approved premises.
- 2.6 A senior hostel managers' forum, chaired by the PBNI, met quarterly. A terms of reference was being developed and included an objective to provide strategic oversight to practice issues and ensure consistency between approved premises. The group had not met regularly due to the impact of the COVID-19 pandemic and availability of attendees. The minutes reviewed evidenced discussion of learning and continuous improvement and of some practice issues, but did not address broader strategic matters such as demand for the service, capacity, ongoing needs of service users, performance monitoring or assessment of outcomes in relation to approved premises' placements.
- Risk management**
- 2.7 Approved premises completed and implemented risk management plans and support plans in line with their respective risk management policies and procedures. These largely drew on information gathered at assessment when individuals first arrived at the approved premises, as well as, that provided by the PBNI in approved premises application forms, copies of licences and other orders, and information exchanged at initial induction and tripartite meetings with supervising Probation Officers.

2.8 Inspectors observed that information about risk and needs was shared at the point of entry to approved premises but thereafter approved premises were not fully sighted of assessments of likelihood of reoffending, risk of serious harm and public protection risks. There was limited evidence of engagement of approved premises staff in Local Area Public Protection Panel (LAPPP) meetings. It was not fully evident that information required to manage risk was effectively shared between probation and approved premises nor how risk management and support plans developed by approved premises related to PBNI case plans. The two appeared to largely operate in parallel. At the time of the inspection approved premises were not fully conversant with the current risk profile of residents as assessed by the PBNI. This had potential implications for how effectively they were monitoring and supporting service users.

2.9 CJI's *Inspection of Probation Practice in Northern Ireland*<sup>11</sup> in 2020 found deficiencies in the information shared with approved premises since the introduction of the General Data Protection Regulations (GDPR) and recommended that the PBNI should review the effectiveness of its approach to information sharing with partner organisations who provided services at approved premises. While the quality of information had improved, the current arrangements were not fully satisfactory (see paragraphs 3.10-3.13 - sufficiency of information).

2.10 The risks to the service provided by approved premises were well understood and as problems arose these were addressed on an individual basis. There was no strategic analysis of risks by CJOs, the NIHE and approved premises to inform service delivery conversations.

### **Effectiveness of the delivery model**

2.11 The current service had evolved over time. Referrals and allocation of approved premises places were managed at a weekly hostel allocation panel chaired by a PBNI Area Manager and attended by approved premises' managers. This arrangement sat outside the normal homelessness allocation procedures operated by the NIHE.

2.12 The current number of approved premises places was 91 with two services providing accommodation for women. There were mixed views on whether this number of places was sufficient to meet demand and needs of service users. The majority felt that the current provision was insufficient but at various times different services (those located outside Belfast) had also experienced difficulty in filling vacancies and in some instances, the PBNI beds had been given over to generic homeless service users.

11 CJI, *Probation Practice in Northern Ireland, An inspection of the Probation Board for Northern Ireland* available at <http://www.cjini.org/getattachment/03375ddc-40ed-4359-9094-17eedd41b2ae/report.aspx>

- 2.13 There was no detailed forecast of the future demand for approved premises places nor of the needs of service users to ensure that placements could be correctly targeted as recommended in our review of approved premises in 2013. Services reported a change in the profile of residents with a greater number now presenting with more complex needs including physical and mental health care needs. There was no specialist provision in any of the approved premises to support the management of offenders with suspected mental health or personality disorders as currently existed in some approved premises in England and Wales. A much greater harm reduction approach<sup>12</sup> was being adopted by approved premises and there was heightened risk management in terms of drug and alcohol misuse.
- 2.14 There were particular challenges in mixed hostels which provided services for both generic homeless and the PBNI service users and questions about whether the needs of women could be effectively met in a mixed gender premise. One service had made a proposal to its senior management team about making provision for women, which was commendable. However, on this and the above issues, there was no strategic discussion or planning about how the current delivery model should evolve to ensure that placements were correctly targeted and could meet the needs of service users.
- 2.15 In the course of the review the SP team raised a number of questions with CJI about different aspects of the current operating model. These included:
- the current definition and allocation of available beds which restricted some individuals assessed by the NIHE as being high risk and as being in priority need accessing approved premises beds;
  - the role of hostel managers in assessing prisoners prior to their release from custody;
  - the expected qualification levels for staff working at approved premises and the appropriateness of sleeping night staff which was reflected in the wide variance in SP funding paid to different approved premises;
  - the lower occupancy rates of approved premises compared with other SP funded hostel services;
  - the reported increased complexity of residents; and
  - the impact on staffing resources of the need to support compliance with orders and licences.
- 2.16 That such questions exist and have not satisfactorily been resolved points to the need for strategic discussions between the DoJ, the PBNI, the NIPS and DfC with the NIHE, and approved premises service providers to discuss and agree aspects of the preferred delivery model.

12 A harm reduction approach is based on the idea that an all or nothing approach to recovery is not going to work for everyone. It works on the assumption that some improvement will be better than no improvement.

2.17 At the time of the inspection demand for places was high and there was a continual process of prioritising referrals on a weekly basis with allocations largely being determined by which premise had a space available at any one point in time. There was an ongoing tension between maintaining high occupancy levels (from a funding perspective) and holding beds to support a smoother transition from custody to community.

2.18 The service delivery model operated at the seven approved premises differed. There were different staffing models in place, with a number being social work led; some provided full catering services while others did not provide any meals; service charges for residents varied from £10 per week in one approved premise to £38.92 in another, and there were different levels of funding provided through the SP programme. There was no minimum service specification to ensure that the delivery model was broadly consistent across the different approved premises, and that approved premises were adequately resourced to deliver consistent levels of service. SP had previously led work to standardise funding arrangements but this had not progressed and providers were concerned that a one size fits all approach would not be workable, and that the current funding model did not adequately reflect the demands of criminal justice referrals.

2.19 Contingency plans were in place to manage emergency referrals and this was set out in the PBNi guidance notes.

2.20 There were some limitations in the current delivery model which were highlighted during this review which had implications for how effectively high risk individuals could be managed. These included situations where approved premises were not prepared to accept a referral, where a bed was not available at the point of release, when individuals had been evicted from an approved premise bed and in cases where an individual had completed their sentence in custody and were no longer subject to probation supervision. The latter were not eligible to be considered by the approved premise panel as the individuals were not subject to probation supervision. Data was not available to examine the prevalence of these situations which was a gap.

### **Continuous improvement**

2.21 Organisations providing approved premises services had processes in place to review and monitor performance. Experienced and skilled approved premises managers led continuous improvement discussions and supported practice development within their respective services. Team meetings and staff engagement processes mostly supported this. Learning from incidents, complaints and internal audits was mixed although some providers were further developing their processes to address this. Generally we observed open and supportive environments within approved premises which supported reflective practice. Incident management procedures were in place and copies of critical incident reports were shared with the PBNi although there was no overall monitoring of incidents across approved premises services. While practices at individual approved premises aimed at informing continuous improvement (as described above) were generally good, they did not appear to be being used at a strategic level to effect continuous improvement of the service as a whole.

## Practice example – incident monitoring

The Simon Community had introduced a new system for monitoring incidents. Incidents were logged each month against the following categories: overdoses, hospitalisation, violence, general incident, self-harm, child safeguarding and criminal damage. The system provided a useful overview of incidents that could facilitate monitoring of changes and trends within the different services provided by the Simon Community. The statistics were collated and discussed at the monthly managers meeting and learning informed training and development or longer-term planning.

*A strategic approach to incident monitoring across approved premises could help enhance service delivery and inform service development.*

- 2.22 Approved premises services were required to submit quarterly performance reports on housing outcomes and indicators such as occupancy to SP.
- 2.23 The PBNI did not have a role in monitoring the quality of service delivery or outcomes for approved premises' residents and there was no specific monitoring of adherence to PBNI Practice Standards at approved premises. Data Inspectors requested for the inspection was not routinely collated or monitored by the PBNI or approved premises. There was a view that CJI and the DoJ were ensuring the compliance of services. While CJI conducted periodic inspections this was not a substitute for effective governance, regular review and performance monitoring to drive service improvement.
- 2.24 Learning from serious case reviews and inspection was communicated to senior hostels managers at the forum meetings but there was no effective monitoring of responses or actions. The forum was also the mechanism for resolving issues as they arose between criminal justice partner agencies and approved premises although the PBNI was the only criminal justice partner agency represented at that forum. Approved premises were represented at the PPANI strategic group and sub-groups by the PBNI officials.
- 2.25 The public health restrictions imposed in response to the COVID-19 pandemic had impacted on the conduct of regular meetings with service users at approved premises although one service had not held a client meeting since 2018. The records viewed of these meetings were mostly instructional around adherence to rules and there were some discussions around activity provision. There was limited use of user satisfaction surveys to gather the views of service users to inform service delivery. While the PBNI had a number of service user forums to inform practice, none were specific to approved premises. There was an opportunity for stronger engagement with service users to inform service delivery.



## STAFF

*Criminal justice organisations and approved premises' staff are enabled to deliver a high quality, personalised and responsive service to residents of APs.*

### Staffing and case levels

- 2.26 Across approved premises there were generally stable staffing levels although most were carrying vacancies at the time of the inspection. Only one service had a full complement of staff. Shortfalls were being filled by emergency support staff and/or Agency staff. All premises cited differential rates of pay between private and statutory services as an issue in recruiting and retaining staff.
- 2.27 At one approved premise, however, staffing had reached a critical level which had directly impacted the availability of this service for a significant period. Plans were in the process of being implemented to recruit staff at a higher grade to address the staffing shortfalls.
- 2.28 Key worker caseloads were manageable and there was good continuity of key workers. Where changes to key workers were required, there was evidence of good handover arrangements. Probation Officer caseloads were high and exceeded agreed levels across all disciplines (generic, the Intensive Supervision Unit (ISU) and the co-located Public Protection Team (PPT)). The PBNI were experiencing shortfalls in staffing and there were ongoing recruitment and retention issues. This had resulted in gaps in the continuity of Probation Officers due to absences and vacancies.
- 2.29 The PBNI provided additional monies to approved premises to fund enhanced staffing levels where it was required in individual cases.

### Staff skills and profile

- 2.30 Staff and managers we met at approved premises were inspiring and highly committed to their work. Most staff reported feeling equipped for their role and of having good access to in-house training.
- 2.31 Staff had a range of qualifications and experience. A social work lead model was in place at three of the seven approved premises while staffing in the others was social care informed. All staff were registered with the Northern Ireland Social Care Council.
- 2.32 Cases were mostly allocated to key workers on the basis of risk and needs of service users.



### Supervision, learning and development and staff engagement

- 2.33 Approved premises provided a range of learning and development opportunities to their staff which largely drew on the resources of their parent organisations. This included training in overdose and needle exchange, administration of naloxone, critical management and trauma informed practice. Good systems were in place to record staff training and monitor delivery.

#### Practice example – training bites

At Centenary House a Harm Reduction Specialist Worker had introduced training bites for staff. The worker gathered information from handovers and discussions with outreach teams and sought advice from a Team Leader about the issues which had been identified and how to address them. During the week of the inspection visit the session was on hoarding medication and the week before it had focussed on crack cocaine use. Good support was provided by the Public Health Agency's drug outreach team who advised on drugs currently on the street and how best to monitor service users who presented as being under the influence. The training bites were part of a wider approach to support staff adopt a harm reduction approach.

- 2.34 There was no assessment of specific training needs for approved premises' staff working with this high risk group of offenders and little criminal justice specific training which was a gap in provision. Most of the service providers sourced training in the public protection arrangements from the PPANI Co-ordinator and some sessions were ongoing at the time of the inspection. Staff members who took part in this training found it particularly useful and follow-up sessions were planned at one approved premise to explore further questions and issues raised by staff during the training.
- 2.35 Opportunities for joint training with the PBNI staff on criminal justice specific matters had been identified in self-assessment responses.
- 2.36 Each approved premise had arrangements in place to provide supervision to staff and staff reported drawing a lot of support from their peers. Feedback on the effectiveness of supervision was mixed but the importance of maintaining these sessions was well understood by staff and managers.

