Multi-agency inspection

Assessing and managing offenders who present a high risk of serious harm 2009

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June 2009
Multi-agency inspection

Assessing and managing offenders who present a high risk of serious harm 2009

A joint report by the Social Work Inspection Agency, HM Inspectorate of Constabulary for Scotland and HM Inspectorate of Prisons

June 2009
This report presents the findings of a joint inspection by the Social Work Inspection Agency, Her Majesty's Inspectorate of Prisons and Her Majesty's Inspectorate of Constabulary for Scotland of the management of high risk of serious harm offenders. The inspection team comprised inspectors from each of the three inspectorates, reflecting the integrated approach expected from the agencies with responsibility for managing these offenders. We present our findings in the cross-cutting areas of risk assessment, risk management, and sharing information and working together effectively.

The responsibility for implementing the recommendations in this report lies with the Scottish Government and the agencies with responsibility for managing sex offenders and violent offenders. We recognise the important role that individual practitioners have in managing this group of offenders, and we consider it vital that they receive the right support in carrying out their duties in what can be a very demanding and stressful area of work.

In carrying out this inspection, we scrutinised the management of individual offenders, and listened carefully to practitioners and managers about all of the key issues affecting their work. Our thanks go to the Association of Directors of Social Work, the Association of Chief Police Officers in Scotland and the Scottish Prison Service whose co-operation enabled this inspection to occur. We also appreciated the important contribution individual practitioners, officers and managers made to the evidence at every stage. Inspectors encountered a wide range of representatives from health services and voluntary and statutory organisations during the inspection, and their contribution was important.

This report identifies where practice and procedures to minimise and manage risk can become better, and adds to the body of knowledge about the management of high-risk offenders in Scotland.

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The findings of this inspection show a mixed picture of how agencies manage offenders who pose a risk of serious harm, with variations across the country in risk assessment and risk management practice. Aspects of information sharing required significant improvement, for instance there were serious problems in social work and prisons access to the electronic Violent and Sex Offender Register (ViSOR) database, which therefore had unfulfilled potential to improve information sharing between agencies. There was also evidence that when a high-risk offender came into custody, information about risk often did not reach the receiving prison.

Community-based social work planning for sex offenders and violent offenders was often not good enough. One-third of the social work plans for sex offenders we reviewed lacked sufficient quality, and plans for two-thirds of serious violent offenders did not have any focus on risk management. Even when plans provided for home and unannounced visits, often these did not occur in practice.

The Multi-Agency Public Protection Arrangements (MAPPA) had improved the management of sex offender risk, and the Integrated Case Management (ICM) approach in prisons had improved the multidisciplinary management of prisoners through their sentence and up to the point of release. Agencies worked in a purposeful manner to protect the public from the risk posed by sex offenders, but the management of serious violent offenders was significantly less encouraging.

Health services in prisons could have contributed better to risk management planning during the custodial term, and in linking with community health colleagues at the time of release. In the community, health professionals involvement in attending and informing MAPPA meetings was very inconsistent, and generally at an unsatisfactory level.

Agencies were using a range of risk assessment tools. Whilst many practitioners said these helped to structure their assessments of risk of reconviction, many were also unclear about the critical importance of also assessing the risk of serious harm. Many police officers considered that they were carrying out unnecessarily detailed risk of reconviction assessments on offenders already screened as presenting a low risk of reconviction.
Recommendations for Scottish Ministers

1. That Scottish Ministers amend the MAPPA guidance quickly to ensure that MAPPA meetings always consider a full analysis of risk of serious harm to support defensible decision-making.

2. That Scottish Ministers publish national standards and guidelines for risk assessment practice. These should make clear that fully assessing risk of serious harm is necessary for both sex offenders and serious violent offenders.

3. That Scottish Ministers ensure that there is succinct, plain and unambiguous practical guidance for managers and practitioners on the MAPPA process.

4. That Scottish Ministers ensure that when prisoners who present a high risk of serious harm have home leave or an external work placement, there is an effective and multi-agency risk management plan for the period that the offender is on these activities.

5. That Scottish Ministers ensure that members of the judiciary considering risk assessments prepared by police and social work are familiar with the policy and procedures in place for such risk assessments and the strengths and limitations of the various risk assessment tools in use.

6. That Scottish Ministers co-ordinate action to ensure that prisons receive information timeously when an offender commences a sentence for a serious violent or sex offence.

7. That Scottish Ministers promote the effective integration of health services in MAPPA, in order that the information they hold and their expertise can contribute better to improved offender management.

8. That Scottish Ministers undertake a national review of joint and integrated working practices in place between police, social work services and other relevant agencies, including co-located units, in order to identify and disseminate good practice.

Recommendations for Scottish Ministers and agencies

9. That Scottish Ministers and responsible MAPPA authorities reassess whether it is necessary for police to carry out a full SA07 assessment with every offender assessed as low risk of reconviction using RM2000 and managed at MAPPA level 1.

10. That Scottish Ministers and agencies develop and implement formal protocols for information sharing between agencies about serious violent offenders.

11. That Scottish Ministers, the National Policing Improvement Agency (NPIA) and responsible authorities urgently address the reasons underlying the poor use of the ViSOR database by agencies other than police.
Recommendations for agencies

12. That Chief Social Work Officers ensure that social workers preparing home background reports interview the prisoner and visit the prospective release address. Reports must always specifically address risk issues.

13. That Chief Social Work Officers ensure that every sex offender and serious violent offender on supervision has a full and current risk of harm assessment. This must be available to all those tasked with the responsibility for risk management.

14. That Chief Constables, the Scottish Prison Service, and Chief Social Work Officers ensure that sex offenders and serious violent offenders subject to supervision have an effective risk management plan tailored to their risk and needs.

15. That the Scottish Prison Service connect the operation of the Risk Management Groups directly to the ICM framework. This would eliminate duplication and increase the coherence of the system.

16. That the Scottish Prison Service develop a strategy for the more effective engagement of those prisoners who refuse to participate in a change programme, and ensure that ICM annual case conferences occur for every offender at the correct intervals.

17. That Chief Constables, the Scottish Prison Service, and Chief Social Work Officers arrange appropriate training for their staff involved in MAPPA to ensure that they understand and consistently meet the needs of the Parole Board.

18. That Chief Constables, the Scottish Prison Service, and Chief Social Work Officers formally select employees dealing with high-risk offenders, and ensure they receive an appropriate range of support, training and professional advice, including training on giving evidence in court.

19. That MAPPA ‘responsible authorities’ establish local strategic boards to oversee the performance management and quality of local MAPPA operations and plan for the future improvement and development of the system.
CHAPTER 1

Terms of reference

Reasons for the inspection

1.1 Agencies working with sex offenders and serious violent offenders who pose a high risk of harm must take every reasonable step to protect the public, and services must be effectively organised, co-ordinated and delivered. Even when services work well, risk management does not eliminate risk and it is possible for determined offenders to commit serious offences. Nevertheless, it is important that agencies do everything they can to assess and manage risk effectively. The extent to which they were achieving this was the focus of this inspection.

1.2 The main agencies working to assess and manage these risks are the local authorities through their criminal justice social work services, the police, and the Scottish Prison Service. Other services may also be involved, including housing, health, and the voluntary sector.

1.3 The inspection examined arrangements for managing offenders whose past offending meant that they might cause serious harm in the future. Its aims were to identify what was working well, what needed to improve, and to make recommendations to Scottish Ministers and the agencies with responsibility for managing sex offenders and violent offenders.

1.4 The findings are relevant to all organisations and agencies involved in the assessment and management of offenders posing a high risk of serious harm.

The policy and legislative context

1.5 A Commitment to Protect\(^1\) led to an increased emphasis on recognising and managing risk in the community. The Report of the Expert Panel on Sex Offending (the Cosgrove Report)\(^2\) led to the 2005 national concordat between relevant agencies to share information\(^3\). The Committee on Serious Violent and Sexual Offenders, chaired by Lord MacLean, reported in 2000\(^4\), and led to the eventual creation of the Risk Management Authority\(^5\) (RMA) that began operations in 2005.

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1 A Commitment to Protect; Supervising Sex Offenders: Proposals for More Effective Practice, Social work Services Group, 1997: http://www.scotland.gov.uk/library/documents1/sw-acom0.htm

2 Reducing the Risk – Improving the response to sex offending; Scottish Executive, 2001 http://www.scotland.gov.uk/Publications/2001/06/9284/File-1

3 Information Sharing Steering Group report – sharing information on sex offenders; Scottish Executive Justice Department, November 2005: http://openscotland.gov.uk/Publications/2005/10/27174205/42063

4 Report of the Committee on Serious Violent and Sexual Offenders; Scottish Executive, 2000: http://www.scotland.gov.uk/maclean/docs/svso-00.asp

5 See glossary
1.6 More recently, two policy documents, the *National Strategy on Offender Management*\(^6\) and *Protecting Scotland's Communities; Fair, Fast and Flexible Justice*, both stressed the importance of agencies working together effectively to enhance public protection. They emphasised the need for better information sharing between services; more robust risk assessment; and strengthened risk management practices.

