



**Evaluation of the Positive Pathways Programme for  
Northumbria Community Rehabilitation Company**

**Professor Mike Rowe, Sarah Soppitt, Adele Irving and Sara Lilley  
Northumbria University**

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## **Executive Summary**

- Positive Pathways (PP) – a new strengths-based model of desistance – was introduced within Northumbria CRC in June 2014. It commenced with a three-day staff training programme, which over 124 practitioners have completed.
- Between August 2014 and June 2015, 405 service users completed the intervention. At the time of completing the evaluation in June 2015, a further 427 service users were engaged with the programme.
- Although originally designed to be an entry level programme, targeted at male offenders with a low risk of reoffending, the programme was extended to female service users and those with medium to high risk of reoffending following managers and practitioners suggesting that the programme could be beneficial beyond the target group.
- The PP programme was central to the modernising approach of the CRC – updating practice in light of evidence about what works in promoting desistance and working cost effectively, while maintaining quality – and was firmly underpinned by ongoing consultation with staff and service users in order to promote development and shared ownership.
- All practitioners have a thorough understanding of the principles of PP and welcome its focus on strengths, as opposed to service users’ offences. They feel it gives recognition and structure to the strengths-based work which they were already undertaking with some service users and is more conducive to relationship building. Only a minority of staff expressed reservations about the appropriateness of PP for some service users, feeling that in some cases, offence-focused work might be more appropriate.
- Practitioners generally felt well prepared to deliver PP following the training. Most found the practical advice and examples about how to deliver the sessions to be particularly useful, as well as the training manual which they could refer to on an on-going basis.
- Approaches to delivery are varied, although most practitioners try to deliver PP to small groups of service users – usually on a 1:1 or 1:2/1:3 basis. Some practitioners expressed initial anxiety about the likely willingness of (male) service users to disclose personal information in group contexts, the management of conflict between service users and the likelihood of service users turning up to sessions (and hence consistent delivery). However, most are increasingly confident with this over time and have developed strategies to mitigate and manage potential issues. Good levels of peer learning and support have emerged among cohorts of service users.
- Individual sessions are most likely to be delivered to service users with severe mental health, literacy or language problems. The primary advantages of this mode of delivery were said to be the building of relationships with service users, the ability to personalise sessions and service users being more focused during sessions. This reflects the rationale of the original design of PP.
- The content and materials of PP have been well received and are seen as providing a useful aid to the sessions. While some difficulties were noted regarding the appropriateness of some of the terminology and imagery used for such a wide spectrum of service users (in terms of gender, age, educational attainment, personal background and offence type), practitioners have since adapted the materials to reflect different needs. Similarly, work is ongoing to develop more local- and offence- specific DVDs, in response to feedback from service users. This demonstrates the dynamic and responsive nature of the programme and the value of consultation to its development.

- On the whole, practitioners reported that service users have engaged well with PP. These comments support the findings of a focus group undertaken by Northumbria CRC with staff in October 2014, when staff reported that the level of engagement from service users with PP was far greater than generally experienced. Key variables affecting engagement appear to include: previous levels of engagement with probation, the nature of previous interventions and the preferred learning styles of service users.
- Analysis of cogwheel data for 216 service users indicated that following PP, all service users had experienced positive changes in their lives across most domains. For males, improvements occurred in all 12 domains, for women this was in 9 of 12. The most significant aggregate changes had occurred in the areas of: Making Use of Time (+128); Crime Risks (+121); and Self-Belief and Motivation (+111). Service users were most likely to report positive changes in their lives in the areas of: Making Use of Time (44%), Money Matters (40%), Alcohol and Drugs (38%), Other Health and Wellbeing (38%), Self-Belief and Motivation (38%) and Crime Risks (38%).
- For males, positive net changes were recorded across all of the cogwheel dimensions. For females, positive changes were reported over 9 of the 12 cogwheel dimensions. Those with lower OGRS tended to report higher levels of positive change, across more domains, than those with higher OGRS.
- In a small number of cases, service users reported no change or lower scores across some cogwheel domains post-engagement: across the 12 domains, this ranged from 11-28%. This is likely to be linked to on-going challenges in the service users' lives, suggesting that perhaps more attention needs to be given to the circumstances that service users are facing at the time of completion, in respect of both personalising the programme and fully understanding the cogwheel scores.
- A feedback survey with service users (n=117), undertaken by Northumbria CRC, yielded positive responses; 88% reported that it had helped them recognise and value their individual strengths; 91% that it would help them move away from offending; 90% that it helped them identify and overcome barriers to an offence-free lifestyle; 94% that it helped them recognise what was important to them; 86% that they were clearer about their own future goals; 91% that they could visualise a future life that did not involve offending, and; 91% that the programme delivery suited their needs.
- Although it is too early to assess the impact of PP on desistance, the majority of practitioners were optimistic that PP would result in positive impacts for service users. In the meantime, they were able to identify positive short-term outcomes, in terms of building the confidence of service users through the identification of strengths and promoting desistance through identification of issues that may impact on their likelihood of reoffending, such as the role of acquaintances. These assessments were corroborated through interview with service users.
- Staff typically reported partnership working with the Resource Centre to be effective, although capacity issues in some areas have resulted in delays to support for service users.
- Active performance management of the programme has helped to drive its rapid embedding and development. Although introduced in order to prevent drift in the achievement of outcomes, some anxieties remain around the expectation that service users will complete PP within their first eight weeks of engagement with the CRC (particularly for service users 'in crisis'). Nonetheless, performance management data shows that this target is being met in the main.

- PP was introduced at a time of significant organisational change and uncertainty for staff. Management hoped that the launch of PP would demonstrate the organisation's commitment to continued professional development and stressed that this would continue to be valued in the CRC. Indeed, managers and practitioners typically reported feeling motivated by the introduction of a new initiative and managers were said to have been understanding of concerns raised and to have responded to these constructively and supportively.
- Research literature suggests that the nature of organisations and staff delivering programmes can influence offender motivation and attitudes toward compliance and so the broader context of organisational change accompanying the Transforming Rehabilitation agenda was potentially significant in shaping the implementation of PP programme. Clearly, however, all stakeholders involved have demonstrated that they are immensely committed to the effective implementation of the programme and supporting service users in their pathways to desistance.

## **Introduction**

The Positive Pathways (PP) evaluation was undertaken by Northumbria University between February and June 2015. The aim of the research was to evaluate the design and delivery of the programme and the extent to which the short and medium term outcomes of the programme had been achieved, as identified in the programme logic model. Specifically, the short term outcomes of PP are:

- The development of an evidence-based desistance programme;
- The facilitation of staff understanding of and buy-in to the programme and their continuous professional development;
- Increased service user motivation to change and develop pro-social behaviour; skills to access support and community based service delivery; and understanding of obstacles and barriers to desistance and offending; and
- The development of service user plans to move forward.

The medium-term outcomes of PP are:

- Offenders are positively engaged in an appropriate programme of work;
- Successful programme completion for offenders;
- Increased pro-social behaviour;
- Offenders are less likely to revert to problematic behaviour and risk is effectively managed;
- Offenders are engaged in the Resource Centre intervention;
- Staff embed PP into practice;
- Continuous improvement in service delivery and use of resources;
- Consistent application of the new supervision framework across CRC;
- Policy decisions informed by robust management information and increasing evidence base.