### Practice example - staff well-being support

The Simon Community had appointed well-being practitioners to support residents. At Portadown the well-being practitioner had made up self-care packs for staff and engaged in team meetings to provide reflective learning support. The Simon Community were making a big investment in staff care and with a particular emphasis on compassion fatigue. A recent senior management roadshow where staff had the opportunity to engage with senior leaders had been well received. Staff reported feeling empowered and confident to raise ideas for service development and improvement. Induction to the service had been tailored to specifically reflect the requirements of working in approved premises as opposed to other services.

- 2.37 As with client meetings, the frequency of staff meetings at approved premises had been impacted during the COVID-19 pandemic. At the time of the inspection these were taking place more regularly and they provided staff with opportunities to raise issues and contribute to discussions about service improvements.

## SERVICES

*A comprehensive range of high quality services is in place to support the risks and needs of residents of approved premises.*

### Volume, range and quality of services

- 2.38 Staff in approved premises worked with a range of service providers to support residents. Key workers provided advice and support in a number of areas including access to housing, benefits and training and employment. Referrals could be made to other specialist services as required.
- 2.39 The provision of services was determined on a case by case basis drawing on individual risk and needs assessments. There was no strategic assessment of the needs of residents of approved premises to inform the development of services. Service delivery had been impacted during the pandemic when a range of service providers either suspended services or moved to remote working. At the time of fieldwork for the inspection, services were returning to face-to-face work but not all services had resumed.
- 2.40 The PBNI had funded some short programmes but these were not taken up by all providers. The closure of the Extern Works programme had significantly impacted the opportunities available for residents in Belfast based premises to engage in training and employment.

2.41 Homeless inclusion nurses were now actively involved in supporting residents and in some instances they had allocated days to visit specific services.

### **Effectiveness of relationships with service providers and other agencies**

2.42 Generally approved premises reported very positive relationships with CJOs, other statutory services and wider service providers in the community and voluntary sector.

2.43 As mentioned there had been a significant impact on how services were delivered during the COVID-19 pandemic but, at the time of fieldwork, this was largely recovering. Across the board, approved premises reported that they would like to see more face-to-face working by Probation Officers and other support services at approved premises. Even before the COVID-19 pandemic a trend for appointments to be held at the PBNi offices rather than at approved premises had started to emerge. From a PBNi perspective the impact of staff shortages had compounded this.

2.44 Good working relationships with the police, especially officers in Public Protection Units, were also reported but not all Police Officers who approved premises interfaced with had an understanding of their specific role in supporting risk management. There was limited direct contact between approved premises staff and the NIPS except for those staff working in its pre-release unit in Belfast. One CJO suggested that while individual relationships were good, there may be benefits in developing local stakeholder forum meetings to facilitate greater collaboration with agencies working in the locality of the approved premises. This was a very good suggestion and as well as enhancing communication could also contribute to addressing operational issues as they arose, for example, reporting of breaches of licences or issues around eviction and interfaces between hostel rules and licence conditions.

2.45 Engagement with communities in areas where approved premises were located was mixed. Given the nature of the work undertaken and high profile of individual residents, the approach was mostly to stay out of the public eye and deal with issues as they arose. Staff from one premise were very active in the local community; they were involved in a range of outreach programmes and community groups. These relationships had helped support residents settle and integrate better within the local community. The PPANI Communications Sub-group supported approved premises to manage relationships with the community and, where appropriate, had convened and taken part in public meetings with the assistance of neighbourhood policing colleagues and the PPANI Co-ordinator.

## INFORMATION AND FACILITIES

*Timely and relevant information is available and appropriate facilities are in place to support a high quality, individualised and responsive service to residents of approved premises.*

### Policies and guidance

- 2.46 A comprehensive range of policies and guidance were in place for approved premises staff and effective arrangements were in place to review and update these. This was largely driven by parent organisations and requirements of SP funding to have specific policies in place. Policies reviewed for the inspection were in date and generally reflected the ethos of parent organisations.
- 2.47 The PBNI had information sharing agreements in place with each approved premises service and these were in the process of being reviewed. They set out the principles, arrangements and requirements of the PBNI from bodies and organisations which processed data on its behalf. While the PBNI acknowledged that sharing information with the approved premises was critical to managing offenders, the processes for exchanging information were currently not fully satisfactory (see paragraph 3.10 – sufficiency of information).

### Premises

- 2.48 The seven premises were visited and a number of rooms and shared areas were viewed. The condition of each premise and facilities it provided varied. Most premises were showing signs of wear and tear and the standards of maintenance and cleanliness in some places was disappointing. Managers advised that the responsiveness of maintenance teams could vary, and depending on ownership of the building there could also be barriers to accessing funding for maintenance and refurbishment. At one allocation panel meeting observed by Inspectors it was reported that three rooms at an approved premise could not be used as they were awaiting essential repairs. The problems had been reported and the problems remained unaddressed after several weeks. This reduction in the number of available places was impacting the offer of placements at a time when there were very few other vacancies. This was not atypical and other services reported similar problems with the timeliness of requests for maintenance works.



2.49 Any issues with the condition of premises identified at individual locations were raised directly with managers. Residents at three locations had ensuite rooms and in the remainder, there were shared toilets and bathrooms. Major refurbishment plans were being drawn up at one location to meet Houses in Multiple Occupation (HMO) legislative requirements.



2.50 Each location had good security systems in place and the majority of staff and residents reported that they felt safe within the premises.

2.51 Not all locations had ground floor rooms or access to a lift and this limited facilities for those with mobility and other health care issues.

### Summary – strategy and governance

2.52 The existing system had evolved over time and there had been significant changes to the operating environment in the years since CJI first inspected approved premises. While Inspectors found day-to-day operational practice was good, there was not a clear vision and strategy in place to drive delivery and lines of accountability were unclear. The funding model had not changed in some time and although questions had been raised about different aspects of the existing delivery model, including the staffing model, these had not been satisfactorily addressed. There were not effective systems in place to monitor future demand for places and whether the existing service was and could effectively meet the needs of residents including an assessment of where services should be located.

The approved premises were funded as a housing support programme but this did not fully reflect the role of approved premises in supporting the delivery of resettlement, rehabilitation and public protection outcomes. That one service had been operating at a reduced capacity for a significant period, reducing the number of available approved premises places, indicated that contingency plans were not sufficiently robust. Apart from training in public protection there was no training provided by CJOs and there were gaps in understanding among some of those who engaged with approved premises of their specific role compared with that of other forms of temporary accommodation. CJOs did not routinely monitor the quality of service delivery at approved premises or what they were achieving. There were opportunities to better engage service users so that their views informed service delivery.

### STRATEGIC RECOMMENDATION 1

Within nine months of the publication of this report, the Department of Justice, in conjunction with the Probation Board for Northern Ireland, the Northern Ireland Prison Service, the Police Service of Northern Ireland, and the Northern Ireland Housing Executive and organisations managing approved premises, should:

- develop a strategic framework which clarifies the vision, strategy, oversight arrangements and respective organisations' roles and expectations for approved premises;
- review the current delivery model to ensure that systems are in place to periodically monitor and respond to demand and supply of approved premises places;
- clarify the preferred staffing model to inform future funding requirements;
- develop and implement a strategic plan for joint training and produce and deliver a plan to enhance understanding of the role of approved premises among practitioners and stakeholders; and
- identify a strategic mechanism to measure and monitor the quality of service delivery of resettlement, rehabilitation and public protection outcomes.



## CHAPTER 3: DELIVERY

### TRANSITION FROM CUSTODY

*Approved premises receive timely referrals and information prior to placement to support decision making and effective risk management and resettlement/rehabilitation.*

#### **Timeliness of information exchange**

- 3.1 Applications for approved premises' places were completed by Probation Officers (mostly based at prisons) and were considered at a weekly panel chaired by a PBNi Area Manager and attended by approved premises' managers. In accordance with the PBNi guidance, referrals were mostly submitted on a timely basis - at least four weeks in advance of release but no more than three months ahead. While Inspectors questioned the need for a small number of service users' cases examined as part of the review to be managed at an approved premise, generally the procedures in place were working to ensure that only those who required enhanced supervision and monitoring were being allocated places.
- 3.2 Inspectors observed three Panel meetings and reviewed a selection of minutes of Panel meetings between April and June 2022. On average 50 cases were considered at each meeting; the majority of whom were pending release subject to parole review and would be released on licence from custody. Approximately 30% of cases were life sentenced prisoners who required an approved premise place to support them being tested in the community before their release. Priority was being given to those being discharged from custody and the NIPS and the PBNi staff had been asked to prioritise the order in which places should be offered to those required to be tested in the community. Close attention was paid to the stage of review by Parole Commissioners and Probation Officers were expected to keep the Panel advised of the outcome of reviews by the single Commissioner and oral hearing and decision dates. Where Parole Commissioners had directed against release, cases were removed from the Panel list but could be re-referred at a later stage. This was working reasonably well, although at each meeting the status of some cases was unknown despite efforts to have updated information provided to the Panel.

- 3.3 In the majority of cases discussed, the allocation of a place was carried forward from one week to the next if release was not due before the next Panel meeting was to take place, or due to the lack of bed availability. Individual approved premises undertook to look at particular cases pending bed availability. The minutes did not explain the rationale behind decisions to allocate places to one premises or another but in addition to risk other criteria was taken into consideration including the availability of beds, the service users' preference, the availability of support networks and the locality of any victim.
- 3.4 The minutes of Panel meetings were shared with Probation Officers by email but often they did not provide confirmation of spaces having been allocated which meant that the PBNi supervising officers were not in a position to confirm with service users that accommodation had been secured.
- 3.5 Where gaps in information presented to the panel were identified, or if an inappropriate referral had been submitted, the Panel chair addressed this either before or after the panel meeting.
- 3.6 The lack of bed availability hampered meaningful discussion about whether placements could be correctly targeted and allocations best met the needs of service users (see paragraphs 2.11 - 2.20 and Strategic Recommendation 1). Outside of panel discussions, approved premises' managers and Probation Officers worked closely to manage emergency referrals and releases which were due to take place during the week. Managers and Probation Officers reported that short notice releases from custody were occurring more frequently, possibly due to the impact of delays in the processing of cases due to the COVID-19 pandemic. There was also concern raised with Inspectors about dual referrals being made to generic services, as well as, to the hostel allocation panel in an effort to secure accommodation for those leaving custody. An Accommodation Protocol, which was currently being reviewed, sought to provide a framework for co-operation between the signatories (the NIHE, the PBNi, the NIPS and Housing Rights) to enable the accommodation and support needs of those entering and leaving custody to be met.

### Case example - Catherine

Catherine had been assessed as high likelihood of reoffending and risk of serious harm when an application was submitted to the panel. Pending confirmation by the panel of an approved place being available, the prison Probation Officer had sought alternative accommodation. As plans to settle Catherine in other accommodation were advanced when it was confirmed that a bed could be provided in an approved premise, a decision was made to proceed with the alternative accommodation option even though it did not offer the same level of supervision and management.



- 3.7 The outcome of the current process was that offenders were generally not notified of allocation until very shortly before their release which did not support a smooth transition from custody and in a number of cases we examined, people leaving prison could spend time in other temporary accommodation before a space became available at an approved premise. Data on the prevalence of this was not available and so it was difficult to comment on the implication of this from a risk management perspective. Of the service users interviewed during this inspection just under half (9 of 20) said that they had been notified either on the day before their release or the day of their release of where they would be staying. One person said that his anxiety was *‘through the roof’* not knowing where he would be living. The PBNi provisionally allocated cases to local offices but was not in a position to confirm the details of supervising officers much in advance of someone being released which again impacted on transition arrangements and there was a consequential impact on pre-release tripartites taking place.
- 3.8 Consistently staff at approved premises expressed frustration that people were leaving custody without a form of photographic identification, without being registered with a General Practitioner (GP) and without bank accounts or email addresses having been created. This has been a persistent issue flagged in previous inspection reports. These practical matters posed very significant barriers to successful transition from custody to the community. This was not a problem isolated to those who were serving short sentences – it also impacted those who had been in custody for some time. Service users could not register with a GP because they did not know where they would be living on release and they did not have photographic ID, which also delayed progress with GP registration. The lack of ID also hindered getting bank accounts opened and registering to claim benefits. Typically approved premises staff said that it could take between six and eight weeks for these matters to be addressed post release which was unsatisfactory. Maintaining continuity of medication and applying for benefits was given immediate priority by staff at approved premises.
- 3.9 The NIPS had introduced an exit passport – a checklist to identify practical resettlement supports are in place at 30 days and seven days prior to release. A small number of these were viewed – some had not been completed and in others where it had been identified someone did not have photographic ID, it was not apparent what actions had been taken as a result to rectify this. The NIPS reported that 431 electoral ID cards had been issued at Maghaberry Prison over a 12-month period as a result of the introduction of the Exit passport but despite this, the issue of prisoners having identification at the point of release to approved premises remained an issue. The NIPS Resettlement branch was developing a scheme to enable prisoners to apply for and open a bank account ahead of their release. This was due to go live in October 2022. The DfC Make the Call staff and NIACRO worked in the three prisons providing benefit advice but prisoners could not apply for Universal Credit before leaving custody because they were not available to attend job interviews. The result was that some residents could build up significant debts in the interim which was an ongoing issue for approved premises.