1.7 The Management of Offenders etc. (Scotland) Act, 2005 placed a statutory function on *police, local authorities, the Scottish Prison Service and health services* to:

‘...jointly establish arrangements for the assessment and management of risk posed [by certain offenders].’

This led to the introduction of the Multi-Agency Public Protection Arrangements (MAPPA) in April 2007, which presently relate to the management of registered sex offenders and restricted patients. Further developments were the prison-based Integrated Case Management (ICM) system (2006), and the granting of controlled access for local authorities and the Scottish Prison Service to the Violent and Sex Offenders Register (ViSOR) database.

1.8 At the time of the inspection, MAPPA had been running for just over one year and the ICM procedures for slightly longer.

1.9 The *Concordat between Local and National Government* (2007) and the related Single Outcome Agreements, underlined the importance of building safer, stronger communities by reducing re-offending, and tackling factors associated with crime, such as drug and alcohol misuse and lack of settled accommodation.

Aims and scope

1.10 The two main aims of the inspection were:

- to review the quality of pre-release and post-release arrangements for offenders who posed a *risk of serious harm* to the public; and
- to identify ways to improve the effective management of this category of offender with particular reference to sharing information and working together.

1.11 The inspection team defined risk of serious harm in the following way:

‘A risk of harmful behaviour which is life threatening and/or traumatic and from which the victim’s recovery, whether physical or psychological, can be expected to be difficult or impossible.’\(^8\)

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\(^7\) Scottish Government, 2008: [http://www.scotland.gov.uk/Publications/2008/12/16132605/0](http://www.scotland.gov.uk/Publications/2008/12/16132605/0)

\(^8\) This definition is adapted from the OASys Manual (Home Office, 2002). The Risk Management Authority (RMA) for Scotland adopted this definition in its published ‘Standards and Guidelines for Risk Assessment’ (2006). These standards and guidelines applied to risk assessment in relation to the Order for Lifelong Restriction.
1.12 We selected a sample of offenders who had committed serious sex or violent offences released from one of five selected prisons during an eighteen-month period between 2006 and 2007. All of the offenders had committed serious sex and violent offences that indicated they presented a high risk of harm. All were subject to statutory supervision on release. All the offenders were male. Two were under 21 years of age.

Methodology

1.13 Appendix 1 describes the inspection methodology. In summary, it had three main phases. The first and second phases examined work undertaken with offenders in prison and in the community. Inspectors visited the prisons which had held the offenders, and the local areas to which they had returned after release. We reviewed each case fully, scrutinising case records and meeting with practitioners and the offenders where possible. We identified three local authority areas to meet with practitioners, managers, and key stakeholders in focus groups and interviews. These local authority areas had different geographic and demographic characteristics and were frequently home areas for the offenders in our sample.

1.14 In the third phase, inspectors asked representatives from relevant organisations such as the Parole Board and the RMA for their views on assessing and managing high-risk offenders. We organised a one-day national consultation event to bring together staff from a range of agencies to discuss practice and procedures in respect of high risk of serious harm offenders.

1.15 In addition, inspectors visited every police force in Scotland to meet with operational and management teams to assess progress with the police implementation of MAPPA and to examine police capacity to respond to a missing or wanted offender.

1.16 Scottish Ministers commissioned this report. It contains findings and recommendations for them and for the Scottish Prison Service. We also make recommendations directly to local authorities and police forces, which act independently of Scottish Ministers.

Structure of the report

1.17 The report presents its findings in three chapters:

- assessing risk;
- managing risk; and
- sharing information and working together.

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9 Five of the substitute offenders (see appendix 1) provided by a local authority met all the criteria but were subject to Probation Orders at the time of our inspection.
CHAPTER 2

Assessing risk

Summary
Assessment of the risk of serious harm was poor or absent in many files for sex offenders and violent offenders. However, there had been good progress in rolling out nationally agreed tools for assessing the reconviction risk for sex offenders, and agencies used these routinely. Risk assessment of violent offenders was less well developed.

There were variations across the country in how the agencies worked together to assess risk and use the frameworks provided. We concluded that practitioners were sometimes confused about what risk of serious harm meant as compared to risk of reconviction. There was a need for national standards and guidelines to set out very clearly for staff the minimum expectations for risk assessment, including the risk of serious harm.

National policy requires police to conduct detailed risk assessments on registered sex offenders who were not subject to social work supervision in the community, even when they had already screened them as low risk of reconviction using an appropriate screening tool. We considered that Scottish Ministers and agencies should review this practice.

The need to assess risk
2.1 Risk assessment is a vital part of the risk management process. By applying judgement, and using relevant structured risk assessment tools, practitioners and clinicians arrive at an analysis of the likelihood of reconviction, and assess the potential impact that the offending behaviour might have. More sophisticated risk assessments also examine the scenarios in which risk increases, and those in which it reduces.

2.2 Risk assessment is inherently a less than exact process. With even the best risk assessment practice, there will still be occasions when an offender behaves unpredictably, or where risk proves to be more or less severe than predicted. When assessing risk, it is critical that agencies use approaches that are defensible, evidence based and that stand up to scrutiny.

2.3 The table overleaf sets out the risk assessment tools that were in widespread use at the time of the inspection, and about which we make comment throughout this chapter.
<table>
<thead>
<tr>
<th>Name of tool</th>
<th>Risk assessed</th>
<th>Results</th>
<th>Used with</th>
<th>Used by</th>
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<tr>
<td>Risk Matrix 2000 (RM2000)</td>
<td>Reconviction (screening) as a proxy measure for reoffending</td>
<td>Predicts the risk of reconviction of a male sex offender within a 15-year period. An actuarial basis means that it is highly objective, and provides no information to guide treatment. Has proven predictive validity for offenders in Scotland.</td>
<td>Sex offenders</td>
<td>Police/Social workers</td>
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| Stable and Acute 2007 (SA07) | Reconviction as a proxy measure for reoffending                               | **Stable Part** – estimate of reconviction risk that is a proxy measure for likelihood of reoffending. Gives a profile of need that is useful to inform a treatment plan.  
**Acute Part** – monitors acute risk factors that can signal imminent risk. | Sex offenders        | Police/Social workers  |
| Risk Assessment 3 (RA3)      | Harm (screening)                                                             | Screens the key factors known to be associated with serious harm and records the evidence sources consulted. Results in a provisional judgement of low, medium or high risk of harm. | All offenders        | Social workers         |
| Risk Assessment 4 (RA4)      | Harm                                                                          | A structure to fully analyse the risk of harm, including identifying who may be at risk, what the risky behaviours are, the likely consequences of offending behaviour, and when the risk is greater or lesser. | Sex offenders and violent offenders | Social workers         |
Current policies and practice for risk assessment

2.4 The Social Work Services Inspectorate (SWSI) published a ‘risk assessment guidance framework’ (RAGF) in 2000\textsuperscript{10}. There was no requirement to use the framework although two of the tools included in the RAGF, the RA3 and RA4, were still in regular use to screen for and assess risk of harm. More recently, the Scottish Government had initiated a national policy group to oversee developments in risk assessment practice and how all of the different tools in use connected together\textsuperscript{11}.

2.5 Another national policy initiative sought to introduce a new risk assessment approach for all offenders, which included a section for full risk of harm assessment\textsuperscript{12}. Scottish Ministers and partners from local authorities, prisons and police services had been working on this project for a number of years, but had encountered challenges in finding an acceptable and secure means to make the system available electronically. In early 2009, the Government constituted a new multi-agency project group with a remit to progress this project to completion. This risk assessment approach has the capacity to improve the assessment of risk of serious harm for sex offenders and for violent offenders, and it is very important that this project reaches a successful conclusion as soon as possible.

Sex offenders

2.6 Recommendation 16 of the Cosgrove Report stated that ‘all agencies involved in work with sex offenders should adopt the structured clinical approach to risk assessment and should recognise structured tools as part of this approach’. A structured clinical approach means that assessors should use evidence-based risk assessment tools to inform their professional judgement about risk.

2.7 The Association of Chief Police Officers Scotland (ACPOS), the Scottish Prison Service (SPS), and the Association of Directors of Social Work (ADSW) agreed on a national framework for the risk assessment of sex offenders. This framework involved two stages:
   ii) The application of a two-part assessment tool called the Stable and Acute 2007 (SA07).

2.8 The intended function of the RM2000 was to screen a larger group of offenders to identify who needed further assessment. The policy of assessing every registered sex offender with the much more time-demanding SA07 appeared to contradict the RM2000 screening role. This requires review.