The aspiration of Northumbria CRC is that PP will become a recognised model of good practice.

## **Research Methodology**

The research utilized a mixed method approach, drawing on both qualitative and quantitative methods of data collection, for the purposes of breadth and depth of understanding and corroboration. The quantitative data was provided by Northumbria CRC and comprised:

- Performance activity reports detailing the numbers of staff trained to deliver the programme, the number of service users to have completed the programme and the number of service users having commenced the programme;
- Analysis of training programme documentation and plans;
- Cogwheel, distance-travelled data, detailing service users' before and after scores across 12 lifestyle domains;

- OGRS data for service users;
- Service user survey data; and
- Practitioner feedback data.

Semi-structured interviews were undertaken with one senior manager, four Local Delivery Unit (LDU) managers and 24 practitioners within Northumbria CRC. The LDUs engaged with were: Newcastle LDU (Byker and St James Boulevard teams), Northumberland and North Tyneside LDU (North Tyneside and Northumberland teams), South Tyneside and Gateshead LDU (South Tyneside and Gateshead teams), and Sunderland LDU (Hendon and Southwick teams). The practitioners interviewed were selected on the basis of levels of engagement (medium to high) with the Programme. The primary purpose of these interviews was to explore understanding of the rationale for the development of the programme, the effectiveness of the training provided, staff and service user experiences of engagement with PP, the outcomes of the programme for service users and any suggested improvements to the programme. Management interviews allowed further exploration of the issues associated with the introduction of PP to teams, the cultural and practical shift required and the buy-in of staff on a more holistic level.

In addition, 23 semi-structured interviews were undertaken with a cross-section of service users from the four LDU areas outlined previously. The interviews addressed experiences of engagement with the programme, motivation to engage, outcomes of engagement with the programme and suggested improvements to delivery. Participant interviews were based on convenience sampling, with those who were available and happy to be interviewed taking part. Although the initial focus of the evaluation was male service users, interviews were undertaken with both men and women. This was due to the successful roll-out of the programme to women during the evaluation period and the potential insights to be learned from the women's experiences of engagement.

The research received full ethical approval from Northumbria University's Research Ethics Committee.

## **Evaluation Findings**

### **Introduction to Positive Pathways**

The programme was launched by Northumbria CRC in June 2014.

In interview, senior management explained that information sharing and consultation with staff have been central to the design and implementation of PP in order to promote ongoing development and shared ownership and these are key themes which run through the report. LDU management staff were first introduced to the programme via leadership and management meetings and some were given the opportunity to feed into the design and delivery of the programme. As such, those interviewed felt that they were adequately informed of and, in some cases, welcomed being actively engaged in, the development of the programme from inception. Managers then disseminated relevant information to their respective practitioner teams via regular team meetings.

### **The Principles of Positive Pathways**

All management and almost all practitioner stakeholders interviewed reported having a very good understanding of the rationale behind the development of PP and its guiding principles:

*'it was introduced pre-transforming rehab, we knew we would have to find new ways of working ...updating practice in light of the evidence base about strength based programmes...and a need to work more cost effectively, while maintaining quality.'*  
(Northumbria CRC Senior Management)

*'Going down the desistance approach...instead of just focussing on the offence...I think with other approaches – we used to use the citizenship programme – it was focussing on the offence...It is a totally different approach to it'* (Practitioner, Office F CRC)

*'It is a strengths-based approach, focusing on the positives rather than focusing on the negatives...using that to change their future by building upon their strengths. I know it is based on desistance theories trying to get someone to turn away from offending behaviour'*  
(Practitioner, Office C CRC)

*'It is a new way to identify strengths rather than focus constantly on the negatives and to look at it from a different perspective. Helping them to look at things in a different way so they can see themselves in a different light'* (Practitioner, Office G CRC)

Just two practitioners expressed that they were not fully confident articulating the principles of PP. Given the size of the organisation and the scale of the change, however, this is unsurprising and indeed, a significant achievement for Northumbria CRC management.

The strengths – as opposed to offence – based nature of the programme was welcomed by the majority of staff interviewed. Most feel that this is a more constructive way of engaging with service users, building relationships with them and motivating them to desist from offending. Several were already undertaking this type of work with service users informally and so the introduction of PP was seen as giving additional credence and structure to this. Staff also reported that having a strength-based focus made working with service users more enjoyable and rewarding:

*'its certainly been well received...rather than the constant focus on what's gone wrong, the offending, I think people have really welcomed open support to [look at strengths]. A lot of*

*the practitioners said they did that anyway so this is pulling it together and formalising it and for me, it's about getting that systematic, wider similar approach.'* (Senior Management)

*'I think it works far better for the vast majority of people. I don't think you have to exclusively focus on [the Programme], I think if it is appropriate, do some offence or very specific victim focussed work...[but] For the vast majority of people it's much more helpful...also for the practitioners, it's much more enjoyable an interaction with somebody...helping somebody get to a much longer term goal. So I think practitioners love it because of that as well'* (Practitioner, Office G CRC).

*'My memory over the last ten years is it's always been more about delving into the offence itself...Positive Pathways is a nicer way of doing the work, it's about identifying that you made the mistake but that's ok because you have the strengths and need not make the mistake again...I think the response from participants is better as a result too'* (Practitioner, Office H CRC).

### **Staff Training**

In order to support staff to deliver the programme, all were required to attend a three-day training course. Most staff were informed about the training through email and team meetings. Through feedback surveys to Northumbria CRC<sup>1</sup> and discussions with the evaluation team, staff reported the training to be relevant, highly informative, well-structured and executed – making good use of kinaesthetic learning and visual resources – and enjoyable. Staff felt that there was a lot of information presented; as such, being given a training manual which they could refer to afterwards was particularly useful. These materials included a thorough explanation of the content, principles and process of the programme. In addition, staff found the role play exercise undertaken at the training was particularly:

*'We did real trial runs with own cases so there wasn't a lot of pressure to get it right first time when you hadn't done it before. Everyone's interpretation of it was different and people were anxious about how to deliver it so it was good to be able to play around with that'* (Practitioner, Office H CRC)

On the whole, the training was said to give them confidence and empowered them to start delivering the programme in practice. A typical comment here was: *'The training does prepare you definitely, as it gives you ideas and emphasises that you are allowed to think outside the box and be flexible to an extent'* (Practitioner, Office H CRC). Nonetheless, most didn't feel completely confident about PP until they had started to deliver it. It should be noted that this was not a reflection on the quality of the training, but a normal part of the learning process:

*'It was useful to get familiar with the materials...I think that a lot of us, and I in particular, have come away and developed how we deliver it because some of the materials are OK, but it's about how you deliver it and you can't...you can't learn that in a day. So it was good in terms of introducing us to the materials and how it all fits together, but it's like anything, and that's not a criticism...like anything, I've probably learnt more afterwards but that's just how it is ...'* (Practitioner, Office A CRC)

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<sup>1</sup> Following delivery of the training, Northumbria CRC sought staff feedback through a questionnaire. In total, 172 feedback surveys were received. Responses were provided from the following offices: SJB (16), Gateshead (8), South Shields (9), Southwick and Hendon (13), Byker & Gosforth (13) and Northumberland & North Tyneside (13).

