





Remote supervision:

Getting the balance right



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1.0 Executive Summary

1.1 Background

The sudden onset of Covid-19 has engendered significant policy and practice implications when it comes to delivering probation and allied criminal justice services, with new 'roadmaps' and emergency delivery models being drawn-up in haste (HMPPS 2020; PBNI, 2020a). Though there have been some early reflections (from academics, commentators and third sector agencies), and even a national review of Exceptional Delivery Model arrangements in probation services, (HMIP 2020), the field has, as yet, been largely unexplored. The current study, therefore, has been conducted to look very directly at this matter, drawing on the remote operational delivery practices amongst case management staff working in three Community Rehabilitation Company divisions, run by Seetec.

1.2 The current research

This report sets out the findings of a research project examining probation supervision practice in response to the Covid-19 pandemic. It explores case managers' views of the benefits and limitations of different methods of remote communication, and the suitability for their continued usage in the post-pandemic future. The research sought to answer two key questions:

- 1. What practice methods, skills and technologies are currently being used by case managers?
- 2. What current practice measures do case managers experience as valuable, with the potential to be retained and developed in the future?

1.3 Methodology

The research comprised a mixed methods design, involving an online-survey with 79 case management staff, and 12 semi-structured interviews with survey participants interested in further participation. Interviews were conducted by telephone and video-conference between August and September 2020. Survey data was collected from July to September 2020. The qualitative data was analysed thematically. The quantitative data was explored using Excel.

1.4 Findings

Description of practice

The pandemic has had a profound effect on practice, and has required probation staff to make a rapid shift to remote forms of supervision. When it comes to methods used, most common was the telephone call. Telephone calls enabled a wide range of supervision tasks to take place, with practitioners deeming them more suitable for routine reporting and unscheduled welfare checks, and least suitable for induction appointments. Text messages and emails were also common (the former, for quick and direct communication, the latter for passing on key health/employment documents) but had their problems in the form of data security breaches and the risk that information might be read by someone other than the intended recipient.





Video-calls were the least common method, and were used principally for meetings with other professionals.

The suitability of remote (telephone) supervision

Though telephone supervision formed the larger part of remote supervision, its suitability was debated. It offered considerable flexibility to service users (e.g. for those with childcare responsibilities, work commitments, or physical health problems), but was not always felt to be inclusive (e.g. for those who had English as a second language, or who had hearing difficulties). When working with service users with drug and alcohol problems, who were homeless, or who were experiencing mental health issues, practitioners saw challenges as they were unable to do visual checks for safety and wellbeing. It caused problems when it came to assessing risk and, significantly, telephone supervision almost always felt unsuitable for cases involving child protection and domestic violence.

Importantly, telephone supervision denied the engagement of other vital senses. Sight was significant; supervisors who could not see service users worried about missing vital information, but viewed video-calling as potentially a poor substitute for face-to-face work, due to there still being a virtual wall. But practitioners also valued their sense of smell as a means of gathering crucial information about the well-being of service users and talked about the importance of tone of voice in difficult telephone calls.

Finally, though the flexibility of remote (telephone) supervision increased compliance, its less formal nature was said to risk complacency. Coming into the office signalled active compliance in a way that simply answering the phone did not.

The professional relationship

Remote supervision also posed a challenge to building and sustaining professional relationships with service users. Indeed, familiar processes of listening, being friendly, and being clear about the purposes, expectations and options of supervision brought emotional labour, an intrinsic aspect of probation work, into sharper focus. Some practitioners, not used to using a phone for work, found themselves accessible to service users in unfamiliar ways. Experiences of telephone supervision also overlapped with experiences of working from home. This added to the complexity of setting appropriate boundaries for professional relationships – it was not always possible to separate work time from home time.

Inter-agency work

Finally, though already common to frontline practice, the pandemic increased the use of video/telephone conferencing for inter-agency work. Some staff were positive about this, citing time saved by not attending in person, however others saw the challenges of supporting someone, especially a vulnerable someone, in a difficult virtual meeting.





1.5 Take home points

1. Supervision cannot rely on telephone contact alone – Deprived of the opportunity to see, hear (and sometimes smell) properly, supervisors were not getting the full picture of service users and reciprocally, service users were not getting a full picture of them. Telephone supervision constrained practitioners' ability to gather the information needed to make accurate risk assessments, and was not always sufficiently formal given the statutory nature of probation supervision. Remote supervision was also a difficult experience for vulnerable service users and those with complex needs.