\textsuperscript{10} Updated in 2002 with guidance on risk management practice.
\textsuperscript{11} This was the Risk Assessment Pathway Working Group (RAPWG), convened in 2008 by the Scottish Government, Criminal Justice Directorate.
\textsuperscript{12} This approach is the Level of Service Case Management Inventory (LSCMI).
Chapter 2: Assessing risk

2.9 To assess properly overall risk, we considered that it was necessary to bring together both the risk of reconviction and the risk of serious harm. Neither the RM2000 nor the SA07 had the function of assessing the risk of serious harm. At the time of the inspection, the only applicable assessment tools for recording an assessment of the risk of serious harm were the RA3 and RA4. There were wide variations across the country in whether and how social workers used the RA3 and RA4, and police had not received training to use these tools.

2.10 We considered that independent academic verification and testing of risk assessment tools is necessary to establish confidence that they are as accurate as claimed. At the time of the inspection, there were no such validation studies to support the SA07, although it was evidence-based and came from a well-known academic source. We heard that a number of other international jurisdictions had also adopted the SA07. The RM2000 had a number of validation studies supporting it, including a Scottish validation, and the process to evaluate and validate the SA07 in Scotland has commenced.

2.11 Police, social work, and prisons had agreed with the Scottish Government to produce an SA07 assessment on all registered sex offenders by the end of October 2008. Inspection evidence confirmed that this work was in progress, although the police in particular expressed that the tight deadline involved had resulted in some of the SA07 assessments undertaken being of diminished quality.

Violent offenders

2.12 There were no risk assessment tools available to social workers and police to assess the reconviction risk of violent offending. Such tools did exist\(^\text{13}\), but they required specific expertise and training not routinely held by social work practitioners and police officers. At the time of the inspection, the RMA was working to advise the Scottish Government on a framework suitable to assess risk in violent offenders. Assessment of the risk of serious harm is equally as important for violent offenders as for sex offenders.

Findings

Practitioner views about using risk assessment tools

2.13 Practitioner views varied considerably across all of the agencies about the usefulness of risk of reconviction tools such as the RM2000 and the SA07.

2.14 As set out in ‘Registering the Risk’\(^\text{14}\), the RM2000 did not provide full assessment coverage of all sex offender types\(^\text{15}\) but is still being used to assess these groups. Practitioners and managers considered this a serious limitation in their ability to assess and manage risk.

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13 For further details, see the relevant section of the RMA publication, RATED, which provides a full inventory of risk assessment tools and their target populations. Available at: \(\text{http://www.rmascotland.gov.uk/ViewFile.aspx?id=280}\)

14 This publication is available here: \(\text{http://www.scotland.gov.uk/Publications/2005/10/19111606/16081}\)

15 These groups included sexual murderers; internet only offenders; mentally disordered offenders; offenders with a cognitive impairment; adolescents; and female sex offenders.
2.15 Some practitioners appreciated the depth of assessment that the SA07 provided, particularly its ability to help inform a coherent treatment plan. Others thought that SA07 and RM2000 often gave contradictory results, which they found unhelpful. Some found it helpful that SA07 could highlight when an offender’s risk level had reduced as well as increased, providing useful evidence about the level of supervision required at different points in time.

2.16 Many police officers commented that applying the ‘stable’ part of SA07 with MAPPA level 1 offenders not subject to social work supervision was time consuming and did not yield obvious benefits. It generated information about the individual offence-related needs of the offender, but police alone were in no position to arrange treatment programmes.

2.17 Police officers said they applied the ‘acute’ part of SA07 with offenders not under social work supervision and managed at MAPPA level 1. Many such offenders had very infrequent contact with the police, in some instances six monthly or annually. We think that requiring police to apply the ‘acute’ tool with this population at this level of frequency is problematic.

2.18 There was evidence that the introduction of the SA07 had led to the end of risk of harm assessments for sex offenders in some local authority social work areas. We considered it likely that this was symptomatic of widespread confusion between assessing risk of harm and risk of reconviction. While agencies might wish to limit the amount of paperwork and assessment tools in use, we considered that every sex offender subject to social work supervision should always have an up to date assessment of risk of harm.

Quality of risk assessment practice in prison

2.19 Prison-based social workers assessed the risk of serious harm using the RA3 and RA4. Sex offenders typically had an assessment of their reconviction risk with the RM2000. In files that were more recent, there was evidence (for sex offenders) that the SA07 assessment informed how prisons managed offenders during their sentences.

2.20 In about one-half of files, there was evidence of good risk assessment practice. In these, there was evidence of detailed consideration of risk of harm as well as risk of reconviction and good analysis leading to a well-structured assessment. This supported the creation of coherent risk management plans. However, in some files there was a lack of quality information about a prisoner upon their arrival in prison, which made the compilation of an initial risk assessment more difficult.

2.21 It was the Parole Board’s view that prison-based social work reports containing analysis and coherent risk assessments were much more useful to them than those that were overly descriptive with little analysis.

2.22 The prison-based social work reports to the Parole Board we reviewed were generally of a high standard. Paperwork notifying local areas about the possible or planned release of a schedule 1\textsuperscript{16} offender was effective in the majority of files. Although there were some strong

\textsuperscript{16} Schedule 1 offenders include those who have committed a specific offence against a child as defined in Schedule 1 of the Criminal Procedure (Scotland) Act 1995. In general terms, these are sexual or violent offences, or ones that involve cruelty or neglect.
examples of good home background reports prepared by community-based social workers, others were poor and sometimes not based on recent visits. They often failed to address risk issues. We consider that social workers preparing home background reports for the Parole Board on sex offenders or serious violent offenders must interview the prisoner and visit the proposed release address, with a clear focus on risk assessment.

Quality of risk assessment practice in the community

2.23 Police were using the RM2000 consistently, and completing the SA07 on all registered sex offenders. Practitioners from police and social work told us that in some areas police and social workers carried out the SA07 assessments together, even when social workers did not have statutory responsibility for supervising the offender. In other areas, we heard that police would carry out the SA07 on their own. We were aware that the authors of the SA07 had suggested that agencies should use it in partnership, so this latter practice contradicted that guidance.

2.24 Most social work files had risk of reconviction assessments. For sex offenders, these were most often tools specific to sex offender risk, typically the RM2000 and SA07. Many of the files we reviewed had no evidence or poor evidence of risk of harm assessment. MAPPA meetings routinely incorporated the risk of serious harm in their decision-making. We considered that such discussions should rest on prior full written analysis of the risk of serious harm, and that practice in this required urgent improvement.

2.25 Social work practitioners thought that risk of serious harm assessment remained a poorly understood concept. Some staff carried out full risk of serious harm assessments only on sex offenders. Some did them for both sex and violent offenders. Others did not do such assessments for either violent or sex offenders. We considered that this level of variation was unacceptable.

2.26 Given the severity of the offences perpetrated by the offenders in our sample, all of whom were subject to statutory supervision, we considered that every one should have had an assessment of risk of serious harm using an appropriate tool such as the RA4. Only a minority of sex offenders, and a slightly higher proportion of violent offenders, had such an assessment on file. In many instances, the prison-based social worker had carried out an RA4 assessment that the community-based worker had not updated after release.

Appropriateness of risk assessment tools

2.27 Some social work practitioners thought that general reconviction assessment tools were inappropriate for sex offenders. The RMA advised us that applying a general reconviction tool with sex offenders, along with tools that specifically predicted sexual reconviction, could add further depth to the risk assessment.
Staff training and support in risk assessment

2.28 Police, social work and prison staff had received training in using the RM2000 and the SA07. Staff had mixed views about the appropriateness of these tools and the quality of the training they received having gained subsequent experience in applying them with offenders. These attitudes ranged from confidence in the tools through to scepticism and anxiety. Some were concerned that the SA07 was susceptible to offender deception as it relied on self-disclosure. We considered that training for risk assessors should enable them to understand the strengths and limits of the tools, and to reinforce that their function is to assist them in making judgements about risk.

Recommendations for Scottish Ministers

- That Scottish Ministers amend the MAPPA guidance quickly to ensure that MAPPA meetings always consider a full analysis of risk of serious harm to support defensible decision-making.
- That Scottish Ministers publish national standards and guidelines for risk assessment practice. These should make clear that fully assessing risk of serious harm is necessary for both sex offenders and serious violent offenders.

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- That Scottish Ministers and responsible MAPPA authorities reassess whether it is necessary for police to carry out a full SA07 assessment with every offender assessed as low risk of reconviction using RM2000 and managed at MAPPA level 1.