Staff welcomed the opportunity to feed back their thoughts about the programme during the training and to discuss any concerns they had about the implementation process. They reported feeling reassured by the responses of management:

*'We were able to feedback and we did so. There was a lot of discussion about those anxieties and we were assured that this is the first run and it wasn't expected to go perfectly, but just to do the best you can and work as a team together'* (Practitioner, Office H CRC)

Through interview, several potential improvements to the training were identified. These included:

- The model and theory was complex: the theoretical content could have been reduced;
- The training could have been condensed;
- The training could have included more practice-based delivery examples;
- The training could have been delivered at a time when organisational change did not unsettle its key thrust.

Staff also identified a number of potential future support needs. The key areas highlighted included:

- Group working;
- Preparation and strategy for dealing with difficulties and issues that arise during the programme;
- Goal-setting;
- Adapting materials and having resources prepared;
- Having cases properly and appropriately allocated;
- Follow up training as it is a new programme;
- Time management; and
- Co-working.

At the point of conducting the evaluation, over 124 practitioners had been trained and had begun delivering PP to service users.

### **Implementation and Delivery of Positive Pathways**

Through PP, staff are encouraged to deliver sessions to groups of 2-3 service users in order to encourage peer support and dynamic discussion. The programme is designed such that sessions 1 and 6 are run on an individual basis and 2-5 as small groups. Staff reported that this combination is effective, in theory.

*'The idea of the 1-2-1s is that it is initially an opportunity for the offender manager to sell the programme in a way as a viable bit of offence focussed work, in a way you would have an introductory sessions with any programme of work, to highlight any anxieties, a lot of service users would indicate quite strongly that they wouldn't be comfortable working in a group settings, so it's trying to relay any of those fears'* (Practitioner, Office G CRC).

As the programme has become embed in the organisation, it is clear that a diversity of approaches to delivery are in operation, with some staff delivering the sessions on a 1-2-1 basis and others delivering the sessions to small groups. Staff reported that the mode of delivery is largely dependent

on the needs of individual service users', as well as other constraints such as when service users can attend appointments and how many are ready to start PP at any one time. Nonetheless, positive experiences of both approaches were discussed.

### **Individual Delivery of Positive Pathways**

At the inception stage, a significant proportion of staff reported feeling apprehensive about delivering PP to groups in respect of managing conflicts, encouraging service users to disclose personal information to others and service user attendance. Typical comments included:

*'I was concerned about sitting with more than one service user on your own...at that stage my confidence of working on a 1-2-1 basis wasn't the highest anyway, so I thought if I am sat with 3 people, I don't think I am going to enjoy that very much, just in case I couldn't deal with any conflict, that was my first concern'* (Practitioner, Office G CRC).

*'Trying to get everyone together, people knowing each other and not necessarily wanting to be in the same room as each other...I was worried about the extra measures that you'd have to go to facilitate that programme'* (Practitioner, Office H CRC).

As such, most staff indicated that they prefer to deliver the programme on a 1-2-1 basis. Staff also reported that this approach was particularly effective with service users who find it difficult to build trusting relationships, that service users can often be more focussed when working on their own (both resulting in a better response to the exercises) and that the programme can be more easily personalised to individual needs when being delivered on a 1-2-1 basis:

*'I think they really appreciate the strengths focus and appreciate the 1-2-1 because of issues of trust and they aren't...used to hearing compliments'* (Practitioner, Office H CRC).

*'It's about focusing on the service user rather than the individuals in the group and...people tend to play up in a group, they're not themselves; they're more able to...explore on a 1-2-1 'cause they're getting full attention...'* (Practitioner, Office A CRC).

*'I find I get a better response individually, because a lot of it is very personal. If I have got 2 or 3 people in...somebody sitting there, addicted to drugs, addicted to alcohol, violent upbringing, people are not going to disclose that in a group...it's all generic answers in a group, no detail, not the level of involvement that there is on a 1-2-1'* (Practitioner, Office F CRC)

### **Group Delivery of Positive Pathways**

Despite the aforementioned concerns, some staff have been able to deliver the sessions to groups of service users. Sessions with male service users have been delivered to between 2 and 8 service users per group. Sessions with women have been delivered to 12-20 service users per group and have had consistent attendance. These staff reported that the group sessions have proven to be very positive experiences for service users. In the women's hubs, group work is common and so, practitioners and the service users interviewed suggested that the women were very comfortable working in this way. There were frequent reports of excellent peer learning and support taking place. Practitioners fed back:

*'The women are used to talking to each other in groups so they were straight into and started chatting straight away.'* (Practitioner, Office G CRC)

*'There been great peer learning and support.'* (Practitioner, Office H CRC)

*'Women's group - the woman chat about their personal experiences and I think they learn a lot from each other. They get a lot of peer support.'* (Practitioner, Office C CRC)

*'Women love it, and women have this fabulous way of supporting each other. Women, often I notice in the women's hub group will talk about what they are terrible at and are great at being really self-critical, where they have been fabulous at I saw you the other week and you are amazing at that and point out each other's strengths in an uber supportive way, but also challenge each other, in a much more supportive way than I've noticed groups of men do it, but they have embraced and love it, in a way I hadn't appreciated that they might. Been really open, when they have talked about future me, some of the women have written poems, and stories about where they will be in a years time and shared that in an emotionally supportive way which has been fantastic.'* (Practitioner, Office G CRC)

However, this also applies to male group sessions, despite initial concerns about group dynamics:

*'The men were initially anxious about talking in front of each other. But by the end, they were really good as they started supporting each other, which was what you hope for. One lad disclosed something about his past/childhood and the other lads started saying well this happened to me and you might want to go here for support, so...it was really good'* (Practitioner, Office G CRC)

*'I think when you are doing it in pairs, one person can feed off the other, somebody can say something and it encourages them to bring something out'* (Practitioner, Office C CRC)

The interviews with service users corroborated the views of practitioners about the value of peer learning and support:

*'At first I was a bit embarrassed, ya na (sic), speaking...but then after a few sessions it was alright like; you get to hear what other people have went to and ya (sic) think that I've been a bit luckier than some of the other people who were in there 'cause they were on the streets, they were taking heroin...so it is a good thing ta dee (sic) like, when ya are put in groups 'cause people have got a diverse amount of stories'* (Service user 4)

*'The group was good, because you didn't have to talk about your offence or anything like that, it was basically like a group conversation. Everything was done on [our] terms, and what [we] wanted to talk about, so yeah, I quite liked it'* (Service user 9)

Staff suggested three elements of good practice underpinning the success of group delivery. Firstly, the need to exercise professional judgement when deciding which service users to trail the group approach with:

*'You have to pick and choose who you would put in a group...a lot of hostiles, very transient, a lot of people move in and out, massive issues with DV and alcohol and drug use...So we pick and choose. I've had a one where two lads got into a fight and they both got probation, I get them both, so I'm not going to put them in a group, they get different days to report and different times, the skill is finding out, that's not always glaringly obvious'* (Practitioner, Office F CRC).

Secondly, the importance of giving service users' short refreshment breaks during which they can get to know each other, as important to establishing a positive group dynamic.