## Case example – John and David

At one approved premises Inspectors met two residents both of whom had spent time in temporary accommodation prior to securing a place at an approved premise. John arrived three days after release on licence from custody and had stayed with friends until an approved premise place was approved. He was assessed as high likelihood of re-offending but not as presenting a significant Risk of Serious Harm (sROSH) and he was not subject to public protection arrangements. He had been in prison for five years but it appeared that his application form was only completed two days after his release from custody. The driver for John's application seemed to be that he was homeless on release and was subject to electronic monitoring with a curfew. In this instance it was not evident why an approved premise placement was necessary from a risk management perspective. The manager of the service advised that contact with this service user was mostly observational as he spent most of the day out of the hostel returning to comply with his curfew.

David had been placed in Bed and Breakfast (B&B) accommodation and three different hotels following his discharge from custody. He had been asked to leave the B&B after his offending history became known. He said that there had been no conversation with him in prison about living at an approved premise, and it was his understanding that Probation wouldn't get him a place as he was not dangerous enough but couldn't put him on the streets as he wouldn't survive. David had mobility problems and underlying health issues. He had previously resided at an approved premise following an earlier sentence but this placement had broken down. A new referral was made to the panel and highlighted that his current circumstances had increased risk. It was noted that he had tactically breached his Sexual Offences Prevention Order (SOPO) to get back into prison on a previous occasion. When the case came before the panel, other approved premises were not willing to offer a place. Reference to mobility issues which had not been included in the hostel application form were raised during the panel discussion. The manager of an approved premise went to visit David at a hotel to assess whether his needs could be met at their approved premise and a place was subsequently offered. His probation supervision period was due to expire although he would continue to be monitored by a police Designated Risk Manager (DRM). He reported getting help to access benefits, register with a doctor and supported to make a referral to mental health while residing at the hostel.

*The above two examples raise questions about whether an approved premise place was required on risk management grounds in one instance and how risk could be satisfactorily managed in the period from discharge in temporary accommodation until an approved premise place was available.*

## OPERATIONAL RECOMMENDATION 1

Within three months of the publication of this report the Northern Ireland Prison Service should engage with the Probation Board for Northern Ireland to remove barriers to resettlement such as provision of photographic identification, and the creation of email accounts and bank accounts prior to discharge from custody to improve outcomes for those transitioning from custody to approved premises.

### Sufficiency of information

- 3.10 Approved premises managers advised that information now provided on application forms had improved but was still not fully satisfactory. This was because of the requirement to redact names and personal details which on occasion could lead to confusion as to which case was being discussed or due to be accommodated at a particular service where time had elapsed from the discussion at the panel until the person's release date. This was not satisfactory. Plans to introduce a secure email service had been proposed and were being piloted with one provider at the time of drafting this report. The PBNi had put in place a process to check on a monthly basis that managers had all the necessary information they required. In one return that was viewed it appeared only one approved premise had completed the document and it was assumed that the remainder of managers were content.
- 3.11 The information available to the panel could be supplemented through interviews conducted with prospective service users while they were in custody. Prior to the COVID-19 pandemic, face-to-face meetings had been held with service users. This provided approved premises staff with an opportunity to gather further information about the individual, to begin to build a relationship with them, and to answer questions or queries that the person might have about living in an approved premise. Interviews were not now regularly taking place - either face-to-face or remotely - due to resource and some access constraints and this limited the opportunity to begin to build relationships with potential residents and gather additional information prior to the person's release from custody.
- 3.12 Information about a person's conduct in custody was included in application forms and included details about their disciplinary history, outcomes of drug tests, self-harming behaviour and progress with the progressive regime. This was mostly factual information and some explanation of this material had been included in individual cases. Rather than Assessment, Case Management and Evaluation (ACE) and sROSH assessment documentation being provided to approved premises' managers, referral forms included extracts of this material. Some of this was quite dated depending when the offence had been committed. In hostel referral forms reviewed by Inspectors it was not always apparent why a placement in an approved premise was required to support risk management. In a number of instances the reason given was simply enhanced monitoring and supervision.

There were some better examples where the prison Probation Officer had included more specific details of how the time at an approved premise would be used to support the individual's transition from custody to the community. However, this was an area which could be improved overall and could provide a direct link to the development of initial case plans and move-on plans (see paragraph 3.29). Careful attention was paid to the identification of registered victims and associations of potential and current residents.

- 3.13 In two cases reviewed by Inspectors, while information about some medical matters had been referred to in referral forms, what this meant in practice for day-to-day living in an approved premise had either not been sufficiently well drawn out in the referral form or interrogated by the panel.

### Case example - Brian

Brian, a man with significant health care needs, was released to an approved premise. At the point of release he was assessed as posing a high likelihood of reoffending and presenting a sROSH. The prison Probation Officer had submitted a detailed and timely application to the hostel panel and provided a further update following a further deterioration in the man's health while in prison. The update included reference to Brian's health conditions, the impact of these on his mobility, an assessment that he did not require carers at this point and that he would require a hostel with a lift or ground floor room. Despite the information presented to the Panel, the Hostel Manager was unaware of the full extent of the assistance Brian needed to meet his basic needs, including with the administration of his medication. Brian's condition deteriorated immediately on his arrival at the approved premise. The service concluded that his needs could not be met there. The following day a multi-agency meeting was convened to consider alternative accommodation options. It appeared to attendees that Brian needed a nursing home placement but he was not registered with a GP who would be required to make such a referral. A temporary emergency registration was made and the Doctor advised that the service user should be sent to a local accident and emergency department where a social work assessment would be carried out to determine his basic needs on discharge. He remained in hospital for eight days following which temporary accommodation in a B&B was approved by Probation. He was supported by a NIACRO transitions worker to open a bank account and to register for benefits both of which took approximately eight weeks to set up. GP registration and help with registering for benefits and the opening of a bank account were compounded as Brian did not have a valid form of identification, despite him having been in custody for a lengthy period.

*Although information had been provided to the Panel about Brian's condition, the approved premise was not satisfied that it fully conveyed what support was needed to meet Brian's day-to-day needs, nor was the information provided to the Panel fully interrogated in advance of his release.*

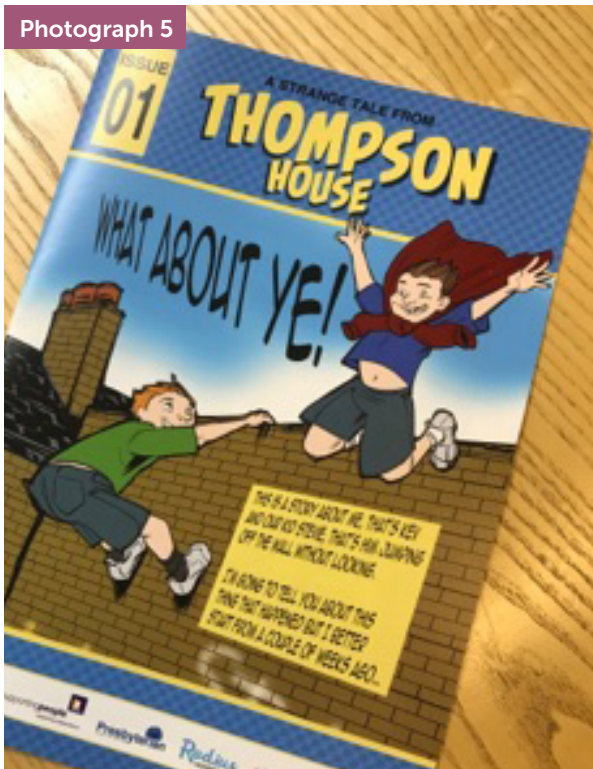
*This case had prompted greater scrutiny by the Panel of reported health care needs and suitability of approved premise placements. In the absence of other suitable accommodation on discharge from hospital, Brian was accommodated at a B&B and this had been approved by the PBNI although he had been assessed as presenting a high likelihood of reoffending, significant risk of serious harm which was the basis on which an approved premise place had been sought in the first instance. Residing at a B&B was unlikely to have adequately addressed this service user's health or risk management needs.*

### **Engagement with potential residents**

- 3.14 Unless they had previously resided at an approved premise, service users we spoke to during the inspection had little or no knowledge of approved premises prior to their release other than what they learned from their peers. Most had poor perceptions before their arrival which often didn't match the reality of their experience. Probation Officers based in prisons said that the prevailing view of service users that they spoke to about approved premises was that they were being set up to fail.
- 3.15 Accompanied temporary release had been used in the past to support prisoners to make an initial visit to approved premises and/or meet with supervising Probation Officers but these had been suspended during the COVID-19 pandemic. This had reduced opportunities for prisoners to familiarise themselves with the approved premise and meet approved premises staff. Long term prisoners approaching the end of their sentence could reside at approved premises as part of their pre-release testing regime but availability of approved premises beds was a limiting factor. Approximately 15 applications for testing had been made to the allocation panel and remained on the allocation list. Due to the pressure on bed spaces, the Panel had requested that the NIPS prioritise who should be offered bed spaces when they were available. The NIPS was exploring funding a bed(s) in order to facilitate testing.
- 3.16 As outlined at para 3.11, there had previously been opportunities to engage with prospective residents prior to their discharge but this no longer routinely happened. While Probation Officers we spoke to had some experience of some of the hostels, not all had previously visited approved premises and thought it would be useful to have this knowledge to help reassure service users and explain more about hostel routines and the services available at each.
- 3.17 Hostel managers and staff had little direct engagement with Prisoner Development Units. There were opportunities for greater engagement between CJOs and approved premises to exchange information and to engage with potential residents to better support their resettlement and rehabilitation. Parole Commissioners also said that it would be beneficial for them to visit approved premises so they too had a broader appreciation of the physical environment, the differences between them and services provided to service users who resided there.



3.18 One service had developed a booklet to explain how their service operated and what was expected of residents. It tells the story of a new arrival and some of the challenges encountered when someone is released from custody and first arrives at an approved premise. This was a good initiative and could be explored by other premises or collectively by approved premises.



Cover and extract of an information booklet developed by Thompson House



3.19 For those prisoners who transitioned from the NIPS pre-release testing unit in Belfast to an approved premise, the transition from custody to the approved premise was much smoother. While at the pre-release unit, they were helped to register with a GP, set up bank accounts, find employment and supported with benefit applications. The PBNI had an office at the pre-release unit and could maintain regular contact with service users. One resident who had recently progressed to reside at an approved premise as part of the latter period of testing had retained his employment. Approved premises staff reported good engagement with prison staff based at the pre-release unit and that the flow of information and support provided by them during testing was valuable.

## CASE PLANNING (ASSESSMENT, PLANNING AND REVIEW)

*Case plans identify the role of the approved premises in supporting assessment, planning and review, and actively involve the approved premises resident.*

### Engagement with service users

- 3.20 Service users mostly reported very positive relationships and engagement between them and approved premises staff and good engagement was observed during fieldwork. They said they understood what was expected of them and good information was available to residents on their arrival.
- 3.21 In several approved premises, hostels managers met new residents on their arrival and key workers were allocated shortly after arrival. Induction was comprehensive and we saw some good client information booklets. Much of the information we saw was presented in a strength focussed, supportive, person-centred way. In some mixed services, information about the expectations for those allocated approved premises as opposed to generic homeless beds was not distinct. First appointments with Probation Officers were now more often taking place at PBNI offices which meant that initial induction tripartites were being conducted without Probation Officers present. Delays in the conduct of tripartites were evident because of the time taken to allocate supervising Probation Officers.
- 3.22 Regular and detailed records were maintained of engagement with service users and of key worker sessions. The extent of the records was contingent on the nature of the contact. There were good examples of case records at Dismas House and the Innis Centre in particular.
- 3.23 At some approved premises, residents were actively encouraged to engage in organised activities.