Recommendations for agencies

- That Chief Social Work Officers ensure that social workers preparing home background reports interview the prisoner and visit the prospective release address. Reports must always specifically address risk issues.
- That Chief Social Work Officers ensure that every sex offender and serious violent offender on supervision has a full and current risk of harm assessment. This must be available to all those tasked with the responsibility for risk management.
CHAPTER 3

Managing risk

Summary

One-third of social work supervision plans for sex offenders we reviewed were not good enough and home visits and unannounced visits to sex offenders by social workers were not occurring as set out in those plans. Social work planning for serious violent offenders was generally of a poor standard, with two-thirds having no risk management content of any kind on record.

The police were entering supervision plans consistently on the ViSOR database, but the detail in these varied between MAPPA areas. Social work files often contained separate supervision plans for sex offenders. There was potential in the ViSOR database to create one unified supervision and management plan for sex offenders, and in future for serious violent offenders too.

We concluded that the MAPPA had improved how agencies worked together and made joint decisions about how to manage sex offenders. Generally, police and social work services were committed to this joint work, and there was evidence of positive contributions from housing services. The Integrated Case Management system in prisons had improved the way agencies worked together during the prison term and immediately before release.

There were aspects of practice that required improvement. For instance, in our sample of prison records, in one-half of instances the prisoner had not had an annual ICM case conference. Some practitioners were unclear about the relationship between assessing risk and risk management, uncertain about how the former influenced the latter.

Staff involved in managing high risk of serious harm offenders often found the work stressful, demanding and challenging. Social workers and police officers were acutely conscious that their role had a significant bearing on public safety. Many staff considered that their agencies could do more to support them in their work.

There were gaps in the supervision of high risk of harm prisoners granted home leave or an external work placement, and we considered that this required remedial action.

The need to manage risk

3.1 Managing risk effectively involves minimising the potential for serious harm arising from the behaviour of sex offenders and violent offenders who pose a high risk of serious harm. It entails anticipating the scenarios where risk of harm is likely to be most prevalent and putting in place appropriate safeguards to protect against them. The main responsibility for this lay with local authorities, the police, and the Scottish Prison Service. Other organisations were involved, including voluntary organisations and health services.
3.2 Managing risk well means using risk assessment information to make appropriate plans to help prevent further offending. Those plans should be specific, measurable, achievable, realistic and time bound (SMART). The plans should detail who is responsible for carrying out specified tasks and be clear about systems for reviewing and monitoring progress.

3.3 For the purpose of this inspection, risk management planning and delivery covered the duration of the prisoner’s sentence and time spent on licence in the community.

Risk management policy and guidance

3.4 The Scottish Government had published a number of documents giving practice advice on risk management. These included the social work National Standards for Throughcare (revised 1998), SWSI guidance on risk management (2002), guidance on Integrated Case Management (2006), guidance on the implementation of MAPPA (2006), guidance on Orders for Lifelong Restriction (2006), and guidance on the management of temporary leave from prison (2007). There was also a range of local guidance and protocols that related to risk management. The most important of these, now largely subsumed within MAPPA, related to the management of sex offenders.

Findings

Prison-based risk planning and management

3.5 The ‘ICM Practice Manual (2007)’ described new arrangements for integrating the work of agencies and managing prisoners through their sentences. These arrangements provided for the sharing of relevant information about prisoners to manage the risks and needs of offenders in prison and to prepare them for release.

3.6 ICM case conferences were the forums in which staff shared risk assessments and planned for the offender’s liberation. These case conferences ought to take place at regular scheduled points in the prisoner’s sentence. Despite there always having been adequate time before liberation to hold a pre-release case conference, this did not always happen, or it did not happen within the correct timescale. Some of the files we reviewed contained evidence of the operation of the sentence management approach that predated ICM, and the transition between these two systems may partially explain some of these deficits.

3.7 One-half of the offenders reviewed in the inspection of prison records had not been the subject of an annual ICM case conference. Of these, two had no allocated community-based social worker. No detailed information was available for the others.

3.8 A range of professionals attended case conferences and there was an appropriate focus on risk in most instances. Prison ICM co-ordinators chaired all case conferences and in each observed conference the prisoner attended as did prison and community-based social workers.

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17 This refers to the enhanced ICM system for those subject to statutory supervision on release.
18 ICM case conferences should have taken place within six months of the prison term commencing, yearly thereafter and three months before release.
3.9 The quality of the chairing of observed case conferences varied. Some were unfocused and, in some instances, did not examine important information about risk well enough. This raised questions about the effectiveness of the training given to prison staff to chair multi-disciplinary meetings dealing with complex information.

3.10 Case conferences also regularly highlighted whether there were adequate resources to address identified needs. Waiting lists for some programmes, including the Violence Prevention Programme (VPP), were as long as two years. Some prisoners who might have benefited from these programmes could not access them before release.

3.11 Evidence from file reading and fieldwork showed that the ICM process had improved the links and working relationships between social workers and prison officers. Moreover, social work risk assessments had increasingly influenced the prison based decision-making process. The quality of risk management plans had also improved significantly since the introduction of ICM.

Risk Management Groups

3.12 All prisons inspected had a Risk Management Group (RMG) in place, convened to manage those deemed as presenting a very high risk of serious offending or requiring complex management, or both. A senior prison manager chaired these groups, and consistent attendees were prison psychologists and prison social workers. Attendance of other professionals varied by prison, but in no instance did a health representative attend. Prisoners attendance at these meetings also varied. We found significant inconsistency in who attended risk management groups.

3.13 There was also inconsistency in the criteria for referral to the Risk Management Group from ICM meetings. In some instances, referrals were inappropriate. We noted also that the referral rates to the RMG varied considerably across the prison estate. There was a duplication of effort and blurring of boundaries between Risk Management Group responsibilities and the ICM processes, which ought to be clearer.

Interventions

3.14 More than two-thirds of prisoners in the sample had not undertaken offence-focused programmed interventions in prison. This included the Sex Offender Treatment Programme (SOTP), alcohol awareness, and anger management. Some offenders who had completed programmes had it as a condition of their release licences that they continue offence focused work in the community.

3.15 A number of prisoners declined to participate in any offence-related work, and there was no compulsion on prisoners to accept programmes to address their offending behaviour.
3.16 Files identified two prisoners as requiring the Violence Prevention Programme (VPP), which is a programme to address serious violent behaviour. However, because the waiting list was so long the requirement to attend the programme was in the offender's release licence, but this was impossible to fulfil as a condition because the VPP was not available in any community location.

3.17 Offenders with drug problems were more likely to have community support organised by prison health or addiction services than were offenders with alcohol problems. Most prisoners we reviewed had an identified alcohol or substance misuse problem on admission to prison. Almost half had alcohol or addictions counselling identified as a condition of their licence. Where the licence had identified the need for alcohol counselling in the community, there was no evidence that healthcare or addictions teams in the prison had arranged for this, which was not the case for offenders with drug problems.

Community-based risk planning and management

Sex offenders

3.18 In the files we reviewed, one-third of social work supervision and risk management plans were adequate or poor. This was too high a proportion for such a potentially high-risk group of offenders. Almost all the sex offenders in our sample had a risk management plan in place. In most instances, the police had contributed to the plan, and in almost one-half, housing services had contributed. Two-thirds of plans had a clear framework for reviewing progress. The same number set out the tasks that external agencies would carry out. Over half did not provide for any social work unannounced home visits to the offender.

3.19 In approximately three-quarters of files, sex offenders had ten or more contacts with their supervising social worker over the preceding six-month period. However, the number of unannounced visits was very low and one-third of offenders had not had a home visit in the preceding six months. We considered that this performance was not good enough given risks presented by the offenders in our sample.

3.20 Social workers and police officers had held informal discussions outside formal meetings in one-half of files. In almost every case, there was evidence that agencies had considered concerns about child or adult protection.

3.21 We noted that the ViSOR database held risk management plans for sex offenders, input by the police following MAPPA meetings. There were variations in the level of detail that the different MAPPA areas recorded in these plans. We considered that ViSOR provided opportunities for all agencies to share one comprehensive supervision and risk management plan. It will not be possible to fully realise the potential of ViSOR in this regard until the resolution of very significant difficulties with social work and prison access to the ViSOR database. We comment further on this in Chapter 4.
Violent offenders

3.22 In the files we reviewed, two-thirds of serious violent offenders had no risk management content in their supervision plan. In almost every case, the police did not contribute to violent offender plans. Weaknesses in plans included an insufficient focus on risk, poor contingency planning, and little partner agency involvement. Plans were too general and not focused on managing risk.

3.23 Levels of contact between supervisors and violent offenders were less than with sex offenders, with under half having ten or more contacts with their supervisor over the preceding six months. Plans did not incorporate unannounced visits. There was evidence of informal police and social work contact in only three files.