Thirdly, the development of innovative approaches to undertaking some of the exercises, which means that service users do not necessarily need to disclose any personal information which they are not comfortable doing so, for instance. One example of this is that staff have asked service users to look at the strengths of famous role models via group discussion and identify their own strengths in the form of an individual written exercise, with personal support offered to service users as required.

## Challenges to Delivery

Staff reported a number of difficulties during the initial implementation phase of the programme. The first related to lack of familiarity with the materials, resulting in staff having to spend time getting used to them and finding ways of modifying them to suit their teaching styles, as well as the learning styles of service users:

*'Getting familiar with the exercises because it is all new. We try to deliver it with our own slant on things. Some [service users] have difficulty because they are not so sure about what it's about and that's where the person delivering has to explain'* (Practitioner, Office A CRC)

While the programme was designed in a manner to allow flexibility in delivery – including the use of materials – this might not always have been understood by all, with some reporting that 'one size doesn't fit all' with regards to the programme materials. For example, staff were concerned that some of the session materials was too infantile for older service users, although it is important to note that concern was linked to the imagery used, rather than the nature of the exercises themselves.

*'The materials you were using came across very childish and we all felt uncomfortable using them, but now we have adapted [them].'* (Practitioner, Office A CRC)

*'Session 4 is a gingerbread man, that's supposed to represent them, it's a bit kid like...Great idea we look at internal factors and external factors. It's just the shape that's all, should be just a figure.'* (Practitioner, Office F CRC)

It was also clear from the service user interviews that the materials were sometimes questioned, in similar terms to the above, although there were also some very positive comments and evidence that the ethos of this programme was something which was of value across the profile of service users supported by Northumbria CRC.

Given that concerns were also expressed about the difficulty of delivering to those with literacy or learning skills and perhaps with mental health issues, it is clearly challenging to find content that will be appropriate to all; but this is something which can be developed as the programme becomes further embedded.

Additionally staff reported some concerns in relation to wider issues of diversity in respect of the programme materials. For example, most reported that service users struggle to connect to the case study DVDs because of the age, gender, accent and offence type of the case study service users. However, it is noted that the range of case study DVDs is being expanded to address this. One office has made their own case study DVD with a local, female offender, which service users are now reported to find inspirational. *'In session 6, we had some people crying. I think having something specific for women has been a massive development.'* (Practitioner, Office H CRC).

Despite these initial concerns, however, staff consider the materials to provide a tool and foundation that are easy to adapt for individual needs of service users, and there is flexibility to do this. The majority of practitioners reported that as their familiarity with the programme materials and experience of delivering PP had increased, so had their confidence and skills. Most reported that they now feel confident to readily adapt the sessions on a case-by-case basis to the needs of individuals and have a range of prompts and examples to call upon to support service users to engage with the exercises, in line with the original aim and ethos of the introduction of PP.

Having two options for exercises per session was also reported to be a positive, in that they can pick which is more appropriate for particular individuals. With regards to the Facebook page/letter exercise, for example, it was reported that young people tend to prefer the Facebook exercise, while

older service users tend to prefer the letter. Following completion of the programme, service users are typically asked to complete a feedback survey. At the point of conducting the evaluation<sup>2</sup>, 117 completed surveys had been received. 91% (107) felt the programme was delivered in a way that suited their needs.

The programme was originally designed to be rolled out only to men, but following management and practitioner enthusiasm about the potential benefits of PP to female service users, the programme was broadened. All staff interviewed were supportive of this development, following some adaptation of the imagery and terminology used in the materials to make them more suitable to women. For example, the 'what is in your locker' exercise was changed to 'what is in your wardrobe', with the women's skills placed on 'hangers' for this exercise; The 'who is in my corner' exercise was adapted to use a gymnast and gym floor, rather than a boxer and boxing ring. Furthermore, in one office, the team have developed a seventh session for the women based on the management of emotions. Commenting on the effectiveness of this, practitioners recalled:

*'We adapted the material for the women and that worked well as it made it more bright and engaging for women' (Practitioner, Office H CRC)*

Other initial concerns about delivery related to the amount of content to cover in each session, but in practice this has not been seen as problematic. In fact, one practitioner reported: *'I think it's quite a manageable chunk of work it's not hugely intensive in a way that some of the offending behaviour programmes are'* (Practitioner, Office G CRC). Structural and practical issues – particularly timetabling difficulties – have at times been problematic in delivering the programme to groups of men, although some offices run catch-up sessions to enable the consistent delivery of future sessions. Staff also reported delivering sessions late in afternoons to enable those in full-time employment to attend. The physical infrastructure available to practitioners was also noted as problematic at times, as some offices lack sufficient or suitable meeting rooms for the sessions. However, in some cases, practitioners were able to use their initiative to overcome this issue:

*'I think one of the early reflections that I hadn't thought about was the physical environment, some of our interview rooms...so very much a big desk, two formal office chairs, one on either side. So one of the first things we did was get rid of the desk and the computer and get one of these coffee tables, just to make it a more suitable environment to sit and interact with somebody over something.'* (Practitioner, Office G CRC)

*'...There's other practicalities about room availability. The problem here is there are so many people that want to use the rooms...you come down and there is no room availability.'* (Practitioner, Office C CRC)

Some service users' lack of organisational skills were also flagged up by staff, who reported that service users cannot always be relied upon to take their folders away and bring them back to each session. When folders are missing, this makes it difficult to build on previous weeks work. Some

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<sup>2</sup> Of these, 89 (76%) service users were male and 26 (22%) were female. The majority (109, 93%) were White or White British, 2 (2%) were Asian or Asian British, 1 (1%) was Black or Black British and 1 (1%) was Chinese. 10 (8%) were aged 18-20, 17 (14%) aged 21-24, 43 (37%) aged 25-34, 23 (20%) aged 35-44, 20 (17%) aged 45-59 and 2 (2%) aged 60 and over. 48 (41%) of the service users reported to Newcastle LDU, 28 (24%) reported to Northumberland and North Tyneside LDU, 25 (21%) reported to Sunderland LDU and 16 (14%) reported to South Tyneside and Gateshead LDU. 66 (56%) of the service users had been on probation or licence before, 49 (42%) hadn't. The majority of the service users (56, 48%) had been on supervision for 3-6 months, 49 (42%) for more than 6 months, and 8 (7%) for 1-2months.

offices now encourage service users to leave their folders within CRC offices until service users have completed the programme.

### Service User Engagement

The programme was initially designed to be an entry level programme, targeted at male offenders with a low risk of reoffending. However, as outlined above, the programme was rolled out to female service users and those with medium to high risks of reoffending. Only offenders on court orders for domestic violence are excluded from the programme as other pathways are available to them (one of which is a Positive Pathways-plus intervention). Commenting on the evolving nature of the programme in terms of service user engagement (and development of the programme materials), a senior manager commented:

*'I think it's a living development...people have pushed us all the way along, it's been why can't we expand this to women, why can't we...so, it's continued to evolve this year.'* (Senior Management)

Between August 2014 and June 2015, 405 service users had completed PP. At the time of completing the evaluation, in June 2015, a further 427 service users were accessing the programme.