### Case plans

- 3.24 Approved premises policies had separate but similar needs and risk assessment and support planning policies and procedures in place. Initial risk assessments were completed on admission to the service and were reviewed either on a monthly, six to eight weekly or no later than every three months depending on the service. Copies of licences/orders, hostel application and records of tripartites were held in separate hard copy files. Due to GDPR, copies of ACE and other risk assessments were no longer shared with approved premises. Inspectors reviewed a number of individual risk and needs assessment and support plans developed by approved premises staff which were mostly held on electronic case management systems. Initial plans drew on information provided prior to placement, assessments completed by key workers and where conducted, the initial induction meeting with supervising Probation Officers. The content of assessments and plans varied but generally covered similar areas.

Risk assessments focussed on risk of harm to self, to others and from others.  
Support plans focussed on needs and risks related to: substance misuse, benefits and money management, housing support, GP registration and physical and mental well-being, social networks, as well as, employment and training.

### Practice example – risk assessment and monitoring

Extern had a comprehensive risk assessment process in place. This commenced with an initial risk assessment on admission which focussed on specific risks to be monitored in the early days of the placement. This included an assessment of the risks the service user may present to others as well as risk of self-harm/suicide and risk of self-neglect/vulnerability to abuse from others. An admission checklist covering medication, housing status, health, finance, availability of ID, requirements to register with the police and conditions of stay was to be completed within the first month. This provided an accessible snapshot of immediate needs and actions. The risk assessment and management plan included detail on offending risks, risks associated with current and previous stays at approved premises and a housing/resettlement risk screening and management plan. The latter covered a comprehensive range of issues including debt management, isolation/loneliness and whether the individual was currently under threat in the community. Assessments and actions were updated monthly and reviewed at 16, 32 and 48-week intervals.

- 3.25 In accordance with PBNI Practice Standards, initial caseplans were to be drawn up within 20 working days of release (10 working days if sROSH) and should clearly outline who was responsible for each action and include an exit plan from the hostel. Further, the standards stated that a clear 'move on' plan should be included in the initial caseplan.
- 3.26 PBNI caseplans were not shared with approved premises key workers and it was not evident to Inspectors how the two work plans, that is those devised by key workers and those done by supervising Probation Officers, related to each other. Tripartite meetings provided an opportunity to review progress and exchange information. The conduct of tripartites had been impacted during the COVID-19 pandemic and due to staff shortages within the PBNI. Records of tripartite meetings viewed at approved premises lacked detail and actions/outcomes were general rather than being specific. They did not demonstrate evidence of adequate discussion around risk reduction and management. There were opportunities to better involve approved premises' key workers in risk management meetings and case planning, as well as, LAPPP meetings (see 3.30-3.32). Probation standards now specified that tripartites were conducted bimonthly rather than monthly but could take place more frequently when required. Approved premises advocated that monthly tripartites should be reinstated for high-risk residents and this was presently the case within one service.



A small number of Probation Officers felt that there was no need for the frequency of tripartites specified in practice standards for longer term residents where there was little change from month to month. Inspectors did not agree as it was important to maintain relationships and review actions in support of risk and support needs, as well as, move-on planning.

- 3.27 Service users spoken to during the review said they had an opportunity to engage in tripartites and reviews of their support plans.
- 3.28 Daily contact records showed approved premises staff were in regular contact with supervising Probation Officers. The PBNI case management records showed corresponding contact with approved premises by telephone calls, email and visits.
- 3.29 In PBNI case plans and approved premises support plans, Inspectors did not see sufficient evidence of move-on planning. Generally move-on plans viewed at approved premises constituted a description of areas of choice for housing and the number of housing points a resident currently had. In one case plan there was reference to the initial period at the approved premises being used to closely assess and monitor risk and then at a subsequent review, an action being identified to look at move-on accommodation given what had been achieved in the interim. Residents spoken to were not clear how long they were expected to stay at the approved premise and what was required in order for them to move-on.

## OPERATIONAL RECOMMENDATION 2

Within six months of the publication of this report, the Probation Board for Northern Ireland, in conjunction with approved premises providers, should clarify its expectations in relation to:

- case planning to ensure that approved premises' key workers are closely involved in risk and need assessment and management processes; and
- move-on planning to ensure there is a clear focus on the timescale, actions and progress required to move on from an approved premises placement.

Both should be reflected in the Probation Board for Northern Ireland case plans and approved premises support plans.

### Public protection arrangements

- 3.30 Good relationships were reported between approved premises staff, Probation Officers and members of the co-located PPT which had sole responsibility for the management of PPANI Category 3 offenders and Offender Investigation Unit Officers (OIU; from the Police Service's Public Protection Branch, responsible for PPANI Category 1 and 2 offenders). Officers/staff from OIUs and the PPT reported no issues with accessing residents to complete checks or with information sharing. Most said that where possible they would check in with the resident's key worker prior to appointments.

3.31 Category 3 PPANI cases were reviewed at weekly PPT briefing meetings. Inspectors examined five sets of minutes. For residents of approved premises these included reference to curfew compliance and behaviour, future court dates and the potential for approved premises places to be withdrawn. As the PBNI Area Manager chairing the hostel panel meeting was embedded within the PPT, there was an opportunity to flag information to the panel which in one of the cases had facilitated emergency access to an approved premise place for an individual who was unexpectedly released from custody.

3.32 There was not strong evidence that approved premises key workers were sufficiently well involved with LAPPP meetings. Of the cases reviewed one had minutes of a LAPPP meeting on file which the key worker had attended. In a separate review of a sample of 10 LAPPP minutes, a key worker had attended one of the meetings and contributed to the discussion. In the others, information was contributed through the Designated Risk Manager's (DRM's) report. While this information was conveyed to the panel it meant that key workers did not have the opportunity to be part of the risk management discussion. It did not appear that approved premises staff were routinely invited to attend LAPPP meetings and information related to resident's behaviour was included in DRM reports. Inspectors did not see any specific actions identified for approved premises staff in the minutes we reviewed. Apart from the PPANI category being recorded in approved premises case records, there was no further details around specific risk factors and concerns. Inspectors would expect to see that there are opportunities for approved premises key workers to contribute effectively to risk assessment and management arrangements. This could be achieved through key workers being invited/ attending every meeting; providing reports on progress and behaviour to DRMs; where appropriate specific actions for key workers being identified and reflected in management plans, and updates on allocated actions being provided to subsequent reviews. This is linked to the findings at paragraph 2.8 and 3.26.

### OPERATIONAL RECOMMENDATION 3

**The Joint Chairs of the Public Protection Arrangements Northern Ireland Policy and Practice Sub group should immediately ensure that approved premises key workers are fully involved in public protection risk assessment and management arrangements.**

#### **Compliance**

3.33 Mostly effective systems were in place to monitor compliance with hostel rules and licence conditions including curfews. These included staff handover arrangements, daily contact records, use of Closed Circuit Television (CCTV), sign-in/out books, room checks and external checks by probation and public protection staff. Inspectors saw examples in individual case files of notifications to probation and police of breaches of curfews, use of unauthorised devices, substance misuse and details of who individuals were associating with.

Feedback from Probation and Police Officers was mostly positive about how approved premises supported compliance. Police DRMs and Visiting Officers had regular contact with approved premises in their areas and the level of contact through visits and telephone calls depended on the number of relevant offenders residing at approved premises.

- 3.34 A range of sanctions was evident from looking at approved premises and probation files in response to breaches of hostel rules and licence conditions which seemed proportionate to escalating behaviour. This included the use of warning letters, transfers between approved premises, use of CCTV, provision of additional support/referrals and variation of licence conditions.

### Case example - Joseph

Joseph was sentenced to a Determinate Custodial sentence of 12 years for armed robbery: four years of which were to be served on licence. He resided at an approved premise for seven months before he was recalled to custody. He had reported longstanding problems with substance misuse and trauma. Despite being in custody for eight years, the Probation Officer recorded in the hostel application form that Joseph had been referred to healthcare for support with addictions but, due to waiting lists, he had not been seen and would not be seen prior to his release from custody. It was evident from records viewed at the approved premise and the PBNI that there was serious concern about ongoing substance misuse and offending during the period of his placement. The key worker and Probation Officer worked closely together to encourage Joseph to maintain his medication regime, keep himself safe and comply with hostel rules and the conditions of his licence. The key worker advocated with the NIHE and the PBNI to explore if private rental housing could be secured as Joseph was struggling to avoid misusing substances within the approved premise.

*A range of supports were explored with the resident to support him to maintain his placement and practice harm reduction. There was very significant engagement between the PBNI and the approved premise key worker to make sure both parties were updated on events and incidents and communication with the resident. He was also served with warning letters and notices warning of eviction as his behaviour deteriorated. The detailed records maintained by the approved premise were included in the records submitted to Parole Commissioners for Northern Ireland when a recommendation to recall was submitted.*

- 3.35 Approved premises were making timely notifications to supervising Probation Officers on compliance matters and there was good record keeping of incidents which could be relied upon to support recall decisions.

- 3.36 Approved premises staff and supervising Probation Officers reported that recall processes were generally working well, and that there was a good, shared understanding of the processes and thresholds. On occasions there was some tension in individual cases, when an approved premises had reached the point of withdrawing a bed and recall had not been authorised or when a decision to recall had been taken but not immediately effected. Data provided by the DoJ's Public Protection Branch showed that a small proportion of all recall applications - 8% from 2019-2021 - did not result in licence revocation. Largely we saw evidence of approved premises working with the PBNI to manage the risk at the hostel but we also heard from managers that there were situations where recall procedures were not instigated by the PBNI until approved premises took decisions to end placements following which the threshold for recall was deemed met.
- 3.37 Two issues relating to compliance were raised with Inspectors by approved premises. They were: i) Although each approved premise operated an on-call service, the PBNI no longer had an on-call officer other than over public holidays which left approved premises staff concerned that they were required to manage the risks posed by an individual without recourse to a Probation Officer outside of normal working hours and particularly at weekends (although in an emergency all staff were clear that they could contact police) and ii) when breaches of curfews were reported to police as required by approved premises procedures, a common response was that this was not a policing matter but one for the PBNI.
- 3.38 On the first matter one approved premise had taken the proactive step of compiling and circulating a list of potential risks that might emerge out-of-hours and proposed handling plans to guide staff. This was a good initiative and one which might be helpful for other approved premises to adopt. On the second matter, while the police did generally provide incident report numbers in these circumstances, approved premises felt that there wasn't a full understanding of the risks associated with particular individuals required to reside at approved premises. On the latter, Probation Officers were also being notified of breaches of curfews and, where appropriate notifications were sent to local OIU Officers for follow-up. This is an example of a matter where greater understanding about roles and remit would be helpful (see Strategic Recommendation 1).
- 3.39 The Police Service interfaced with approved premises contingent with their role. Public Protection Officers/staff in PPT and OIU Officers had a role with supervising/visiting PPANI offenders and some offenders were managed by the Reducing Offending in Partnership team. Local Policing Teams responded to calls from approved premises and Neighbourhood Policing Teams (NPT) had some engagement with approved premises. Police Officers reported good engagement with approved premises staff, however, as noted in Chapter 2, outside of PPT Officers there was less awareness of the distinction between approved premises and generic hostels, and the standards and work undertaken by approved premise staff.

In the discussions with different groups of officers, each identified opportunities for closer collaboration within policing and with approved premises to enhance understanding and service delivery. NPTs, for example, notwithstanding capacity constraints, felt that it would be helpful to know who was residing at approved premises to inform community impact assessments and also to support residents (see Strategic Recommendation 1). Systems were in place to alert Officers to high-risk offenders in their areas, for example, PPANI Category 3 offenders, but not others unless NPT officers were tasked to conduct bail checks.