3.24 For more than half of the violent offenders we reviewed, we did not find purposeful action recorded to address or mitigate the adult or child protection risks we considered possible in the circumstances as described in the file. Better risk of harm assessment would have helped identify who was at risk and what the risk was, informing actions to address the risk. We considered that this reflected a generally underdeveloped focus on assessing the risk of serious harm to the public posed by sex offenders or violent offenders.

Multi-Agency Public Protection Arrangements

Background and planned developments

3.25 The MAPPA guidance sets out three categories, three levels, and three stages. The three categories are registered sex offenders, violent offenders, and ‘other’ offenders. The three levels are Level 1: ordinary risk management, Level 2: local interagency risk management and Level 3: multi-agency public protection panels. The three stages are Stage 1: MAPPA notification, Stage 2: MAPPA referral and Stage 3: MAPPA deregistration.

3.26 Staff spoke positively of the benefits that MAPPA had brought, notably their experience of more effective multi-agency working in relation to offender management and public protection. Some police officers and social work practitioners were concerned about the planned eventual extension of MAPPA to include violent offenders because of the resource and capacity constraints discussed in Chapter 4 of this report. We heard that the MAPPA were staff and resource intensive. Staff expressed concern about the number of offenders who would require risk management if MAPPA expanded to include violent offenders.

19 The ‘other’ offenders is defined in the MAPPA guidance as comprising those “…not in Category 1 or 2 who have been convicted of an offence and, if by reason of that conviction they are considered by the responsible authorities to be a person who may cause serious harm to the public at large”. [original emphasis]
3.27 Previous SWIA inspections of criminal justice social work services generally found that violent offender supervision was too often not strong enough. There needed to be more effective risk assessment and risk management. Whilst such offenders did receive supervision, this was often at minimum standards of intensity and frequency of contact. This inspection echoes those earlier findings. Bringing serious violent offenders within the MAPPA will require a step change in the capacity of social work and partner agencies to manage the risks they pose.

Arrangements in prison

3.28 Prisons demonstrated an appropriate focus on the legislation governing MAPPA and most deployed managers with the relevant decision-making authority to MAPPA meetings in the community.

3.29 Certain prisoners may be eligible for temporary release prior to their liberation. This could be in a work placement, on home leave, or both. If granted (unescorted) home leave, some prisoners could be in the community for as long as one week per month. Prison governors consider whether the risks posed by the prisoner are manageable in the community, making this judgement in consultation with social work and other relevant agencies. The MAPPA guidance also reiterates this responsibility. Social workers assess the suitability of the prisoner’s plans for home leave, but typically do not have contact with the prisoner during the home leave period. Police contact with these prisoners is even more limited.

3.30 Prison authorities completed risk management plans to cover home leave, but these plans did not have the same degree of multi-agency contribution as final release plans. There was no requirement on the responsible authorities to convene a MAPPA meeting or draw up a risk management plan for offenders on temporary release. Scottish Government officials were considering this issue with responsible agencies. We considered that every sex offender and serious violent offender on home leave should have an appropriate multi-agency risk management plan in place covering the term of his or her temporary release from custody.

Arrangements in the community

3.31 The 2008 MAPPA annual reports showed inconsistencies across the country. For example, the percentages of offenders managed at either level 1 or level 2 showed variances of up to 20% between areas. The reasons for these variations are not clear. The MAPPA guidance provided a framework for allocating a MAPPA level to every sex offender. These were complex judgements and there was significant evidence that staff did not find the guidance sufficiently clear. We were aware that the MAPPA guidance had already undergone several iterations and while some staff told us that it had improved with each version, many still wanted clearer guidance that focused on practice.

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3.32 We also found evidence that strategic oversight of MAPPA varied between areas. Practitioners and managers who attended our consultation event said that there was little effective monitoring of performance, dissemination of learning, or sharing of good practice.

3.33 Psychologists and psychiatrists typically did not attend MAPPA meetings. Some areas were piloting ways to improve their attendance. For instance, one MAPPA area had arranged for forensic mental health service clinicians to attend all MAPPA level 2 and level 3 meetings. We also found another two areas piloting professional clinical support to risk assessors and managers. We considered that such arrangements had the potential to improve the quality of risk assessment and management, and merited systematic review with a view towards disseminating good practice across all MAPPA areas.

Links between the Parole and the MAPPA processes

3.34 There was an important interface between the MAPPA process and the role of the Parole Board in determining discretionary release and setting conditions for release licences. Parole Board members told us that when they received requests to vary release licence conditions, they had to be convinced that (a) there was a need for such measures, (b) that the measure itself was purposeful and (c) that it was not an unnecessarily punitive means of achieving its stated aim. In the Board’s opinion, agencies did not always make this case well enough. We considered that responsible authorities should arrange appropriate training for their staff to ensure that they understand and consistently meet the needs of the Parole Board.

Staff deployment, training and support

3.35 Some police officers in offender management units had not undergone any formal selection process to determine their suitability for that role. We considered that the rigorous demands of managing sex offenders necessitated a more structured approach to recruitment to such teams.

3.36 Some police officers thought that those working in offender management units or in related areas, such as reviewing internet downloads, should receive specialist training and support. This would better equip them for the complex task of working with and managing sex offenders, which was challenging and required specialist skills. They pointed out that officers in other demanding roles received formal and professional training, debriefing and support.

3.37 Some practitioners were concerned about potentially having to defend their risk assessments in court, and in particular about possible legal challenges to their qualifications and experience to make such assessments. Recent judicial comments about the evidential weight of police risk assessments in civil proceedings to obtain a Sexual Offences Prevention Order tended to reinforce those concerns21. Some practitioners suggested that members of the judiciary should have opportunities to learn about the limits and strengths of the RM2000 and the SA07 and we agreed that this would be useful.

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21 Chief Constable, Tayside Police v Basterfield (B143/06), www.scotcourts.gov.uk/opinions/B134_06.html
3.38 We saw evidence that police services occasionally redeployed officers from offender management units to help with other major enquiries or specialist roles. When this occurred, officers said that it increased the pressure on the remaining staff, and it could reduce the unit’s capacity to manage offenders. We believe that police forces should have contingencies in place to ensure continuity after such redeployments.

3.39 Social workers and police officers were invariably conscious of their important function in protecting the community, and many said they experienced considerable stress. We concluded that supporting staff working in this area was a critical necessity, and there was evidence that considerable improvement was required.

3.40 Practitioners told us they thought that risk management practice could sometimes become too risk-averse, leading to more intensive practice than was necessary. This perception emphasised the need for effective and up-to-date risk assessment, particularly risk of harm assessment, and reinforced the well-established principle that intervention with offenders should be proportionate to the level of risk and need that they present.

Locating missing high risk of serious harm offenders

3.41 We were aware of recent occasions where offenders subject to sex offender registration failed to keep to the terms of their registration and went missing. In addition to these individuals there were over 28,000 people registered as wanted by Scottish law enforcement agencies on the Police National Computer (PNC). We considered that it would be appropriate if there were a national unit in Scotland to coordinate the search for the most serious of these offenders. We were aware that ACPOS were discussing the potential for such a unit, and we considered that this would be a positive development.

Recommendations for Scottish Ministers

- That Scottish Ministers ensure that there is succinct, plain and unambiguous practical guidance for managers and practitioners on the MAPPA process.

- That Scottish Ministers ensure that when prisoners who present a high risk of serious harm have home leave or an external work placement, there is an effective and multi-agency risk management plan for the period that the offender is on these activities.

- That Scottish Ministers ensure that members of the judiciary considering risk assessments prepared by police and social work are familiar with the policy and procedures in place for such risk assessments and the strengths and limitations of the various risk assessment tools in use.
Chapter 3: Managing risk

Recommendations for agencies

• That Chief Constables, the Scottish Prison Service, and Chief Social Work Officers ensure that sex offenders and serious violent offenders subject to supervision have an effective risk management plan tailored to their risk and needs.

• That the Scottish Prison Service connect the operation of the Risk Management Groups directly to the ICM framework. This would eliminate duplication and increase the coherence of the system.

• That the Scottish Prison Service develop a strategy for the more effective engagement of those prisoners who refuse to participate in a change programme, and ensure that ICM annual case conferences occur for every offender at the correct intervals.

• That Chief Constables, the Scottish Prison Service, and Chief Social Work Officers arrange appropriate training for their staff involved in MAPPA to ensure that they understand and consistently meet the needs of the Parole Board.

• That Chief Constables, the Scottish Prison Service, and Chief Social Work Officers formally select employees dealing with high-risk offenders, and ensure they receive an appropriate range of support, training and professional advice, including training on giving evidence in court.
Summary

Whilst there was a commitment to information sharing from each of the key agencies involved in managing sex offenders, there was considerable room for improvement in information sharing practice. Information relevant to assessing and managing risk often took too long to reach the prison holding the offender. Too many social work files in prison and in the community were disorganised and contained duplicate records. Health professionals were inconsistently sharing information and getting involved in the ICM and MAPPA processes. Their important contribution to assessing and managing risk was missing in many instances.