Overall, staff reported that service users have engaged well with the Programme across the CRC, which is positive development given the scale of change and broad focus of the implementation, with the programme principles and the strengths-based model being well received. Comments included:

*'They do see the principles behind it, using the ... desistance model, they can see that, but you tailor that to whoever you have got sat in front of you. I like to see to the people, this is where we have got you at the moment.'* (Practitioner, Office E CRC)

*'For service users, it was great, it was really well received. I think people own the stuff that they do, writing their goals and working towards them. It's creates ownership and I think that's been v well received.'* (Practitioner, Office C CRC)

*'I've got one lad, he's been through the system I don't know how many times, and he'll say "(name restricted), I've done all this" "Well I'm sorry, but you have to do it again." And he has engaged. He has. But you can see its like "alright. I've done this before, I know where this is coming from." ... So he's not going to get anything out of it I don't think ... no ...'* (Practitioner, Office A CRC)

These comments support the findings of a focus group undertaken by Northumbria CRC with staff in October 2014, when staff reported that the level of engagement foam service users with PP was far greater than generally experienced:

*'I have observed one session delivered at the women's hub were there were twelve women and every one was totally engaged in the whole thing and it was session five and they were writing a letter to a future me and doing a Facebook page and the amount of work they produced and every one of them was really amazing and I was inspired'* (Practitioner, Office C CRC)

Staff reported that those people that have been slightly less engaged are those who have done similar pieces of work, e.g. those who have gone through alcohol/detox or anger management programmes. So, it may be that the programme had less of an impact of them as it is more of a recap, rather than a change.

Staff identified a number of variables which they consider to affect service user levels of engagement, although there was a lack of consensus about these. Some staff felt that service users

who had committed only one offence and had no previous involvement with Northumbria CRC engaged better, although further evidence would be needed to support this:

*'Well... obviously the more ... sophisticated type of offence you get less ... sort of ... you know ... they'll engage ... but I don't think they get as much out of it ... they work with you on a superficial level .. but you can see ... I think ... the younger people I suppose, coming through ... the ... the "new offenders" whose maybes first offence ... will engage with you in a little bit more ... depth ... More willing to explore it, where you might have had ...'* (Practitioner, Office A CRC).

Others suggested that age was a key variable, but disagreed as to whether younger or older service users engage better, as demonstrated by the conflicting quotes below:

*'I have done it with a few older gentlemen, late 40s, and I think they find it a bit like they were back at school, they did do it and they took part, and did it well, but I thought they felt like they were just going through the motions and not getting much out of it.'* (Practitioner, Office G CRC).

*'I don't know if I have any evidence base, but anecdotally I see a lot of younger, transition cases, young men who are perhaps not emotionally mature enough to really reflect on their thoughts, feelings and behaviours, in a way cognitive behavioural therapies would force you to do, I think perhaps not emotionally mature enough to face up to some of the things they have done, I think it has been really beneficial, particularly that triggers bit, seems to resonate really well. Some of the material, what's in my locker, who's in my corner, seems to resonate really well with young men, and the building social capital bit, quite a few have recognised that if I keep going to the gym, that keeps my head straight and I can't use drugs and alcohol if I want to get fit, or into football, so that physical exercise focus, I would say anecdotally, I've had discussions in supervision, that would lead me to believe that young late teens early 20s group, it seems to really resonate with.'* (Practitioner, Office G CRC).

The skills of the practitioner were frequently mentioned as central to the success of engaging service users, along with the different learning styles of service users.

*'If you get them engaged, it is how you sell it. The work is interesting and varied which helps, staff have been dead inventive like when they discuss heroes and things. If the service user buys into it they can get a lot out of it. Is it about the positivity? I don't know'* (Practitioner, Office C CRC)

*'... I think the biggest difference is people's like ... learning styles rather than the ... because there's no reference to what crime people have committed it's, you know ... more about the differences are more in peoples like social backgrounds rather than their criminal streak, I find. The social backgrounds are usually the things that come through rather than ... people tend not to talk about their offences to be honest, they usually talk about how stuff is at home; partners, jobs, training, what they want to do, rather than I've done X, Y, or Z. You don't usually notice a difference.'* (Practitioner, Office A CRC)

In terms of the needs of service users, learning needs and mental health difficulties, reading and literacy and language barriers were most frequently cited as problematic.

*'I think it has been difficult in terms of people with learning need, and mental health difficulties, because you are just drawing on your own strength and skills to adapt this to what you think will suit that person. That's been quite difficult, people do not get the concept, they can't run with it and you find yourself prompting them and doing things for them, and thinking of goals for them which is exactly how it shouldn't be'* (Practitioner, Office B CRC)

## Impact of Positive Pathways on Service Users

### Cogwheel Data

Cogwheel (distance-travelled) data was provided for 216 service users. The dataset included service users from a range of genders, ages, OGR scores and LDUs. Of these cases:

- 49 service users were female and 158 were male. In 9 cases, the gender of service users was unknown.
- 4 service users were under the age of 20, 90 were aged 20-29, 52 were aged 30-39, 43 were aged 40-49, 12 were aged 50-59 and 5 were aged 60-69. In 10 cases, the age of service users was unknown.
- 90 service users had an OGR score of 0-49, 99 had a score of 50-89 and 15 had a score of 90+. In 12 cases, the OGR score was unknown.
- 76 were from Newcastle CRC, 45 were from Northumberland and North Tyneside CRC, 40 were from South Tyneside and Gateshead CRC and 40 were from Sunderland CRC. In 15 cases, the LDU area was miscellaneous.

Data was provided on the service users' before and after scores across a range of lifestyle domains. Analysis indicates that the programme had impacted positively on all of the cogwheel domains.

Domain	Overall change	Avg change per service user
Making use of time	128	0.59
Crime risks	121	0.56
Self-belief & motivation	111	0.51
Friends & Social Groups	98	0.45
Other health and wellbeing	96	0.44
Alcohol & drugs	83	0.38
Work Skills	78	0.36
Physical health	77	0.36
A place to live	71	0.33
Life skills	69	0.32
Intimate and close relationships	42	0.19
Money matters	28	0.13

Table 1: Net changes in cogwheel domains based on 216 cases.

Analysis suggests that the programme had the most profound net change in the areas of:

- Making use of time;

- Crime risks; and
- Self-belief and motivation.

The data presented here is gathered very early in the intervention process and can only hope to capture short term changes. A wealth of research literature stresses that desistance has to be measured over a longer time period. With that caveat, the net changes can be considered very modest. Modest changes could also be linked to service users’ having a limited understanding of the cogwheel exercise, PP being an early intervention and foundation to build upon, and delays in the delivery of the programme which may have diluted its impact over the relatively short period of this evaluation.

Looking at the data in Figure 1, in terms of the number of service users who reported positive changes, no changes or negative changes in their cogwheel domains over time, reveals a more complex picture.

