

**NATIONAL PROBATION SERVICE  
HAMPSHIRE AREA**

**RACE EQUALITY SCHEME**

**IMPACT ASSESSMENT FORM**

**1. Function/Policy Name:**

**Community Order with Drug Rehabilitation Requirement**

**2. Aims and Approach of Function/Policy**

**Description of current approach**

From 4<sup>th</sup> October 2005, the DTTO team was re-integrated back into Offender Management units in order to implement the Offender Management model. This involved moving officers out of multi-agency teams located in health service premises back to probation offices. It also involved considerable changes in practice for DTTO team officers which are still in the process of embedding in some areas.

All offenders appearing in court and on whom a report is requested (whether SDR or FDR) scoring 4+ on section 8 of OASys is referred to the DRR officers/unit. Section 8 is then screened to establish whether the offender admits current or past use. Where the offender discloses current use and consents to being made subject to a DRR, they are referred to the treatment provider for assessment. This is a referral for the purposes of CRAMS.

Treatment providers assess the offender for treatable drug dependence and prepare a written assessment for the court which is incorporated into the FDR/SDR. The assessment includes details of level of treatment need, contact hours offered by the treatment provider and length of time needed to complete their part of treatment.

When a CO + DRR is made, the offender is told to report to the probation service within 1 working day of the order being made and the treatment provider within two working days of the order being commenced. Speedy engagement of the offender is vital in order to increase successful completions and compliance.

Treatment is provided over 5 working days per week. Contact offered is up to 15 hours per week for high seriousness orders, 8 hours for medium seriousness orders and up to 6 hours per week for low seriousness (stand alone) orders. Low seriousness orders

have a minimum contact requirement of 1 contact per week with the treatment provider, to include a drug test. The offender manager will see them once at commencement and once at the completion of the order. The OM also has responsibility for completing OASys and reviews as necessary, and for enforcement.

The offender manager supervises the offender within National Standards. Offending behaviour work is provided by the offender manager and via accredited programmes (ETS and OSAP). The team carries out pre and post programme work.

Offender managers will assess for essential skills and refer for tuition and to gain ES awards where necessary.

Individual supervision and counselling is provided by key workers who may be either probation or treatment staff.

All staff work with offenders to maximise engagement and compliance by recognising individual needs and responding appropriately.

Testing is offered by the treatment provider. Minimum requirements are: x 1 per week for low seriousness orders and x 2 per week for medium and high seriousness offenders.

Offender Managers enforce orders within the time limits laid down by National Standards.

Orders are revoked for good progress at an appropriate stage.

Court reviews are held monthly on high seriousness orders and DTTO's. Monthly paper reviews are held on medium seriousness orders except where sentencers have requested personal appearances of offenders. No reviews are held on low seriousness orders following the first review.

Where there are DRR units within offender management, Area Managers must ensure that units have adequate numbers of enthusiastic and well trained staff, who receive good quality supervision.

Maintain good links to treatment providers and other partners.

### **Aims and approach of team:**

Drug Rehabilitation Requirements aim to break the link between substance misuse and offending by offering three levels of programmes of varying intensity as regards treatment, which encompass a combination of offence focussed work and clinical treatment for the dependence on illegal substances.

### 3. What data is Available & Does it Suggest Differential Impact Between Racial/Ethnic groups?

Data is collected at a local level and is published annually in the Hampshire Probation Area "Diversity Report". In the most recent report (April 2005 – March 2006) the following information was published:

#### Section 17 DTTO & DRR Commencements

- 4.8% of offenders commencing DTTO's & DRR's were from minority ethnic backgrounds and 3% of completions.
- 19% of commencements for DTTO's & DRR's were female offenders and 23.5% of completions.

Minority ethnic offenders are under-represented on this requirement and less likely to complete. This is a change from the last report where they were proportionately represented on DTTO's and slightly more likely to complete.

Female offenders are over-represented on DTTO's & DRR's both in terms of commencements and successful completions, as in the previous report.

Diversity Report (April 05 – March 06) indicates that there has been a downturn in the numbers of ethnic minority offenders subject to DRR, but positive results in relation to female offenders continues.

DTTO/DRR process has been impact assessed and reviewed following the introduction of DRR's and the integration of the team into the OM units.

Two internal DTTO audits (May 2003 and June 2004) illustrated that ethnic minority offenders were under represented although women appear to be over represented. Compliance audits carried out in Portsmouth (2006) and Southampton (2007) confirm this information

In summary then, there is limited data at present which suggests some areas of differential impact on racial/ethnic groups. However, the results of the internal audit illustrate that ethnic minority residents are probably under represented on the order.

#### **4. What changes are needed to remove any adverse impact (either approach or implementation considerations)?**

There previous DTTO team had a Race Equality Strategy, which was written by the Diversity Manager, Julia Bahaj in consultation with the Area Manager in August 2004. This strategy now needs to be updated in line with the changes that took place in November 2005, when the DTTO team were re-located back into offender management units, as well as the implementation of the CJA 2003.

DRR lead managers will meet with the Diversity Manager to discuss the implementation of the new strategy.

Staff are required to attend Diversity training as part of their induction period (i.e. within three months of the commencement of their employment) in order to increase their knowledge and understanding of issues that relate to diversity and ethnic minority offenders.

Specialist training must be sought (for staff) on the cultural aspects of substance misuse and how this can affect ethnic minority offenders chances of success on the DRR.

#### **5. What consultation has been undertaken and what are the results of this?**

Diversity Manager has written a DTTO Race Equality strategy (August 2004) in consultation with the Area Manager.

Internal DTTO audits in May 2003 and June 2004.

Area Manager has consulted with Diversity Manager re: Impact Assessments November 2004.

##### **Results:**

It is apparent that insufficient attention has been paid to issues of Diversity in relation to the CO + DRR and DTTO function and this needs to be taken into account during 2007/08.

**6. Decisions taken on the basis of the impact assessment and measures to implement.**

Lead Area Manager's for OM and Interventions to impact assess policies relating to CO +DRR.

All DRR lead managers to consult with the Diversity Manager Julia Bahaj with a view to drawing up an Action Plan for 2007/08.

Lead OM Area Manager to request audit of DRR cases with an emphasis towards focussing on the assessment and treatment of ethnic minority offenders and women subject to DRR's.

**7. Monitoring arrangements and review process**

Internal review (audit) not yet scheduled to take place in 2007/08, AM to request review.

Diversity Action Plan to be reviewed and re-written (Lead AM and Diversity Manager). To be reviewed after 6 months from date of implementation.

**8. How results will be published**

Results of the internal review will be published in a report following the completion of the review.

**Signature of Policy Lead** .....

**Position** ...Area Manager.....

**Date** .....