We considered that responsible authorities in local areas should implement strategic management boards to oversee the performance and governance of the MAPPA and to plan future developments.

Formal and informal networks between practitioners and services supported this information sharing. The Integrated Case Management system had improved information sharing between agencies while the offender was in prison. Prison social workers alerted community-based agencies to the imminent release of prisoners who posed a risk to children.

The electronic sharing of information through the ViSOR and prison service PR2 systems was irregular, with especially serious issues around social work access to and use of ViSOR. This issue required urgent action.

4.1 A number of recent policy and guidance documents have addressed the issue of information sharing. Circular SEJD 15/2005 from the then Scottish Executive stated that data sharing:

‘...is at the heart of measures to protect the public from the risks posed by sex offenders.’

4.2 The circular lists a number of reasons for sharing information including the protection of children; preventing, detecting and reporting crime; assessing and managing the risks posed by offenders; and determining the offender’s suitability for parole. It provides a framework for developing local information and sharing protocols between agencies at local and national levels. It notes that all agencies involved in the management of sex offenders have signed a national concordat and have agreed to share relevant information, with the presumption that they will share information unless there is a good reason not to do so.
4.3 The Management of Offenders etc. (Scotland) Act 2005 requires responsible authorities in the area of a local authority to jointly establish arrangements, including information sharing, for the assessment and management of risks posed by sex offenders and serious violent offenders. The national guidance for MAPPAs (2008) restates the principles and procedures for information sharing set out in Circular SEJD 15/2005, making clear that they apply to the new Multi-Agency Public Protection Arrangements.

4.4 Offenders have legitimate rights to privacy and protection of their personal information. Data protection legislation affords exemption from restrictions on sharing where this is necessary to reduce the risk of offences being committed. However, information sharing should be managed carefully, and always be justifiable against the requirement that it is directly connected to the prevention of offending. Specific provisions also apply to the confidentiality of medical information and records, although health services may disclose such data where doing so may prevent harm to others.

Types of information

4.5 Relevant information takes a number of forms. Information about offending includes details about the current offence, and the offender’s previous convictions. This data is in the indictment, in witness statements, in the trial judge’s report and in the criminal history system (CHS) database located with the Scottish Police Services Authority (SPSA). The Violent and Sex Offender Register (ViSOR) contained a range of information about the offender that helped to assess and monitor the level of risk the offender poses.

4.6 Social enquiry and other reports contain information about offending and about the offender’s circumstances including risk assessment information. As described earlier in this report, social workers, police, prison staff, psychologists, and psychiatrists undertake a range of risk assessments at different points of the offender’s sentence and in the community.

4.7 Other types of information arise from the records of discussions and meetings between agencies, for example:
- ICM meetings
- MAPPA meetings
- Child protection conferences
- Pre-release meetings

4.8 Records of these meetings are an important source of information about the offender and any decisions taken about their management.

Findings

Prison records

4.9 Prompt receipt of information when a prisoner enters custody is important to allow accurate initial and subsequent planning. There was evidence that this was not occurring consistently.

4.10 In a number of the prison records examined, inspectors found missing information such as trial judges reports, sentence planning documents, ICM documents and risk assessment documents. It was unusual to find a record of activity by community-based social workers, such as of visits to the prisoner or his family.

4.11 Almost one-half of the files we reviewed had no trial judge’s report. Some were subject to a significant time gap between the trial and the addition of the report to the prisoner’s records. One report arrived three years after the admission of the prisoner, and another only one month before liberation. Another was only available two years after the start of a prisoner’s sentence.

4.12 When a prisoner returned to custody on recall, his information did not always follow him promptly. For example, one prisoner had returned to custody but all records remained in another prison for four days after admission. Another prisoner returned to custody did not have a warrant or healthcare record as these remained in the liberating prison for two weeks before transfer to the correct establishment.

Electronic prisoner records

4.13 Useful information for the management of high risk of harm offenders was available on PR2, although there were variations between establishments in the use of the system. In one establishment, ICM case conference minutes were not on PR2 but on a separate database held by the ICM co-ordinator. Other prisons entered some ICM information on PR2 (for example case conference minutes), but not all prisons recorded plans for release to the community. We were concerned to find that the PR2 domain for identifying sex offenders was incomplete in half of the records we examined.

4.14 Reports on prisoners who attended offence related programmes were sometimes available in prisoner files but not on PR2. Staff in one establishment had placed post-programme reports on PR2, but SPS headquarters had asked that they stop this practice and await the outcome of a prisoner’s challenge to the practice. Not all information from ICM meetings was in the relevant PR2 domain.

4.15 There was still a general over reliance on separate paper-based records, often to the detriment of information available on PR2. Failure to enter data electronically meant that data was not readily available when the offender moved prison or came back to prison following recall. Prison-based social workers reported a shortage of PR2 computers within
their departments, which made it difficult for them to make appropriate updates to prisoner records. They said this made it difficult for them to share information as effectively as possible, and contribute to management decisions. We noted that the minutes from Risk Management Group meetings were not always on PR2.

**Integrated case management**

4.16 There was evidence that ICM was making a positive impact in bringing together the professionals necessary for effective high risk of harm offender management. As well as prison-based staff, regular attendees at meetings included:

- police officers from offender management units;
- housing services sex offender liaison officers from the offender’s home area;
- community-based supervising social workers;
- community health professionals; and
- voluntary organisations providing post-release housing support.

**Sharing health information in prison**

4.17 We concluded that there was room for improvement in the sharing of relevant mental health information between prison-based and community health services. We noted that a number of prisoners had a history of mental ill-health before coming into prison. In some instances, the courts had obtained pre-sentence psychiatric reports. Prison staff had also identified a number of other prisoners as having mental health problems at their admission interview.

4.18 In only one prison was there evidence of a prisoner giving permission for the sharing of their health information. In the majority of prison health records, there was no evidence that health services sought explicit consent to share relevant information with other agencies. In one case, a post-release condition on a prisoner’s licence required a community psychiatric assessment, but there was no evidence that prison-based health services had passed the information on to colleagues in the community.

4.19 All relevant agencies should work together to improve the sharing of health information that is relevant for public protection.

**Prison social work files**

4.20 Most of the prison social work files reviewed were not organised effectively. Some key information was difficult to find. Document duplication was common.

4.21 The social work files indicated that the ICM process had generated a significant improvement in the quality and quantity of information shared between prison officers and prison based social workers. For example, social workers now received information about prisoner participation in programmes.
4.22 There was also an improvement in the sharing of information between agencies in the prison and agencies in the community. We saw purposeful efforts to communicate effectively. For example, we saw evidence of the statutory notifications about the possible or actual release of a Schedule 1 offender, and there was evidence of practice to keep community-based social workers informed about prison transfers.

4.23 Information in social work files showed prisoner referrals to Risk Management Groups, but there was no information in the files about the outcomes from these referrals.

4.24 Information in prison-based social work files should be comprehensive, organised effectively, and shared with others who need access to it.

The Violent and Sex Offender Register (ViSOR)

4.25 The ViSOR database enabled the relevant authorities across the UK to input and view critical information about sexual and violent offenders. In Scotland, the implementation of ViSOR covered only sex offenders at the time of the inspection, although we were aware that there were some areas piloting a very small number of violent offender records on the database. ViSOR is presently available to the police, social work authorities, and the SPS.

4.26 While the eight Scottish Police forces used ViSOR well, there were serious problems in the way other agencies accessed it. Security requirements meant that standalone terminals had to be in a secure room. This often made practitioner access difficult, and it was impossible to cut and paste relevant data from social work information systems onto ViSOR. In SPS, only headquarters had access to a ViSOR terminal. The intention was that individual establishments would send their intelligence and other file information to headquarters for entry onto ViSOR.

4.27 Although information sharing about sex offenders was generally appropriate, in two-thirds of sex offender files there was no evidence that criminal justice social work practitioners had used ViSOR effectively to facilitate information exchange. We considered that this was not due to inherent failings in ViSOR, but to the difficulties described in this section.

4.28 Though ViSOR had the potential to enhance the recording and sharing of relevant information, the problems with its implementation across agency boundaries were so serious that, in some places, they had effectively rendered the system unusable as a collective tool for sharing information and managing risk. We considered that this problematic situation required urgent attention.

4.29 It is Scottish Government policy\textsuperscript{25} that serious violent offenders will in future be included on ViSOR and managed in MAPPA, although there is no set date for this to occur. The MAPPA guidance defines violent offenders as those convicted on indictment of an offence inferring

personal violence, and subject to statutory supervision in the community. Such offenders will not have to register with the police in the way that sex offenders do, and the main responsibility to enter and manage their data on ViSOR is therefore likely to rest with social work services as the agency providing supervision. We considered that the serious problems with social work services access to ViSOR will require resolution before social work services can take on this task effectively.