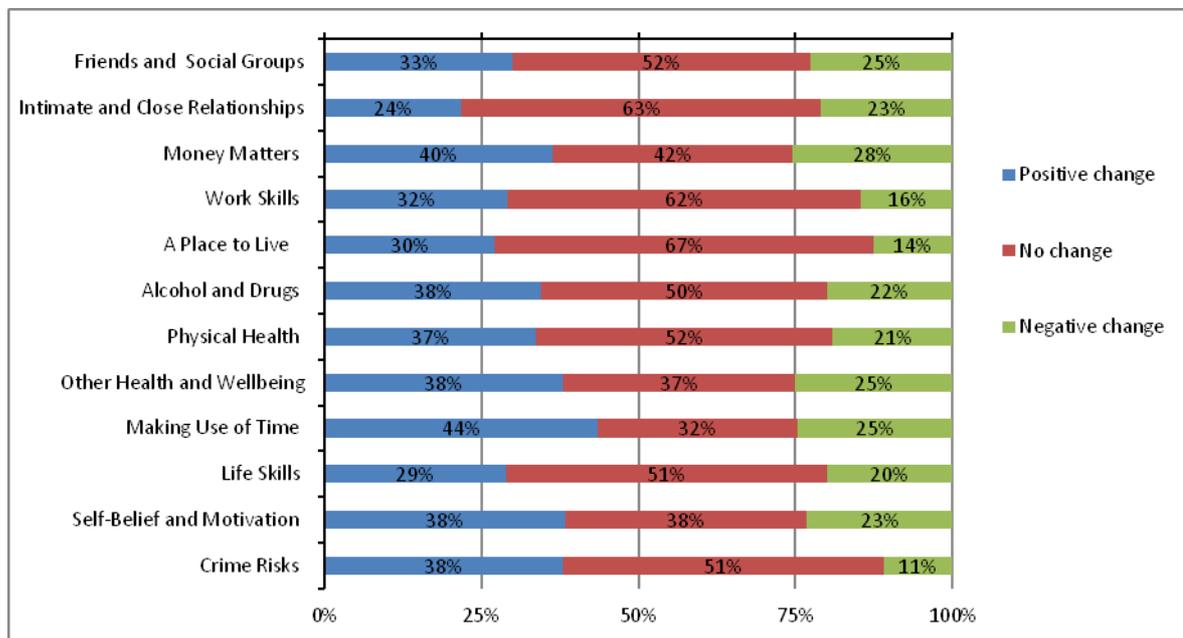


Figure 1: The numbers of service users who reported positive, negative and no changes across the cogwheel domains following engagement with Positive Pathways.

Overall, the number of service users who reported positive changes following participation in PP was most likely to be found in the areas of Making Use of Time (44%), followed by Money Matters (40%), Alcohol and Drugs (38%), Other Health and Wellbeing (38%), Self-Belief and Motivation (38%) and Crime Risks (38%).

No change was most likely to be reported by service users in the following areas: A Place to Live (67%), Intimate and Close Relationships (63%) and Work Skills (62%).

Several service users also reported lower scores across various domains post-engagement with PP. These scores were most likely to be found in the areas of Money Matters (28%), followed by Friends and Social Groups (25%), Other Health and Wellbeing (25%) and Making Use of Time (25%). The scores for the cogwheel dimensions were very close in this category and therefore the negative change was spread across the categories quite evenly, with percentages ranging from 11% to 28%. These changes are likely to be linked to a range of challenges that the service users had ongoing in their lives during completion of the programme. This suggests that perhaps more attention needs to

be given to the circumstances that service users are facing at the time of completion, in order to make sure that the programme has the maximum effect possible on service users.

Looking at the scores in terms of gender indicates that for males, positive net changes were recorded across all of the cogwheel dimensions. The highest recorded positive net changes were found in the areas of Making Use of Time, Alcohol and Drugs and Self-Belief and Motivation. Money Matters scored the lowest. For females, positive changes were reported over 9 of the 12 cogwheel dimensions. Of those positive changes, Crime Risks scored the highest, following by Physical Health and Other Health and Wellbeing. Negative changes were recorded for Intimate and Close Relationships, A Place to Live, and Alcohol and Drugs.

Table 2: Net changes in cogwheel domains by gender.

Domain	Male		Female	
	Overall change	Avg change per service user	Overall change	Avg change per service user
<b>Making use of time</b>	104	0.66	11	0.22
<b>Alcohol &amp; drugs</b>	92	0.58	-19	-0.39
<b>Self-belief &amp; motivation</b>	89	0.56	16	0.33
<b>Crime risks</b>	81	0.51	32	0.65
<b>Other health and wellbeing</b>	68	0.43	18	0.37
<b>Friends &amp; Social Groups</b>	68	0.43	15	0.31
<b>A place to live</b>	65	0.41	-13	-0.27
<b>Work Skills</b>	62	0.39	1	0.02
<b>Life skills</b>	52	0.33	11	0.22
<b>Physical health</b>	40	0.25	25	0.51
<b>Intimate and close relationships</b>	37	0.23	-9	-0.18
<b>Money matters</b>	14	0.09	10	0.20

Breaking down the data by OGRS, for the OGRS of 0-49, all of the cogwheel domains showed a positive change. The highest overall positive changes were for Other Health and wellbeing, Self-Belief and Motivation and Alcohol and Drugs.

For the OGRS of 50-89, positive changes were reported for all but one of the cogwheel dimensions. The highest overall positive changes were for Crime Risks, Self-Belief and Motivation and Making Use of Time. The recorded negative change was for the cogwheel dimension of Money Matters.

For the OGRS of 90+, positive changes were reported in just seven of the eleven domains. The highest level of change was reported for Crime Risk, Making Use of Time and Money Matters. Negative changes were reported in the areas of Self-Belief and Motivation, Life Skills and Intimate and Close Relationships.

Table 3: Net changes in cogwheel domains by OGRS.

	0-49		50-89		90+	
Others didn't feelDomain	Overall change	Avg change per service user	Overall change	Avg change per service user	Overall change	Avg change per service user
Other health and wellbeing	55	0.61	33	0.33	2	0.13
Self-belief & motivation	55	0.61	58	0.59	-12	-0.80
Alcohol & drugs	54	0.60	14	0.14	2	0.13
Making use of time	47	0.52	58	0.59	20	1.33
Friends & Social Groups	45	0.50	27	0.27	2	0.13
Money matters	42	0.47	-8	-0.08	20	1.33
Physical health	39	0.43	30	0.30	-4	-0.27
Life skills	38	0.42	30	0.30	-10	-0.67
Work Skills	38	0.42	23	0.23	4	0.27
A place to live	24	0.27	32	0.32	-8	-0.53
Crime risks	7	0.08	91	0.92	22	1.47
Intimate and close relationships	2	0.02	30	0.30	-10	-0.67

#### Service User Questionnaires

On the whole, the feedback received from the service user surveys developed by Northumbria CRC was highly positive and consistent with the fundamental principles of self-reflection and strengths-based approaches to desistance from crime. It was noted in analysis of the cogwheel data that there tended to be modest evidence of improvements in service user scores across the various domains, but that this might be expected to develop further over a longer time period. The positive feedback below provides further grounds for optimism. As a result of participation, the survey analysis revealed the following:

- 88% (103) said they were able to recognise and value their individual strengths;

- 91% (106) said they knew more about who will help and support them to move away from offending;
- 90% (105) felt that they were more able to recognise and overcome barriers to leading to an offence free lifestyle;
- 94% (110) said they could identify more readily who and what was important to them;
- 86% (101) said they felt clearer about their goals that they had set for the future;
- 91% (107) felt they could visualise a future life, which is productive and does not involve offending.
- 82% (96) were confident or hopeful that the programme would support them to desist from crime.