## INTERVENTIONS AND REGIMES

*Residents in approved premises can access interventions designed to promote their successful rehabilitation and resettlement, and reduce their risk.*

### Sufficiency of interventions to support case plans

- 3.40 Approved premises key workers were providing housing support, help with accessing GP appointments and maintaining medication, and signposting service users to a range of organisations for further support and specialist interventions. Where interventions were being delivered by agencies external to approved premises, the outcome of those interventions was not apparent in the records reviewed.
- 3.41 A review of probation records demonstrated that regular supervision contacts were being conducted and referrals to identified interventions were also being made. Where interventions were being provided by the PBNi, for example, referrals to offending behaviour programmes, work with the PBNi psychology or drug and alcohol support work, it was not generally apparent from approved premises case files and records when these were scheduled to take place, how the key worker could support this work and what the outcomes of these interventions were. In one example the rationale for a placement in an approved premises had been for the PBNi to assess and provide an intervention plan for a service user. When Inspectors looked at the case, the service user had been residing at the approved premise for six months and Inspectors could not see evidence in the approved premises records that any engagement had commenced. In another case the service user had a requirement to complete an offending behaviour programme suitable for medium risk sex offenders. Months into his placement there was a record made that this was no longer a requirement as the service user was low likelihood of re-offending but it was not clear whether this was because his likelihood of reoffending was now reduced or if he had ever been suitable. Inspectors were, however, able to access this information from the PBNi case management system. In the LAPPP minutes reviewed, there were a number of cases where there was a requirement for a sex offender treatment programme to be completed as part of the licence but there was not evidence of when these men were to be enrolled in programmes. In their self-assessment the PBNi highlighted that an area for improvement was that access to programmes was to be determined on the basis of risk and that this work was ongoing.

### Hostel regimes

- 3.42 Hostels regimes and routines were explained at induction, written information was provided to service users and residents told Inspectors that these were generally well understood. One issue raised by a number of service users was the rationale for certain curfew periods and whether curfews remained in place after electronic monitoring tags had been removed. Where issues were identified key workers had sought advice and clarification from supervising Probation Officers. The interface between hostel rules and supervision requirements was an area where some work could be done to bring greater clarity for staff and residents (see Strategic Recommendation 1).
- 3.43 Most of the approved premises had reasonably good facilities for service users including lounge areas, recreational rooms, and several had IT facilities to support job searches although it was reported that these were not used very often. In most, but not all, of the approved premises service users were encouraged to undertake chores to assist the running of the approved remise or to support others, for example with their laundry.
- 3.44 Inspectors were told that there was not a lot of group recreational activities and what had been in place had been suspended during the COVID-19 pandemic. Often activities were led by an enthusiastic team member rather than forming part of the hostel regime. One approved premise was very active in running activities and encouraging residents to attend in an attempt to develop a greater sense of community. All approved premises experienced some level of difficulty getting residents to associate together.
- 3.45 For the most part Inspectors observed and were told by residents that they spent a lot of time out of hostels during the day unless curfews needed to be observed. Many did not appear to be involved in any constructive activity although this varied from place to place depending on the number engaged in employment (see paragraph 3.51).
- 3.46 Hostels did not conduct drug or alcohol tests. The PBNi contracted a private drug and alcohol detection service to conduct testing at its premises. Prisoners residing at approved premises as part of pre-release testing were subject to alcohol and drug tests, and curfew checks conducted by the NIPS staff based at Burren House (the NIPS pre-release testing unit).

### Health care

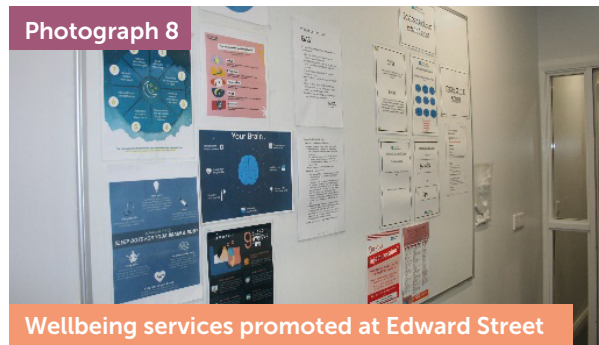
- 3.47 Access to healthcare support for residents was commonly reported as an issue by all approved premises. Transition from custody was difficult in terms of people leaving custody without being registered with a GP (see paragraph 3.8) and the consequential impact of that in terms of continuity of care and medication. Each approved premise had developed good working relationships with local GP surgeries but it could be difficult getting service users registered which was not helped by the current pressures on the healthcare system.



Individual needs were identified through the needs assessment and support planning process and residents were encouraged and, supported and signposted to a range of services including mental health suicide prevention and substance misuse services.

3.48 Timely access to mental health services was identified as an issue by approved premises which impacted on risk management concerns and this was also echoed by the Parole Commissioners for Northern Ireland from their experience of deliberating on recall requests. Inspectors were told about one resident who experienced a psychotic episode causing a serious self-injury and had to be maintained at the premises for a week. Another had required the administration of intravenous medication and attempts by the approved premise to broker meetings between a psychiatrist and mental health nurse had been unsuccessful. Offenders leaving mental health in-patient units could also be allocated an approved premise place and one such transition was being planned for at the time of the fieldwork. Concerns were expressed about the level of training of staff to adequately meet the needs of these service users.

3.49 By contrast transition from custody to community for those on a substitution therapy programme generally worked well with first appointments made with local pharmacies, in advance of release to maintain continuity of medication. We saw an example in an approved premises application form and heard from approved premises managers about cases where referrals to addiction services in custody had not been actioned prior to release. Concerns about the capacity and capability of addiction services in prison, in light of the demand for the services, had been highlighted in recent prison inspection reports<sup>13</sup>. At each approved premise, hostel staff, managers and Probation Officers spoke about the change in the profile of residents and they had responded by introducing new policies and adopting a much more harm reduction focussed approach. All staff were trained in how to administer naloxone (a drug used to reverse the effects of opioids especially in the emergency treatment of opioid overdose). One service reported that they repeatedly responded to drug overdoses and this was evident in incident reports. This service had introduced a recovery room which was a particularly valuable resource especially for those who refused transfer to hospital.



13 *CJI, Report of an unannounced inspection of Magilligan Prison 21 May-10 June 2021, February 2022* available at <http://www.cjini.org/getattachment/4ae6bd06-979d-4b1e-a724-c2ab6ee5ac09/report.aspx> and *CJI, Report of an unannounced inspection of Maghaberry Prison 9-19 April 2018, November 2018* available at <http://www.cjini.org/getattachment/cedf8f4d-34e8-47e1-916d-8fb31c141b8d/report.aspx>

3.50 Since CJI's last full inspection in 2013, homeless inclusion and liaison nurses had been introduced in each Health and Social Care Trust area and were making an effective contribution to supporting residents of approved premises. In one approved premise, the nurse attended on a set day each week and all residents were given an opportunity to meet with her. In the other services, homeless inclusion and liaison nurses had supported access to medication for service users and with onward referrals. One nurse expressed concern about the suitability of approved premises accommodation to manage the needs of several residents and this was also evident in one of the cases reviewed by Inspectors, where finding suitable accommodation that the individual could move to was proving problematic. The Simon Community had introduced well-being practitioners across their services including at approved premises. Well-being practitioners primarily focussed on supporting the needs of staff and in one location were very well integrated within the services.

### Work and learning

3.51 Individual needs were identified through the needs assessment and support planning process. Key workers encouraged service users to engage with learning and work opportunities and made referrals to specialist services including NIACRO and Start 360 to support job applications, get individuals work ready and addressing disclosure. Of the 80 residents living at an approved premise when fieldwork for this inspection commenced, eight were in employment and a further five were involved in education or skills training. For residents of approved premises located in Belfast, the closure of the Extern Works programme had had a significant impact on access to work opportunities.

3.52 One manager had been approached by the DfC about a new Work Experience Programme for which service users were eligible and offered paid placements. This had been shared with the other approved premises services and a number of service users had expressed an interest in joining the scheme. This was a positive initiative but also highlighted that there was no overarching strategy in place to address employability. There was little incentive for residents to commence employment. Where residents were in education/employment, in certain circumstances, this could impact on their entitlement to housing benefit and consequently their ability to afford rent. This seemed counter-intuitive in terms of resettlement goals.

### Family, benefits, housing and other practical support

3.53 Agencies such as Extern's floating support service and NIACRO *Transitions* team were providing much valued support to residents of approved premises. The NIHE Housing Solutions Teams held clinics at approved premises and there was a range of other support provided to enhance independent living skills including with money management, encouragement to keep their living spaces tidy, access to clothing, and referrals to food banks, where necessary.



- 3.54 One or two services offered cooking classes to support independent living but not all had suitable facilities, and again these were disrupted during the pandemic but were to be restarted.
- 3.55 A number of premises permitted visits by family/friends but others did not. Support was available to re-establish family contacts, where appropriate.

## TRANSITION FROM APPROVED PREMISES AND ACCOMMODATION

*Effective arrangements are in place to support residents of approved premises to transition to suitable permanent accommodation in the community.*

- 3.56 At the time that fieldwork commenced just over half of residents' placements were under six months duration. Just under a quarter (24%) had resided at the approved premises for more than 12 months. Data provided by the PBNi of the average duration of placements for new referrals at approved premises during 2021-22 was 11 weeks. This ranged from four weeks at one approved premise to 26 weeks at another for the same reporting period. These figures do not, however, include those who were already resident, and in this and previous reviews and visits Inspectors found that a number of individuals spent very lengthy periods in approved premises.
- 3.57 There was no clear guidance on the expected length of stays at approved premises. The PBNi required that any stay longer than 12 months was to be flagged with an Assistant Director. SP expected service users to move on within two years and there was a range of time periods put forward by approved premises as to the expected length of stay. The duration of stays at approved premises was monitored by the PBNi and the PPANI accommodation sub-group noted stays of six months or more for those subject to public protection arrangements. No case specific actions were agreed at this forum to expedite their move-on. Examination of these cases had identified that an older client group with additional needs had featured more in those who were staying longer at approved premises. Work was ongoing with housing associations and Health and Social Care Trusts to source sustainable accommodation options.
- 3.58 In England and Wales the expectation was that residents would normally remain at approved premises for 12 weeks and plans for moving to independent living should have been in place by the end of that period. There was no clear comparable expectation in Northern Ireland. There was limited evidence of move-on plans (as referenced at paragraph 3.57) being devised and/or indicative timescales for residence at an approved premise. Several residents spoke about being well supported and cared for while living at approved premises and were content to remain longer. It was not clear from the individuals Inspectors spoke to and looking at case files who was responsible for leading discussions about the timeline and steps associated with moving on from approved premises.

## Case example - David

David was serving a Determinate Custodial Sentence for sexual offences and was to be supervised on licence for two years when released from custody. He was also subject to a SOPO. At the point of release from prison he was assessed as medium likelihood of reoffending and was not assessed as sROSH. At a pre-release LAPPP, he was assessed as PPANI Category 1 that is where previous offending and/or current behaviour and/or current circumstances present little evidence that the offender could cause serious harm. Residing at a hostel and licence conditions were cited as external controls. No move-on plan was evident in the initial case plan. There was discussion at the second tripartite with the approved premise and David about the client taking a more proactive role in seeking accommodation but there was nothing in the records to indicate what progress this was contingent on, the anticipated timescale and what supports would be required for this to happen. There were repeated references in the PBNi records of David not actively seeking alternative accommodation and being in no rush to move on from approved accommodation. Over the course of a year, David's likelihood of reoffending was assessed as reducing from medium to low. There was a note recorded in the approved premises record that as he was low risk he was not suitable to do the Horizon programme although it had previously been noted that he was awaiting a place on this offending behaviour programme. He remained assessed as PPANI Category 1. As in other cases the number of allocated housing points was listed and there are records of changes in preferred areas for housing and of the type of housing required. There was evidence of one offer of housing being turned down as it was inappropriate. There had been an opportunity to move to an independent flat operated by the same service. Just over 12 months after his placement commenced, the approved premise contacted the supervising Probation Officer to ask if David could move to a generic homeless placement so that an approved premise place could be freed up.

*This case example highlights a lack of planning for move on and effective management of approved premises beds. From an earlier stage the service user was reported to be fully compliant, fully independent and requiring little support. The records did not indicate any exploration or detailed analysis of why he was reluctant to move from the service and what specific support he could be offered to address the underlying reasons for this. They also did not indicate at which point he had been assessed as suitable to move-on based on his risk management needs. Given this individual's risk profile and behaviour, an approved premise bed could potentially have been freed up at an earlier stage.*

- 3.59 A major limitation was the difficulty in sourcing move-on accommodation given the current pressures on the housing system but also due to the reluctance to accept people with certain offence types. Approved premises managers and CJOs highlighted a particular difficulty in accessing move-on accommodation for those who had committed sexual offences.