Community-based social work records

4.30 One-third of the community-based social work case files reviewed were not well ordered and not easy to access. A variety of problems existed, including missing or misfiled information; repeated filing of the same document; no clear format to constitute a clear action or risk management plan; difficulties in finding MAPPA minutes; and an absence of chronological histories.

4.31 There was a wide range of practices in terms of how local social work areas dealt with the storage of MAPPA minutes in particular. These were sensitive documents. Some social work services kept these filed separately in cabinets, away from the main social work file, while others put the minutes in a sealed envelope in the social work file. Others were located in a special section of the case file marked as ‘confidential’. The ViSOR database stored MAPPA minutes, but access to this system for agencies other than police was too often difficult, as described above.

Police records

4.32 Most files were clear and contained relevant information. There were some evident gaps in data, including basic information about the time the offender had been in prison and there was typically little or no information from the ICM process.

4.33 The ViSOR database held risk assessment outcomes, minutes and records of agreed actions from the MAPPA process, and these data were readily accessible to officers and their supervisors. Risk management plans on ViSOR were clear and contained details of each agency’s contribution. We considered that the police were able to use ViSOR purposefully, highlighting the positive potential of this database when used effectively.

4.34 There was limited evidence of police holding or sharing information about violent offenders, or of them receiving such from other agencies. There were no national policies or procedures in place to allow for and govern such information exchanges.

Multi-Agency Public Protection Arrangements

4.35 The MAPPA applied only to sex offenders and restricted patients – serious violent offenders were not yet part of the process. In general, the introduction of MAPPA had facilitated structured, purposeful, information sharing, and had formalised and strengthened links
between the police and local authority social work and housing services. Other organisations also provided essential information to the MAPPA process, including SPS, health services, and voluntary organisations.

4.36 MAPPA attendees told us that information that they expected to receive from prisons was sometimes missing. The extent to which health services contributed to MAPPA also varied considerably across Scotland. We learned that forensic mental health services were more likely to engage and to provide appropriate information, while general practitioners were typically more reluctant to share information.

4.37 There was also an issue around the right representation of health professionals at MAPPA meetings. These meetings required attendees to be as familiar with the case and to have sufficient seniority to be able to represent their organisation effectively. We heard that this did not always happen when health service staff attended MAPPA meetings. Some health boards had identified single points of contact for MAPPA and we thought this was positive.

4.38 Voluntary sector organisations attended MAPPA meetings in some areas, but not in others, relying instead on good relationships with partners to obtain and provide information necessary for the management of risk. This was an area of inconsistency.

4.39 We were aware that there was no consistent approach to the strategic oversight or governance of the MAPPA process. Each area had made its own local arrangements. There were MAPPA co-ordinators appointed to every Community Justice Authority (CJA) area, but there were variations in their role in supporting the MAPPA process. There was a national MAPPA coordinator, but this post held no line management responsibility for the MAPPA co-ordinators.

4.40 Practitioners and managers told us that there was little effective monitoring of performance, dissemination of learning, or sharing of good practice. Local MAPPA areas should develop better systems to monitor the quality of their operations and decisions. Some MAPPA areas had implemented strategic boards to oversee and guide their operation, and we considered that all areas should do this.

**Integrated working arrangements**

4.41 In some localities, there had been attempts to physically co-locate staff from different agencies for the purposes of sex offender management, and those working in such settings were generally positive about the benefits of this integration. They said that co-location had resulted in an enhancement of their joint capacity to assess and manage offenders in joint and integrated ways. We concluded that a national review of interagency working practices would yield useful information about good practice, which would be helpful to local areas in improving and developing their arrangements.
4.42 In 2008, HMICS published a thematic inspection of the police response to domestic abuse\textsuperscript{26}. That report has clear linkage with our current findings, highlighting deficits in the strategic approach to public protection initiatives, and in recruitment, training, awareness, staff support, and information and communication technology. Throughout Scotland, police forces and partner agencies were developing or considering public protection units or structures. It is important that this progress maintains a consistent strategic approach in the response to the range of crime types that typically involve serious violence and victimisation, and risk of serious harm to the public.

Child and adult protection services

4.43 While there was some evidence that MAPPA shared information appropriately with child and adult protection systems, no national guidance set out how MAPPA co-ordinators and adult and child protection services should liaise.

Housing

4.44 The Management of Offenders etc. (Scotland) Act, 2005 placed a duty to co-operate on agencies in addition to the police, social work and the SPS. These other agencies included local authority housing services and registered social landlords (RSL). The National Accommodation Strategy for Sex Offenders\textsuperscript{27} emphasised the importance of cooperating in the sharing of information.

4.45 A good picture emerged from our evidence about information sharing between housing services and partner agencies in MAPPA, especially where the local authority or voluntary sector provided the accommodation. There was less clarity about what information agencies could share with registered social landlords (RSL), although the MAPPA guidance made it clear that they should be fully involved.

Community Justice Authorities

4.46 The Management of Offenders etc. Scotland Act, 2005 introduced Community Justice Authorities (CJAs). These were to ‘reduce reoffending’ in their local areas by involving all of the key agencies and partners in delivering a collaborative CJA plan. There were eight CJAs in Scotland. The MAPPA areas aligned with the CJA areas, but the CJAs themselves had no responsibility for MAPPA. Practitioners and police officers were unclear about the role, function and relevance of the CJAs to their work with sex offenders and serious violent offenders. We agreed that the relationship of the CJAs to MAPPA was confusing and required clarification.

\textsuperscript{26} This report is available here: http://www.scotland.gov.uk/Publications/2008/08/21125841/1
\textsuperscript{27} Available here: https://www.scotland.gov.uk/Publications/2007/03/circjd1506updmr07/Q/Page/15
The offender

4.47 Offenders attended supervision reviews that discussed their behaviour, circumstances and levels of risk. When we spoke with offenders in the community, we noted that many did not fully understand the risk assessment process and its conclusions for them. This was particularly true of the violent offender group, for whom risk assessment practice was highly variable and where there was generally a lesser focus on offending behaviour. We considered that communicating effectively with offenders about the risks they posed was an important part of risk management. Offenders should be able to understand the reasons underlying their supervision, including the reasons for intrusive actions such as unannounced visits and home visits.

Recommendations for Scottish Ministers

- That Scottish Ministers co-ordinate action to ensure that prisons receive information timeously when an offender commences a sentence for a serious violent or sex offence.
- That Scottish Ministers promote the effective integration of health services in MAPPA, in order that the information they hold and their expertise can contribute better to improved offender management.
- That Scottish Ministers undertake a national review of joint and integrated working practices in place between police, social work services and other relevant agencies, including co-located units, in order to identify and disseminate good practice.

Recommendations for Scottish Ministers and agencies

- That Scottish Ministers and agencies develop and implement formal protocols for information sharing between agencies about serious violent offenders.
- That Scottish Ministers, the National Policing Improvement Agency (NPIA) and responsible authorities urgently address the reasons underlying the poor use of the ViSOR database by agencies other than police.

Recommendations for agencies

- That MAPPA ‘responsible authorities’ establish local strategic boards to oversee the performance management and quality of local MAPPA operations and plan for the future improvement and development of the system.
The sample
We asked the Scottish Prison Service to identify offenders who met the following three criteria:

- had committed serious sex or violent crimes;
- were released from five specific prisons in the 18 month period prior to December 2007; and
- were subject to statutory supervision in the community post-release.

This initial sample generated several hundred offenders.

We decided to select only male prisoners for the sample because men are overwhelmingly the perpetrators of violent and sexual crimes.

We then examined this sample to remove those about whom little data was available and to identify and focus on those with a pattern of serious offending in their previous and most recent convictions. HMICS checked each offender in police intelligence systems to determine the level of police activity and concern around each released offender. We asked local authorities to confirm that the offenders chosen lived in their area and were subject to statutory supervision.

Some offenders had returned to custody, or their period of statutory supervision had expired. In a few instances, the offender had moved away from the location altogether. When the offender was not located where expected, or was unsuitable for other reasons, the local authority provided the details of all offenders in their area meeting the sample criteria, and we randomly selected substitutes.

The final sample of 62 individuals consisted of equal numbers of sex and violent offenders. Among the 31 sex offenders, all but five had committed crimes that had caused actual physical harm to the victim. Seventeen offenders had convictions for rape, with adult and child rapes equally distributed. Over half of the sex offenders had committed sex offences against children and were therefore Schedule 1 offenders. With the 31 violent offenders, the large majority were guilty of assault to severe injury and permanent disfigurement, but there were six murder or related convictions (i.e. offences such as attempted murder or culpable homicide). A smaller number of violent offenders had committed a Schedule 1 offence.