### *Interviews with Service Users*

The interviews with service users further supports the quantitative findings. Service users spoke positively about the programme highlighting their own strengths and positives in their life – resulting in confidence building – and the role of the programme in helping them to identify issues surrounding offending, such as the role of acquaintances and the impact of crime on the victim. Others valued the advice and support that they received from the programme with, for example, drug problems and seeking employment. Even service users who had committed only one offence and did not feel they were likely to reoffend in the future, indicated they felt they had benefited from engagement with the programme.

*'it was addressing me issues, do you know, how I became to be offending ... the people I have obviously offended, and the people that became embroiled with the crime ... the victims, I learnt a lot about me actual reflecting on what I was and what I wanted to be. I don't know, I actually realised throughout the programme, that I was able to achieve some of them things, do you know, through the way the programmes rolled out, and works is, that made us realise really, it just made us reflect and it was helpful' (Service User 3)*

*'I'm amazed, how helpful and how encouraging the probation service is, they really do want to help you. They want to move you on in life, for a better life basically ... it's what should have been there anyway, but they did instil them thoughts and initially sparked them really for us to think about it, and I think I have a lot to be thankful for with probation. It's obviously been an offence, do you know, I was in prison, it was a big crime. They made me realise, afterwards, that it's not over, I was on licence for a reason [previously, in the past] I didn't give it a thought, and I feel awful now. I don't rack meself with guilt anymore, because I think "right then, ok, it did happen, that's an end chapter to that a part of my life, now's a new life", basically. I would still sit in the house, not want to do nothing, or go out and socialise because I'm scared to bump into those people I was involved with, and would be encouraged into doing the same thing, but I mean I'm actually quite confident, do you know, in going out now, and it isn't an issue. I can say no and that's amazed us again, the deterrent that I have, my own willpower, it's good, really good in fact.'* (Service user 3)

*'Well for me it's actually been quite helpful because its helped me realise a lot of things that I do have going for me, that I didn't really think about me, it opens your eyes to a lot of things you wouldn't really think about on a day to day basis.'* (Service user 14)

*'well, from what I can tell, the programme was designed for people who might have had troubles in the past and all things like that, I haven't as such; this is my first minor issue. I've been to school, I'm quite clued up, I've already got my accommodation place, my working place things like that; so quite a lot of it wasn't relevant, but we did it anyway. I did learn a few things from it ... but I just managed to get through it a lot faster'. (Service user 18)*

### Interviews with Practitioners

The majority of practitioners interviewed felt it was too early to report on any evidence of the impact of the programme on the likelihood of services users to reoffend or desist. However, staff were very positive about the Programme and they hoped that eventually, they would start to see evidence of the positive impacts of the programme on service users. Staff reported many soft outcomes, such as the identification of strengths and recognition of the progress which service users have made during the programme, which should result in increased motivation to desist:

*'I think it's the content of the work that keeps them going. You can recap on what they've done in previous weeks and give them a pat on the back for that. They are going away pretty pleased with themselves. Going away with the certificate brings it all together' (Practitioner, Office H CRC)*

*'When someone has a crisis, is good to have examples of their strengths to remind them about' ... It's a really good way of boosting someone's confidence. To realise they are a good person and they have the skills to move forward. It gives them something to cling onto and work towards. Before, it was work towards completing your order without committing another offence' (Practitioner, Office H CRC)*

### Impacts of Positive Pathways on Practitioners

PP was introduced within Northumbria CRC at a time of significant organisational change, in terms of security of employment and the changing direction of the probation service. Concerns were expressed by both management and practitioner stakeholders that this might cloud its reception among staff (and service users). Indeed, research literature suggests that the nature of organisations and staff delivering programmes can influence offender motivation and attitudes toward compliance (Bottoms, 2001; Rowe and Soppitt, 2014). However, management staff were also keen that the introduction of PP be seen as a means of reinforcing the organisation's commitment to the continued development of professional practice. Broadly speaking, the majority of staff interviewed reported to feel motivated by the new initiative for that very reason. Comments included:

*'I think in a climate where everything else has felt out of your control...for me to be involved in the development of this, I had some control over where we were gonna go to and what it was going to look like, so for me was massively beneficial and for practitioners to have something that you feel like this is what I am going to focus on because I can't change this redundancy privatisation climate, but we are now in an even more difficult set of circumstances with redundancies announced in the last fortnight so that's rocked everybody again, so again as a middle manager to try and keep people motivated to focus on practice is really difficult' (Practitioner, Office G CRC)*

*'It felt like an exciting time, very selfishly it was when the whole of the TR agenda was rumbling on, it was a difficult time to stay motivated, I guess, if I am really honest. The opportunity to be involved in something that is absolutely about practice and all the reasons you come into a job like this, your integrity stays intact, it is evidence based and it is based on practice that we know*

*works whilst still creating an efficiency which nobody has a problem with'* (Practitioner, Office G CRC)

Only minority of staff felt that the introduction of PP was an unwelcome change at the particular point of implementation, stating, for example:

*'They have to get their head around delivering training at a time of change is difficult you get people using that as an outlet to vent other frustrations. People very much, if we are all going to be privatised we are going to do this for a short term and it's not something that will sustain, so a lot of resistance and negativity but you would anticipate that would be the case'* (Practitioner, Office G CRC)

*'This time of change, too many changes. I don't think it has helped one little bit, not to what we were delivering because we used to have planned programmes, we were doing, exercise, we knew what we were doing in that exercise and tailored to the offence at the time. This one doesn't, it is just about change. For the best will in the world, everyone wants to change when they are sat in front of you, until they get up and go and they haven't changed. I do it and that's it'* (Practitioner, Office E CRC)

Commenting on how well the implementation process has been executed at a time of change, a senior manager stated:

*'I think it is still fairly early stages and it's at a time of major disruption and there's an awful lot of change. So the fact that we've managed to keep delivery going and to keep going with something that people generally see as positive is quite an achievement really.'*

The smooth implementation of the programme was, in part, linked to the management support offered to staff. All practitioners felt that there were high levels of management buy-in to the programme and that they, in turn, had been very well supported by senior and LDU level management throughout the implementation process:

*'There is a huge push and support from LDU manager. It's nice to hear her speak so highly of it. They have made it very accessible for us. We've made our own women's material and that's been supported at LDU level'* (Practitioner, Office H CRC)

*'I think it's had a lot of support, now in terms of the way we work, we do have to be more smart, in the business/commercial context and I don't think it's been a lot of time and investment has been put into selling it as a gold standard offender behaviour programme, from every level in our organisation, even when we were delivered training, we were given clear timelines about forecasts and threshold'* (Practitioner, Office G CRC)

## **Performance Management**

Clear and consistent monitoring of the inputs, outputs, outcomes and impacts has been central to the embedding and continual development of PP. Commenting on the value of this, a senior management explained:

*'One of the things we have been delighted about is how quickly Positive Pathways has been picked up and has been delivered. Some of that has been through very active monitoring, but we did that on purpose to build it in, to make it mainstream...and it was about ensuring some delivery of a quality programme in all cases.'*

Concerns were raised by some practitioners, however, about the expectation that service users complete the programme within their first eight weeks of engagement with Northumbria CRC. While the design and management of the programme acknowledges that this 8-week period might not

always be appropriate, staff confirmed that this is not always possible to achieve when service users are in crisis (i.e. experiencing homelessness) - and so, some sessions must be dedicated to addressing their immediate needs – and when service users struggle to understand the content of the sessions, for example.