In one case a resident had secured a private rental property but after one day he was approached by the landlord who advised that community representatives had made representations to the landlord that they were aware of his offending history and that he was not welcome in the community. While no official threat against the resident was made, he decided to end the tenancy and arrangements were made for him to return to an approved premise bed. Some Police Officers expressed a concern about clustering of residents around approved premises. The lack of accommodation options and time taken to approve accommodation when it was offered were cited as particular obstacles for this group of service users despite lowest overall rates of reoffending for sexual offences based on the 2019-20 cohort<sup>14</sup>. This problem was being actively monitored by the PPANI accommodation sub-group and work was actively being taken forward to explore and develop accommodation options. The NIHE had commissioned research to examine the barriers and make recommendations for future developments for housing applicants subject to PPANI, including offenders released from custody. A copy of the report was not available at the time the inspection was conducted.

3.60 As a consequence there were people currently residing at approved premises who did not need to continue to reside to support risk management but rather there were no options in terms of alternative accommodation being available. The PBNi assessed that between 30-40% of places were occupied by people who would otherwise have moved on. This appeared to be a high proportion of residents and required further analysis in the context of reviewing the current delivery model (see Strategic Recommendation 1) and move-on planning (see Operational Recommendation 3).

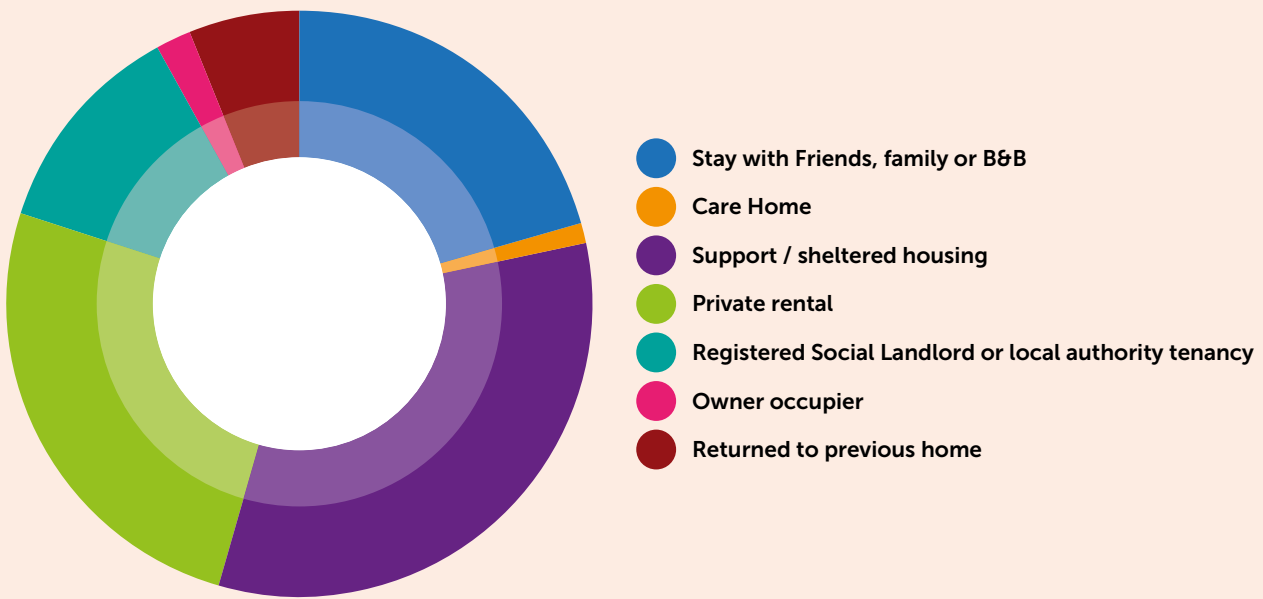
3.61 SP data showed that a third of people (33%) leaving approved premises in a planned way moved to either supported or sheltered social housing accommodation, followed by private rental (26%). Twenty one percent left approved premises to stay with family or friends or moved to B&B accommodation, although this was not sustainable accommodation. A full breakdown of the type of accommodation residents moved to is set out in Chart 1. The data relates to the four approved premises which accept only probation referred service users. The data for the remaining three premises is not disaggregated by generic and PBNi referral types. Northern Ireland Housing statistics highlight the enormous demand on the social housing sector in Northern Ireland<sup>15</sup>. At March 2022 the total number of applicants on the waiting list was 44,426 of which over 30,000 were in housing stress, which meant they had 30 or more points under the social housing selection scheme. Belfast, where over 70% of approved premises beds were located was one of the areas with the highest demand for social housing.

14 NISRA, *Adult and Youth reoffending in Northern Ireland 2019/20 Cohort, November 2022* available at: <https://www.justice-ni.gov.uk/topics/reoffending-statistics>

15 NISRA, *Northern Ireland Housing Bulletin, January - March 2022, Published 9 June 2022* available at <https://www.gov.uk/government/statistics/northern-ireland-housing-bulletin-january-march-2022>

The statistics also showed an overall decrease in new dwelling starts and completions although social housing starts and completions increased when compared to the same quarter last year. The highest proportion of those presenting as homeless were single males (33%) which was again reflective of the highest service users of approved premises.

**Chart 1: Breakdown of move on accommodation for residents of PBNI only approved premises during the last three financial years**



3.62 One of the barriers identified by a number of approved premises was the absence of step-down accommodation to support service users transition from the intensive support provided in approved premises to independent living. There was an opportunity for residents living in approved premises run by the Simon Community to move to step-down accommodation and it had also committed to purchasing properties. At MUST and Thompson House, there were a number of independent living units that residents could progress to which gave them more personal responsibility within a supportive environment.

## VICTIM ENGAGEMENT

*Relevant and timely information is provided to victims and they are protected from harm.*

3.63 Approved premises' staff did not have direct engagement with registered victims but appeared to be aware of cases where there was a specific victim interest. Where a victim was registered in a case, this was flagged in hostel referral application forms and was one of the considerations taken into account when deciding on the suitability of a particular location. The potential risks to registered victims was considered at LAPPP meetings. The Prisoner Release Victim Information Scheme provided an opportunity for victims to receive information about a prisoners' release and the conditions of their release. The PBNi Victim Information Unit was responsible for providing information about an individual's sentence and general information about the supervision of people on probation.

## CHAPTER 4: OUTCOMES

### PUBLIC PROTECTION AND ENFORCEMENT

*The public are protected from serious harm. Effective enforcement measures are in place to protect the public from harm and support the rehabilitation of the service user.*

- 4.1 Approved premises provided an important service in supporting criminal justice agencies in Northern Ireland to manage high risk offenders in the initial period of their release from custody. Since CJI first conducted a review of approved premises in 2008, the profile of residents had changed significantly with almost all residents now subject to post release supervision from custodial sentences. Data provided by the PBNI showed that in the last three financial years, 75% of residents were assessed as high likelihood of reoffending at the stage of referral and almost 30% were assessed as sROSH. When compared with the total number of people supervised by the PBNI the average ACE score of service users in approved premises was higher. In 2021-22, for example, 45% of service users accommodated in approved premises had a high average ACE score compared with 28% of all individuals supervised by the PBNI in the same period.
- 4.2 Inspectors assessed that effective action was being taken by approved premises to manage the risk of harm posed by service users and provide support to them to maintain compliance with orders and hostel regimes, and in conjunction with the PBNI and other statutory CJOs, support enforcement action.
- 4.3 There was a low level of serious further offending by residents of approved premises: two instances from a total of 39 in the last three financial years. There had been two serious case reviews<sup>16</sup> involving residents of approved premises.
- 4.4 The recall of offenders allowed for those who could no longer be safely managed in the community to be recalled to custody. In the last two financial years, 21% of service users released to approved premises were recalled which accounted for 13% (74 of 560) of all recalls to custody and 2% of all immediate custody releases from custody. The rate of recall against number of referrals made to approved premises

16 Under PPANI, a serious case review may be conducted if an offender within the public protection arrangements commits or attempts to commit further serious offences. The purpose of a serious case review is to identify whether there were any deficits in the procedures or practice undertaken by the agencies involved and to highlight any learning for the future. See PPANI, *Manual of Practice (Revised March 2016)* for further details available at [https://www.publicprotectionni.com/app/uploads/2018/04/PPANI\\_MoP\\_2016.pdf](https://www.publicprotectionni.com/app/uploads/2018/04/PPANI_MoP_2016.pdf)

was broadly similar in each of the last three years with some variation between approved premises. It was not surprising that the recall rate for those residing at approved premises was higher given the characteristics of this group of service users. The latest data on breach rates of orders was based on the 2017-18 cohort and was 25% across all order types. No data was available for orders attached to residents of approved premises and data was not readily accessible on the rate of successful completion of probation orders and licences for residents at approved premises which could be compared with overall successful completion rates.

## RESETTLEMENT AND REHABILITATION

*Residents of approved premises are effectively helped to reduce their likelihood of reoffending and desist from offending.*

- 4.5 In the cases Inspectors reviewed and interviews conducted there was evidence of much good work being conducted on an individual case basis to support resettlement and help individual service users desist from offending. However, in common with many other aspects of the criminal justice system there was limited data or information available to demonstrate what outcomes had been achieved by approved premises as a whole. In their self-assessment report the PBNI highlighted the need for empirical evidence to demonstrate successful resettlement and rehabilitation outcomes as an area for improvement. CJI's May 2018 *Inspection of Resettlement in the NIPS* highlighted this point and recommended that, 'The DoJ, as part of its wider desistance remit, the NIPS and the PBNI should develop meaningful performance measures, within one year of the publication of this report, to assess the effectiveness of resettlement provision, interventions and outcomes for prisoners over the longer-term.' The recommendation was accepted. In an update provided in February 2023, the DoJ advised that while work to secure access to linked data across a number of Departments had been explored, sufficient buy-in could not be secured. Alternative approaches to create a criminal justice themed dataset and more collaborative working with the PBNI to develop performance measures on resettlement provision of individuals leaving custody were being progressed. It would be important that the resettlement outcomes for those required to reside at approved premises were considered as part of this work.
- 4.6 Several of the approved premises used the Outcome Star<sup>17</sup> model to monitor and chart progress but no longitudinal data was available. The case management systems we saw in operation during the inspection had the potential to extract some of the information and were under-utilised in this aspect.

17 Outcome Star is an evidenced based tool for both supporting and measuring change.



- 4.7 For the last three years data collated by approved premises showed a slightly greater proportion of residents leaving approved premises were settled leavers: 53% compared with 47% of unsettled leavers. Data was not available on the number of residents settled in move-on accommodation after their post hostel residency.
- 4.8 Inspectors asked the PBNI to replicate an analysis undertaken during the previous inspection to assess resident's progress after they left approved premises. This entailed an analysis of ACE scores of a total of 109 residents who had left approved premises over a six-month period. Whereas previously the analysis had shown a reduction in ACE scores for resettled leavers while residing at an approved premise and a further reduction after they had moved on, the findings this time were not conclusive. The limiting factor was the small sample size of those for whom a change in ACE score was available. There were some similarities with the previous findings in that the average ACE score of settled leavers on arrival was higher, the duration of their stays were longer and the average age was higher than unsettled leavers.
- 4.9 As identified in the previous inspection, it was difficult to obtain data to evidence the impact of the approved premises service on reoffending, rehabilitation and desistance. At that time, work to evidence outcomes had been a target in the 2012 PBNI Accommodation Strategy but that strategy was no longer in place. Obtaining and retaining settled accommodation is a key factor in successful rehabilitation. The Ministry of Justice 2021 *Surveying Prisoner Crime Reduction* report<sup>18</sup> showed that 79% of prisoners who reported being homeless prior to entering custody were reconvicted within a year of release, compared to 47% for those with accommodation.