The community-based sample consisted largely of parole, non-parole and extended sentence cases (throughcare cases) with only five offenders subject to probation orders. Five probation cases were included as substitutes.
Fieldwork phase 1

We visited prisons and the local authority areas that were the home areas for the offenders in our sample.

We reviewed the management of 62 sexual and violent offenders across 17 local authority areas. Inspectors also visited five prisons, retrospectively examining the prison-based arrangements that were in place for the release of a subset of 16 offenders. We undertook a review of prison social work case files and healthcare files.

Inspectors reviewed all 62 offenders in the sample by visiting the local authority concerned and, using a structured inspection questionnaire, read files, spoke to the social worker, and where possible interviewed other key professionals involved in the case. We also attempted to interview the offender to identify how he rated his own risk, understood his risk assessment and risk management plan and how effectively supported he felt to stay out of trouble. Around 30 offenders consented to interview.

Before commencing, we took advice from statisticians about the sample. We did not intend this relatively small sample to provide statistical significance, but the qualitative depth of our review of each case meant that it provided a reliable basis to detect recurrent issues, which was our main requirement.

We examined the management of sixteen offenders in five prisons: five at HMP Dumfries, three at HMP Peterhead, three at HMP Shotts, three at the Open Estate and two at HMYOI Polmont. One was a life sentence prisoner and the others were serving determinate sentences of between two and 12 years. The life sentence prisoner had a punishment component of seven years. Five of the group sampled had extended sentences (a sentence combining a custodial component with a period of intensive community supervision) ranging from three months to eight years. Eight prisoners had convictions for sex offences and the remainder for crimes of violence.

Six of the prisoners had convictions for offences against children and two for raping an adult victim. The violent offences were murder, attempted murder, assault to severe injury and permanent disfigurement, robbery with a weapon and a firearms offence.
Fieldwork phase 2

The inspection team analysed the findings from phase 1 to identify key themes. We selected Fife, Dumfries and Galloway, and Glasgow City as the main focus areas for the second phase of the inspection because of the prevalence of offenders from these areas in the sample and because the quite different demographic and geographic profile of each authority area allowed examination of a variety of issues relating to community supervision and offender management.

We visited these areas in summer 2008 to speak with groups of key staff and managers from across the responsible agencies (including those with a ‘duty to co-operate’ through MAPPA); interview senior managers; and speak to relevant key stakeholders. Inspectors also consulted the local Community Justice Authority (CJA) Chief Officers for each of the focus areas and the local MAPPA co-ordinators. In addition, as part of the second phase of the review, all eight Scottish police forces completed a questionnaire about their management of offenders at high risk of causing serious harm and we reviewed the police management of a subset of offenders in the original sample.

In addition, we visited every police force in Scotland to meet with operational and management teams to assess progress with the police implementation of MAPPA and to examine police capacity to respond to missing or wanted offenders.

The final parts of the evidence gathering process included a specific consultation with the Risk Management Authority, because of its statutory duty to promote effective risk assessment and management and with the Parole Board for Scotland, because of its role in recommending to Scottish Ministers certain prisoners for release and in deciding on any required licence conditions applicable on release. There were information-gathering sessions with the Public Protection Unit and Community Justice Services Division within the Scottish Government’s Police and Community Safety and Justice Directorates. We also arranged a national consultation event. Professionals attended from a range of agencies across Scotland to discuss the key inspection themes and contribute their views to the inspection.
## Glossary

<table>
<thead>
<tr>
<th>Term</th>
<th>Explanation</th>
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<tr>
<td>Association of Chief Police Officers in Scotland (ACPOS)</td>
<td>This body represents senior police officers from across Scotland and contributes to policing strategy in Scotland and working with other bodies in policy formulation. Its membership comprises all chief police officers and senior police staff of the eight Scottish police forces, the Scottish Crime and Drug Enforcement Agency, the Scottish Police College and the Assistant Chief Constable of the British Transport Police (Scotland).</td>
</tr>
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</table>
| High risk of serious harm                                           | A risk of harmful behaviour which is life threatening and/or traumatic and from which the victim’s recovery, whether physical or psychological, can be expected to be difficult or impossible.  
| Integrated Case Management (ICM)                                    | ICM is a multi-agency approach to planning and managing a prisoner’s sentence, including preparation for release. Main agency participants, in addition to the prisoner him/herself are SPS personal officers and ICM co-ordinators, prison-based and community-based social workers, police offender management officers and also community housing staff, voluntary sector support services and health service staff where appropriate (e.g. in connection with mental or physical health factors, including addictions). |
| Multi-Agency Public Protection Arrangements (MAPPA)                 | Multi-Agency Public Protection Arrangements (MAPPA) is the system that enables responsible agencies (police, social work and prisons and NHS Scotland) and a range of other agencies with a duty to co-operate to manage sex offenders in the community. There is a future policy intention to include relevant violent offenders within the provisions of MAPPA. |
| Non-parole                                                          | The non-discretionary early release of an offender with a determinate sentence of four years or more (not a life prisoner) that occurs at around two-thirds of the term of the original sentence. Prisoners on non-parole release are subject to a licence to which the Parole Board will attach conditions. |
| Parole                                                              | The process of discretionary early release for a prisoner sentenced to four or more years in custody. Prisoners become eligible for parole at the halfway point of their sentence. The decision to release or not is with the Parole Board for Scotland. See non-parole. |
| Prisoner Records 2 (PR2)                                            | Prisoner Records 2 (PR2) is the computerised prisoner record system operating solely within the Scottish Prison Service. The system is a daily record when a prisoner is in custody to ensure an accurate picture of custodial status. It contains ICM data and a range of agencies in the prison, including social work, may use it. |
## Appendix 2: Glossary

<table>
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<tr>
<th>Term</th>
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<tr>
<td>Programme</td>
<td>This usually refers to a sequence of group meetings in which facilitators attempt to help offenders acquire better thinking and reasoning skills that they can use in future to help them avoid offending.</td>
</tr>
<tr>
<td>Risk</td>
<td>The probability of a future negative or harmful event. The risk that the event will occur/recur and the risk that the event will be negative or harmful. Both of those risks are of concern to services seeking to manage risk in the interests of public safety.</td>
</tr>
<tr>
<td>Risk assessment</td>
<td>Risk assessment is a means of quantifying the probability that an event will occur/recur, or that an event that does occur will be harmful.</td>
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<tr>
<td>Risk Assessment 3 (RA3)</td>
<td>Screening tool for risk of harm (see table on page 8).</td>
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<tr>
<td>Risk Assessment 4 (RA4)</td>
<td>Detailed structure for risk of harm assessment (see table on page 8).</td>
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<tr>
<td>Risk Management Authority (RMA)</td>
<td>The national body that sets the standards and guidelines for risk assessments leading to the Order for Lifelong Restriction. Also sets the standards and guidelines for the management of such offenders. Has a general role to promulgate effective risk assessment and management.</td>
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<tr>
<td>RM2000</td>
<td>A risk assessment tool that predicts reconviction for a sexual offence within a defined period using information about the offender rather than clinical assessment (see table on page 8).</td>
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<tr>
<td>SA07</td>
<td>A risk assessment tool that predicts reconviction for a sexual offence, helps monitor factors underpinning acute escalation of risk and provides a breakdown of areas of need that may be treatment targets (see table on page 8).</td>
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<tr>
<td>Schedule 1 Offenders</td>
<td>Offenders convicted of specified offences against children (specified in Schedule 1 of the Criminal Procedure [Scotland] Act 1995). These are primarily offences comprising neglect or physical, sexual, or emotional harm towards children. The categorisation is life-long.</td>
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<tr>
<td>Term</td>
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<tr>
<td>Sex Offender Treatment Programme</td>
<td>The standard SPS prison based programme to address the offending behaviour of sex offenders. An abbreviated version of the full programme is available for those serving shorter sentences.</td>
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<tr>
<td>The Association of Directors of Social Work</td>
<td>The national organisation that represents senior managers of social work services in Scotland, and which co-ordinates much policy contribution of the profession to Scottish Government policy.</td>
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<tr>
<td>The Parole Board</td>
<td>The Parole Board decides on the release of people on Parole and attaches conditions to parole licences and non-parole licences. Comprises a range of professional and lay members.</td>
</tr>
<tr>
<td>The Scottish Prison Service</td>
<td>The national body accountable to Scottish Ministers that directly provides custodial services across the country and oversees Scotland’s two private prisons.</td>
</tr>
<tr>
<td>ViSOR</td>
<td>An electronic database accessible to police, social work services and prisons that, in Scotland, records relevant risk management information about sex offenders, including risk assessment data. Supports information sharing between agencies.</td>
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Multi-agency inspection

Assessing and managing offenders who present a high risk of serious harm 2009