*'If they come in, in crisis and you are supposed to be doing session 3 of PP, you have to just put it on hold...It's hard delivering to people who work on an evening, there is only one late night reporting, and if you have got 3 or 4 people coming in and you are trying to do an hour session with somebody, you have to decide who you are going to do it with and others have to hold off. The work is hard to do, there isn't physical time to do it with everybody. If it is an hour, you are taking up an interview room for an hour and that impacts on others, we are in a shared building. Once I haven't been able to get a room, so I have to say, we will re-arrange your appointment and do it in the next session'* (Practitioner, Office B CRC)

*'I've had people who have got through it in no time at all. Other people have been in week in week out, but haven't got the concept, so it has taken longer and some people have dropped out of the programme because of their chaotic lifestyle, so they have started, come in and done two weeks, then they have not been seen again, and they end up in breach and they are back to court or whatever'* (Practitioner, Office B CRC)

*'You hear staff say trying to get it done out of the way, rather than it has got a specific purpose and it's their to serve a function in terms of desistance, staff as well have got pressure on us to get it done, so let's just get it done. It is generally pretty rushed, whereas if you someone starts a sentence today you do induction, they might not be in the right place to start the programme straight away, but we are. We used to talk about responsivity and responding to where the person is at a particular time in terms of their stability, now we are just chucking it at them regardless. If someone has all kind of issues in their life, they are more likely to respond to structured work when they are a bit more stable.'* (Practitioner, Office B CRC)

Others felt that the requirement for all service users to complete PP had undermined their discretion to respond to service users' needs as they professionally judged. For some staff, therefore, a focus on this target can be stressful and detrimental to the delivery of the programme. In all cases, however, staff reported liaising with management and keeping them informed about when PP sessions cannot be delivered as planned. Staff typically reported having open relationships with managers which meant they felt comfortable raising these issues with them.

Linked to this, some LDU managers too reported feeling uncomfortable with the performance management of PP, which they felt required them to micro-manage their staff.

*'Downside for me is that it forces me to micromanage my staff because I have to sit down with them with a list of who I think should be doing PP and ask my staff if they are doing it with that offender and if not why'* (Practitioner, Office D CRC)

Underlying these concerns is an inevitable tension between delivering the programme in a way that provides focus and continuity through regular sessions and being adaptable in the light of legitimate extraneous factors that might mean postponing sessions. Senior management recognise these tensions and that close performance management is not always part of the culture of the organisation, but stressed that they felt it was essential in this case. In practice, however performance management data shows that on average the PP programme is completed in 8 weeks. This suggests an appropriate balance is being struck, notwithstanding the concerns expressed above.

## Partnership Working with the Resource Centre

Although this was not a focus of the evaluation, staff nonetheless reported positive working relationships with the Resources Centre – where service users are signposted to access help for a range of specific needs – resulting in positive outcomes for service users. Typical comments, for example, included:

*‘Engage with them, that’s very very helpful. Works very well. We have got staff there from agencies who can offer support - could be housing, drugs/alcohol, orientation sessions, Maths, English, IT, lots of things there. They go for orientation for the first session, that’s where qualified staff ask what they can do to offer them, get them engaged. Resource centre is very resourceful.’* (Practitioners, Office A CRC).

*‘That is working well. It is building up. Getting quite a few to see people for drug and alcohol abuse, for financial advice. Running a job club there, and getting 4 people coming there, have laptops and can do CVs. That’s positive’* (Practitioner, Office F CRC).

It was highlighted in some cases, however, that lack of capacity would result in delays to service users being able to access support:

*‘The only negative is the idea is that we do PP and identify areas they need help and send them to the resource centre – the theory is great but when they are working full time there is no pathway to the resource centre or when they are of a certain age there does not seem to be anything for them at the resource centre. It only seems to work when there are identifiable issues.’* (Practitioner, Office C CRC).

## **Conclusion**

This research report has outlined the findings from an evaluation of the PP programme. Overall, the introduction of the PP programme has been well received and viewed as a positive development for intervention by practitioners and service users. Staff and service users have strongly welcomed the strength and evidence based nature of the approach.

The programme was introduced in June 2014 and is still very much in the early implementation stages. A key strength of the implementation process, however, has been the senior management team's focus on ongoing staff and service user consultation and the continual development of the programme, in terms of its target group, the materials used and approaches to delivery. New approaches to the delivery of interventions for staff (i.e. group delivery) and programme materials are still being embedded within the LDUs. While the majority of practitioners continue to deliver sessions on a 1-2-1 basis, good progress has been made in this respect and staff are becoming increasingly confident in these regards. LDU management support and peer support and learning have been critical here.

The main positive of the programme, as discussed by staff, is that it is viewed as a well-structured, coherent, theoretically-driven tool for delivery, with a flexible approach which can be adapted as and when needed to individual service users. Staff raised the concern that 'one size doesn't fit all' with regards to delivery of the Programme to service users. Therefore having two exercise options for each session and the scope to amend the programme terminology and imagery has worked well. However, moving forward, both management and practitioner stakeholders feel that there is a need to change some of the programme materials, in particular, on a more permanent basis. Indeed, senior management recognise this and work is underway to address this.

The feasibility of the eight week delivery period of the programme has been another primary concern for some staff. However, the research has found that it is important that the programme is delivered consistently over the 8 week period in order to achieve impact. Where this has not been the case, service users have struggled to identify PP as a single, structured programme and the potential impact appeared to have been significantly diluted. It is suggested, therefore, that this performance indicator remains in place.

The significant achievements of the process to date, however, are the positive outcomes for service users. Both the quantitative and qualitative data collected and analysed suggests that the programme is achieving its desired outcomes in terms of supporting service users to recognise their strengths, any issues in their lives which may result in reoffending and the range of opportunities which are open to them in their lives.

One of the main challenges facing the programme has been the time of implementation, which has been a period of uncertainty for staff. Positively, however, the large majority of staff have welcomed the introduction of PP which they see as giving recognition, credence and structure to strengths-based work which some were already undertaking. Furthermore, what has been apparent during the evaluation is the professional attitude of all staff, the valuable support provided by LDU management staff and the commitment of practitioners to supporting service users and to developing the programme to maximum effect.

### **Recommendations**

1. The Positive Pathways programme should continue in its present format, expanded as it is to all service users;
2. Training and other programme materials ought to be revised and updated on a regular basis such that they retain relevance to services users and staff;
3. The programme is a good example of evidence-based practice and has been developed with staff on the basis of a robust body of research and theoretical evidence that supports the principles and practices contained within. This had helped to develop the professional practice of staff and the CRC. This approach to service delivery should be maintained and shared more widely;
4. The monitoring and evaluation of the programme should continue and form an ongoing part of the process of reviewing the programme and feeding back to staff;
5. The data analysed in this report necessarily can only refer to the impact that the programme has had on service users in the medium term. Evaluation of the longer term impact ought to be continued, consistent with professional evidence-based practice.

### **References**

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