### Case example - Kevin

Kevin had over 60 previous convictions and a history of violent offending. He had had several previous placements at approved premises but each had broken down. He was released from custody after serving the custodial element of a public protection sentence. When released he was assessed as posing a high likelihood of reoffending but not sROSH. At a pre-release LAPPP his risk category remained at Category 3 meaning he was assessed as highly likely to cause serious harm through carrying out a contact sexual or violent offence. Arrangements for Kevin's release for custody were good. The manager of the approved premise had been contacted in advance to ensure he had all the information he needed to support Kevin, a first appointment for substitution medication was in place, he had been introduced to his PPT supervisors before leaving custody and plans for his initial days had been mapped out and communicated to him.

18 Williams K, Poyser J, Hopkins K, (2012). Accommodation, homelessness and reoffending of prisoners: Results from the Surveying prisoner Crime Reduction (SPCR) Survey. MOJ Research Summary 3/12 available at [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/278806/homelessness-reoffending-prisoners.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/278806/homelessness-reoffending-prisoners.pdf)



As identified in other cases, he was not registered with a GP prior to discharge and had no immediate access to benefits. Approved premises staff very quickly took steps to ensure continuity of medication. While Kevin expressed concerns about aspects of his supervision and assessment of present risk, at the pre-release tripartite it was recorded that he had a great attitude to release and good supports were in place to support him. The approved premises and probation case records evidenced a wide network of support and demonstrated very regular, open and supportive engagement between Kevin and the professionals involved in his supervision and management. There was evidence of frequent check-ins between hostel staff/Kevin's key worker and probation and detailed records were maintained of key work sessions and supervision contacts. The Probation Officer advised hostel staff of changes in supervision/monitoring requirements and requested that his responses were more closely monitored during these periods. At all stages Kevin was encouraged to seek help when he felt he needed it. Kevin was offered advice and supported to make positive choices to enhance desistance in respect of developing relationships with his family and in personal relationships, making effective use of his time and engaging in substance misuse and mental health services. After approximately six months at the approved premise Kevin was assessed as medium likelihood of reoffending and there was little evidence that he would cause serious harm (Category 1 under the PPANI arrangements). He was progressing to look at living independently and continued to be supported with offending behaviour and resettlement needs.

*The records in this case demonstrated good progress to support the reduction in risk, desistance and the prevention of reoffending. A person centred approach was evident and strong supportive relationships between Kevin and those responsible for his supervision and monitoring were central to this. Kevin reported feeling safe at the approved premise and of being well supported by the PPT. He reported drawing on therapeutic work he had undertaken in custody to support his journey towards desistance.*

## EQUALITY AND DIVERSITY

*There is a clear approach to promoting equitable outcomes, fostering good relations and ensuring approved premises' residents are treated fairly. Effective processes are in place to identify and resolve any inequality. The diverse needs of approved premises' residents are recognised and addressed.*

- 4.10 Staff at approved premises reported that they treated residents with dignity and respect and that a person-centred approach was central to their care. Individual needs were assessed on arrival and care plans tailored accordingly. Staff were able to describe ways in which the individual needs of residents had been met. Residents supported this and we observed respectful interactions with residents during our visits to approved premises.

- 4.11 There was no requirement for the organisations responsible for operating approved premises to record and monitor Section 75 groups.<sup>19</sup> The PBNI completed equality monitoring forms with service users and with the introduction of a new electronic case management system, the PBNI was able to analyse data in relation to a broader range of equality groups. Data specific to approved premises residents was not available and the PBNI acknowledged in its self-assessment report that greater use of equality monitoring information could be made to inform service improvement.
- 4.12 During this review, interviewees raised increased needs within the approved premises service relating to age, mental health, physical health, substance misuse and meeting the needs of foreign national residents. Providers highlighted that residents now presented with more complex needs than before and the facilities and services available at approved premises struggled at times to meet their needs. In a small number of cases, individuals had not been provided a place or the placement had broken down at a very early stage. In a case recently referred to the panel, a request for the potential service user to visit the approved premise was made so that an assessment could be made as to whether the environment could meet his health care needs.
- 4.13 In the absence of data specific to approved premises service users we could not assess outcomes across different categories. As identified by the PBNI, more could be done to record and monitor equality and diversity factors to identify gaps in provision and procedures. This should be factored into the systems to inform service delivery (see Strategic Recommendation 1).

19 As per Section 75 of the Northern Ireland Act (1998) between persons of different religious belief, political opinion, racial group, age, marital status or sexual orientation; between men and women generally; between persons with a disability and persons without; and between persons with dependants and persons without.

# APPENDIX 1: TERMS OF REFERENCE

## A review of how effectively probation approved premises contribute to resettlement, rehabilitation and public protection outcomes in Northern Ireland

### Introduction

Criminal Justice Inspection Northern Ireland (CJI) proposes to undertake a thematic review of how effectively approved premises<sup>20</sup> contribute to resettlement, rehabilitation and public protection outcomes in Northern Ireland. The review will also examine the role of criminal justice organisations, including the Probation Board for Northern Ireland (PBNI), Northern Ireland Prison Service (NIPS), and Police Service of Northern Ireland (Police Service) in supporting that work.

There are seven premises in Northern Ireland which accommodate PBNI supervised offenders who pose the highest level of risk to the public on their release from custody.

Plans to include the inspection of approved premises in CJI's statutory remit are currently being taken forward by the Department of Justice. For the purposes of this current work the then Minister of Justice has authorised CJI to conduct a review under Section 47(4) of the Justice (Northern Ireland) Act 2002.<sup>21</sup>

For this review CJI will adopt its 2008 definition of approved premises i.e. 'Hostels which receive Supporting People funding specifically for offenders, allocate bed spaces for criminal justice referrals and apply PBNI Standards.' CJI has published two previous reports of approved premises, in 2008 and 2013, and in the intervening period conducted a series of unannounced visits to assess experiences and outcomes for those placed there. CJI inspections of Probation Practice (2020)<sup>22</sup>, Public Protection (2019)<sup>23</sup> and Resettlement in the Northern Ireland Prison Service (2018)<sup>24</sup> also considered matters related to approved premises.

20 There is no official definition of Approved Premises in Northern Ireland, however, the 2008 CJI Inspection of Approved Premises classified them as 'Hostels which receive Supporting People funding specifically for offenders, allocate bed spaces for criminal justice referrals and apply PBNI Standards'. The subsequent 2012 PBNI Best Practice Framework incorporating NI Standards referred to 'approved hostels' which were defined as 'a PBNI Approved Hostel refers to a hostel place to which PBNI can refer in its own right and, where required and relevant, on behalf of the Northern Ireland Prison Service (NIPS), persons who need supported and supervised accommodation'.

21 Section 47(4) of the Justice (Northern Ireland) Act 2002 states "The Department of Justice may require the Chief Inspector to carry out a review of any matter relating to the criminal justice system in Northern Ireland (apart from a matter relating to a court or tribunal)."

22 CJI, *Probation Practice in Northern Ireland, An inspection of the Probation Board for Northern Ireland*. Available at: [Probation Practice in Northern Ireland: An inspection of the Probation Board for Northern Ireland \(cjini.org\)](https://www.cjini.org/probation-practice-in-northern-ireland-an-inspection-of-the-probation-board-for-northern-ireland)

23 CJI, *Lawful Duty: Public Protection Inspection III: A thematic Inspection of the Public Protection Arrangements for Northern Ireland October 2019*. Available at: [Lawful Duty; Public Protection Inspection III: A thematic inspection of the Public Protection Arrangements Northern Ireland. \(cjini.org\)](https://www.cjini.org/lawful-duty-public-protection-inspection-iii-a-thematic-inspection-of-the-public-protection-arrangements-northern-ireland)

24 CJI, *Resettlement: An Inspection of Resettlement in the Northern Ireland Prison Service, May 2018*. Available at: [Resettlement: An inspection of resettlement in the Northern Ireland Prison Service \(cjini.org\)](https://www.cjini.org/resettlement-an-inspection-of-resettlement-in-the-northern-ireland-prison-service)

The current review will be conducted in line with CJI's processes for inspection.

## Context

Approved premises act as a transition or half-way house between prison and settlement in the community, and have two main roles:

- to help rehabilitate and resettle some of the most serious offenders; and
- to make sure that the public are protected in the offenders' early months in the community.

The seven approved premises are: Bonds Hill, Centenary House, Dismas House, Edward Street, Innis Centre, MUST and Thompson House. Across Northern Ireland they provide 91 dedicated places for offenders referred directly by the PBNI. Two accommodation providers (MUST and Bonds Hill) accept women in a mixed gender establishment. Funding for these places is provided by the Northern Ireland Housing Executive (NIHE) under the Department of Communities Supporting People Programme<sup>25</sup>. All seven premises are managed by voluntary and community sector organisations. Four of the premises (Dismas House, Edward Street, The Innis Centre and Thompson House) only accept referrals from the PBNI while the remainder also accommodate other service users.

The allocation of places in approved premises is managed by a weekly allocation panel which is chaired by a PBNI Area Manager and is attended by the manager of each of the approved premises. While resident in an approved premises, offenders are managed in accordance with PBNI Practice Standards v1.7 May 2021.

## Aims of the review

The focus of the review will be on how approved premises in conjunction with criminal justice organisations contribute to achieving resettlement and rehabilitative outcomes and public protection.

The broad aims of the review are to examine:

- how criminal justice policy and practice ensures that hostels deliver identifiable resettlement, reduced reoffending and public protection benefits;
- how well hostel capacity in Northern Ireland meets the needs of offenders;
- the contribution of pre-release work to successful periods of hostel residence;
- how well approved premises are involved in the assessment, planning and review work with residents to support them to achieve public protection, rehabilitation and resettlement goals;
- how well hostel regimes contribute to offenders achieving planned public protection, rehabilitation and resettlement goals;
- the effectiveness of partnership working between approved premises and criminal justice organisations in promoting effective outcomes;

<sup>25</sup> *The Supporting People Programme helps people to live independently in the community. The programme grant funds 86 delivery partners that provide over 850 housing support services.*

- the effectiveness of move-on arrangements;
- how well staff working in approved premises are supported to achieve good resettlement and public protection outcomes for offenders; and
- any other matters arising in the course of the review which impact on resettlement and public protection outcomes for those residing there.

## Methodology

The review will be based on the CJI Inspection Framework, the three main elements of the inspection framework are:

- Strategy and governance;
- Delivery; and
- Outcomes.

CJI has developed a framework setting out the criteria which will be used to assess the quality of work undertaken at approved premises. The criteria is drawn from previous inspections of approved premises and informed by His (formerly Her) Majesty's Inspectorate of Probation's inspection standards, effective practice guides and research. Equality and fairness form an integral part of any inspection undertaken by CJI and these themes will be also examined under this framework. The framework criteria only applies to residents of approved premises and not to other hostel residents.

CJI are cognisant of the current circumstances and uncertainty arising from the COVID-19 pandemic including the impact on the everyday work of inspected organisations and this will inform designing and carrying out fieldwork for the review (see below) and may impact timing.

## Design and Planning

### *Preliminary research*

Preliminary discussions have taken place with a number of organisations and the managers of the approved premises.

### *Benchmarking, research and data collection*

Collection of benchmarking information and data, where available, from other jurisdictions and sectors in Northern Ireland, and review of inspection and research reports will be undertaken.

### *Contact with agencies*

Terms of reference will be prepared and shared with the managers of approved premises, the PBNI, NIPS, the Police Service and NIHE. Liaison officers from the organisations should be nominated for the purposes of the review.

Policies and procedures, management information, minutes of meetings and related documentation from the organisations being reviewed will be requested and examined.

## Delivery

### *Stakeholder consultation*

The following stakeholder organisations will be consulted:

- PBNI;
- NIPS;
- the Police Service;
- NIHE;
- Parole Commissioners for Northern Ireland;
- Community and voluntary sector organisations providing services to residents of approved premises; and
- Health and Social Care Trusts.

### *Self-assessment*

Approved premises, the PBNI, the NIPS and the Police Service will be asked to undertake a self-assessment, which will be reviewed by CJI prior to the commencement of fieldwork.

### *Development of fieldwork plan*

The fieldwork plan will include:

- on-site fieldwork at each approved premise to meet hostel managers, staff and residents, make observations and review records;
- meetings with staff and managers in the PBNI, the NIPS, the Police Service and the NIHE involved in supporting the operation of approved premises; and
- the completion of case reviews charting the offender's journey from custody to successful resettlement.

The views of residents at each approved premise will be sought through semi-structured interviews. Focus groups/interviews with those approaching release from custody will also be conducted.

### *Initial feedback to agency*

On conclusion of the fieldwork the evidence will be collated, triangulated and analysed and emerging recommendations will be developed. CJI will then present the findings to appropriate organisations.

### *Drafting of report*

Following completion of the fieldwork and analysis of data a draft report will be shared with the relevant bodies including approved premises management, the PBNI, the NIPS, the Police Service and the NIHE and any other relevant stakeholders for factual accuracy check. The Chief Inspector will invite bodies, where appropriate, to complete an action plan within six weeks to address the recommendations and if the plan has been agreed and is available it will be published as part of the final review report. The review report will be shared, under embargo, in advance of the publication date with relevant bodies.

### *Publication and Closure*

A report will be sent to the Minister of Justice for permission to publish.<sup>26</sup> When permission is received the report will be finalised for publication. A press release will be drafted and shared with approved premises management, the PBNI, the NIPS, the Police Service and the NIHE prior to publication and release. A publication date will be agreed and the report will be issued.

### *Indicative Timetable*

Scoping/research: December 2021-May 2022.

Fieldwork: June-August 2022.

Draft report to agencies/approved premises for factual accuracy: November 2022.

Publication: Early 2023.

The above timetable may be impacted by factors such as the easing of COVID-19 public health restrictions and subsequent impact on the ability to conduct fieldwork where it needs to be undertaken face to face. Organisations will be kept advised of any significant changes to the indicative timetable.

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<sup>26</sup> In the absence of a Minister for Justice, permission to publish is sought from the Permanent Secretary of the Department for Justice.



## APPENDIX 2: METHODOLOGY

### Desktop research and development of inspection Terms of Reference and question areas

Reports, statistics and other documents (including previous inspection reports) relevant to approved premises were reviewed. CJI developed a framework to assess the quality of work undertaken at approved premises. The criteria was drawn from previous inspections of approved premises and informed by His (formerly Her) Majesty's Inspectorate of Probation's inspection standards, effective practice guides and research. A number of meetings with stakeholders were conducted prior to the development of the Terms of Reference. The Terms of Reference and assessment criteria were published on the Criminal Justice Inspection web site.

### Self-assessment and document review

Each approved premise and the Probation Board for Northern Ireland, the Northern Ireland Prison Service and the Police Service of Northern Ireland were invited to complete a self-assessment against the CJI Inspection Framework developed for this review. The self-assessment materials were reviewed in advance of fieldwork and were used to inform the fieldwork plan and interview question sets.

### Fieldwork

Inspectors visited the seven approved premises from 24 June 2022 to 15 July 2022. During each site visit Inspectors:

- sampled a range of records;
- observed the physical condition of the hostel and looked at the facilities available to residents;
- met with staff and managers;
- interviewed residents; and
- conducted case reviews charting a resident's journey from their arrival at the hostel, their management there and the journey from arrival to their departure.

Fieldwork at approved premises comprised:

- 12 in-depth reviews of individual cases and examination of 16 other individual case files;
- 20 interviews with approved premises' staff;
- eight interviews with managers of approved premises;
- 20 interviews with current residents; and
- three other on site meetings with two homeless inclusion nurses and a well-being practitioner.

Fieldwork was also conducted with the Probation Board for Northern Ireland, the Northern Ireland Prison Service and the Police Service of Northern Ireland during July and August 2022. Eleven focus groups/interviews were conducted with a range of staff and managers.

This included meetings with:

|   |  |
|---|--|
| <b>Probation Board for Northern Ireland</b> | <ul style="list-style-type: none"> <li>• Probation Officers responsible for supervising residents at approved premises.</li> <li>• Probation Officers and managers based in prisons responsible for referring service users to the hostel panel.</li> <li>• Area managers whose staff are responsible for supervising residents of approved premises.</li> <li>• An area manager who chairs the weekly hostel allocation panel.</li> <li>• The Assistant Director for Risk.</li> </ul> |
| <b>Northern Ireland Prison Service</b>      | <ul style="list-style-type: none"> <li>• Prisoner Development Unit Governors and Senior Officer, Burren House.</li> </ul>  |
| <b>Police Service of Northern Ireland</b>   | <ul style="list-style-type: none"> <li>• PPANI Coordinator and former chair of the PPANI Accommodation Sub-Group.</li> <li>• Offender Investigation Unit Officers and Sergeant.</li> <li>• Neighbourhood Policing Team Officers and Sergeants.</li> </ul>  |

### Profile of residents of approved premises when fieldwork commenced

- 80 of the 93 approved premises beds were occupied.
- All but one resident were male.
- All but six were subject to post custody licence.
- Eight were life sentenced prisoners who were being tested under the Northern Ireland Prison Service pre-release testing scheme.
- 54% were subject to a Determinate Custodial Sentence licence.
- 50% of residents were subject to public protection arrangements.
- The majority of residents (69 of 80) were assessed by the PBNI as presenting a medium or high likelihood of reoffending. A small proportion of residents were assessed by the PBNI as presenting a significant risk of serious harm (6 of 80).
- Few residents (13 of 80) were employed or enrolled in education or skills training.

### Case review profile

- 10 were male.
- All were white.
- Average age was 42 years.
- Four residents had committed sexual offences, three violent offences and four other offence types.
- Seven were assessed as high likelihood of reoffending and four as presenting a significant risk of serious harm when referred to the approved premise.
- Six cases were subject to public protection arrangements: three at Category 3, one at Category 2 and two at Category 1.
- The average length of stay was 184 days (6 months). The shortest stay was one day and the longest was 525 days (17.5 months).

### Stakeholder consultation

CJI also invited stakeholders who had an interest in or provided services to approved premises to meet with Inspectors.

Inspectors met with representatives from the following organisations:

- EXTERN Floating Support;
- Housing Rights Northern Ireland;
- NIACRO;
- Northern Ireland Housing Executive;
- Parole Commissioners for Northern Ireland;
- Public Protection Branch (responsible for recall), Department of Justice;
- Start 360, Engage; and
- The Turnaround Project.

## APPENDIX 3: PREVIOUS REPORT RECOMMENDATIONS

| An Inspection of the Probation Practice in Northern Ireland – 10 December 2020   | Based on 2022 review |
|--|----------------------|
| <p><b>Operational recommendation 3:</b><br/>Inspectors therefore recommend that the Probation Board for Northern Ireland should, within six months of publication of this report, review the effectiveness of its approach to information sharing with partner organisations who provide services at approved premises to ensure:</p> <ul style="list-style-type: none"> <li>the appropriateness of the data sharing procedures/Memorandums of Understanding in place;</li> <li>the appropriateness of referral forms and guidance documentation used;</li> <li>any outstanding staff awareness and training needs are met;</li> <li>compliance by relevant staff with the procedures in place; and</li> <li>that operational risk registers reflect the organisational risks of information sharing or failing to share information and the personal information held.</li> </ul> <p>It should be ensured that the information sharing approaches meet the needs of these partner organisations in respect of their service delivery and public protection responsibilities (paragraph 3.47).</p> | Partially achieved.  |
| An inspection of Approved Premises in Northern Ireland – 14 November 2013  | Based on 2022 review |
| The PBNI, NIHE, NIPS and Department of Justice (DoJ) should undertake joint research to estimate future demand for APs places (paragraph 1.10).  | Not achieved.        |
| The MUST management committee should, in conjunction with its statutory partners continue to review the respective advantages of joining a corporate parent body, or remaining under the stewardship of a local voluntary management committee. Due weight should be given to the benefits and challenges that attach to independence (paragraph 2.10).  | Achieved.            |
| The DoJ should clarify the arrangements for, and status of APs inspections undertaken by CJI (paragraph 2.21).   | Not achieved.        |
| The frequency and quality of APs managers file auditing should be developed in order to improve recording by keyworkers and other staff (paragraph 3.44).  | Achieved.            |
| The APs managers forum should seek a meeting with the Parole Commissioners to ensure each organisations perspective is understood in relation to evictions, decisions to release prisoners and recall them to custody (paragraph 3.56).  | Partially achieved   |

| A report on the Inspection of Approved Premises – 17 July 2008   | Progress reported during the 2013 inspection |
|--|--|
| <p><b>Key recommendation:</b></p> <p>Within the context of current strategic accommodation reviews each AP should devise a statement of purpose in consultation with the commissioners of their service – PBNI, NIHE and the Northern Ireland Prison Service (NIPS). AP funding levels should also be reviewed and henceforth related to the new statements of purpose (paragraph 2.16).</p> <ul style="list-style-type: none"> <li>• The PBNI and NISOSMC accommodation strategies should cross-refer to the APs’ statements of purpose (paragraph 2.22).</li> <li>• A review of current AP staffing profiles - numbers, grades and qualifications of staff – and future requirements should be a priority consideration in preparing the APs’ statements of purpose (paragraph 3.4).</li> <li>• A minimum specification should be agreed by commissioners and providers to articulate the physical security requirements of each AP. This should be linked into their statement of purpose (paragraph 3.10).</li> <li>• File recording standards should be developed and implemented across the AP estate in order to ensure uniformly high quality practice. These standards should be articulated in the statement of purpose drawn up by each AP (paragraph 3.22).</li> </ul> | <p><b>Achieved.</b></p>                      |
| <b>Other recommendations</b>   |  |
| <p>A staff rotation policy should be developed and implemented by each of the APs (paragraph 2.6).</p>   | <p><b>Achieved.</b></p>                      |
| <p>The remit of the AP managers’ forum should extend to incorporate senior managers on a regular basis, and to address key strategic issues as well as operational matters (paragraph 2.19).</p>   | <p><b>Achieved.</b></p>                      |
| <p>The commissioning agencies should approach the NIO and health providers to provide funding for APs (paragraph 3.15).</p>  | <p><b>Not achieved.</b></p>                  |
| <p>Terms of Reference (ToR) should be devised for the weekly allocation meeting. These ToR should take account of AP statements of purpose, and should include rotation of duties and ensure attendance of deputies when managers are unavailable (paragraph 3.29).</p>  | <p><b>Achieved.</b></p>                      |
| <p>The partner agencies should consider the merit of appointing an independent chair for the allocation panel, whose role could extend to chairing the bi-monthly managers forum, contribution to the proposed move-on arrangements and ensuring effective liaison between commissioners and providers (paragraph 3.29).</p>   | <p><b>Not achieved.</b></p>                  |
| <p>The commissioning agencies and APs should continue to seek support from statutory mental health services, and in their absence, explore the opportunity for partnership with a voluntary organisation to support the care and management of AP residents who require mental health support (paragraph 3.30).</p>  | <p><b>Not achieved.</b></p>                  |
| <p>AP referral documentation should be amended to explicitly convey information about applicants conduct while in custody and other relevant personal information (paragraph 3.36).</p>  | <p><b>Achieved.</b></p>                      |

| Other recommendations   |                      |
|---|----------------------|
| The NISOSMC should address the issue of minute circulation in conjunction with the APs and Designated Risk Managers (paragraph 3.42).   | <b>Not assessed.</b> |
| Subject to satisfactory outcome of the current pilot project, alcohol testing should extend to all APs, and drug testing should be introduced where necessary (paragraph 3.47).   | <b>Achieved.</b>     |
| PBNI should review its out-of-hours contact and standby arrangements (paragraph 3.50).  | <b>Achieved.</b>     |
| Each AP should be subject to regular formal monitoring by its parent body or management committee, and this monitoring should incorporate a written report to the full management body (paragraph 3.51).  | <b>Achieved.</b>     |
| Police should use their powers of arrest under Article 6 of the Criminal Justice (Northern Ireland) Order 2003 when AP residents breach bail requirements (paragraph 3.55).   | <b>Not assessed.</b> |
| Each AP should agree a clear protocol for evictions with the PBNI, and include other relevant agencies such as the Police Service and NIHE in the design and delivery of this protocol. It should identify that public protection is the priority, include a range of options for move-on, and ensure ready access to PBNI support in keeping with our recommendation at paragraph 3.51 (paragraph 3.56). | <b>Achieved.</b>     |
| We recommend the debate about new provision should be formally initiated by PBNI, NIHE and the NIPS. The debate should incorporate current AP providers and their commissioners, as well as other stakeholders, and should synchronise with current accommodation reviews and statements of purpose (paragraph 4.5).  | <b>Achieved.</b>     |

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