2. However, there is a place for telephone supervision – telephone supervision can work well in cases where staff and service user know each other well, where the service user's circumstances are stable and where risk is assessed as low. It also benefits in terms of the expense and inconvenience of travelling to probation offices. In some cases, telephone supervision enables conversations and reflections that are more comfortable, genuine and purposeful than those that take place in the office.

3. The importance of professional discretion – practitioners would like to continue with elements of remote supervision and would welcome an increase in professional discretion in this area. New guidance is needed to take account of these changes in working practices and professional boundaries, for example around use of work equipment, sharing of email addresses, security of data and recording of decisions about modes of contact. Increasing the scope for the use of professional discretion in this way also brings new support and training needs for staff.

4. Thinking about video calls – The study supports the continued use of video calls for inter-agency meetings. Though staff had no experience of video supervision, many saw the value of it through offering the prospect of seeing (as well as hearing) service users and their immediate surroundings. A trial of video calling would enable practitioners to explore the benefits and limitations of this technology, assess its usefulness and contribute to developing the necessary protocols and practice guidance.

5. Developing the use of internet resources for supervision – The study also points to the possibility of broadening structured supervision by drawing on online resources. Ability to use these resources was sometimes hampered by lack of smartphones (for practitioners), Wi-Fi issues in offices, security settings on work devices, and access issues for service users, but there was significant interest. Staff asked for more information about appropriate good-quality online resources, expressing enthusiasm for a resource library that could be used as part of individual supervision.

6. Flexible working with greater use of remote supervision – 'Working at home' and 'remote supervision' are two different things which, in the context of the pandemic, overlap. Some of the objections to telephone supervision seemed really to be objections to working at home, for example the sense of intrusion into the





practitioner's home, with staff calling for remote working from the office. After the pandemic, it was hoped that the benefits of working from home might be maintained (including travelling less, staying late in the office less frequently, and managing their family responsibilities more easily), alongside the flexibility, when in the office, to have the option to use remote means of communication.





2.0 Introduction and Study Objectives

This report sets out the findings of a research project examining ways that the practice of probation supervision has changed in response to the Covid-19 pandemic. In particular, the study explores the use of the telephone and other remote methods of communication. It looks at the limitations of these approaches but also their potential benefits and suitability for use in the post-pandemic future. The research focused on the interactions between staff and service users. The study is not an evaluation of the Emergency Delivery Model implemented in response to the pandemic, nor does it explicitly investigate the impact on staff of working at home or issues such as the support and supervision available to practitioners.

The research was undertaken in partnership between the KSS CRC Research and Policy Unit and the Centre for Community, Gender and Social Justice, Institute of Criminology, University of Cambridge.

The agreed aims and objectives of the research were:

- To examine case management practice in the current pandemic.
- To examine advantageous aspects of current case management practice that may be retained in the future.
- To seek the current views and experiences of case managers in relation to their front-line practice across three CRC divisions: Kent, Surrey & Sussex; Dorset, Devon & Cornwall; and Bristol, Gloucestershire, Somerset & Wiltshire¹.

The research sought to answer these questions:

- What practice methods, skills and technologies are currently being used by case managers?
- What current practice measures do case managers experience as valuable, with the potential to be retained and developed in the future?

The researchers would like to thank everyone in the three CRC divisions who made this study possible. We are appreciative of the support provided to ensure the success of the fieldwork and are particularly grateful to staff for completing the survey and participating in interviews.

The report begins by describing the background to the practice changes brought about by the pandemic and then outlines the study's methodological approach. The research findings are set out in Section 5, with Section 6 providing discussion and talking points arising from these findings. The report concludes with Appendices containing the data gathering tools and a glossary of abbreviations.

¹ Seetec has been delivering probation services in KSS CRC since Transforming Rehabilitation in 2015. In 2019 Seetec was also appointed to deliver probation services in DDC, BGSW and Wales CRC regions following the collapse of the previous provider.





3.0 Background

The sudden onset of Covid-19 in early 2020 forced the UK government to adapt its policy and practice approaches to delivering probation and allied criminal justice services, with new 'roadmaps' and Emergency Delivery Models being drawn-up in haste (HMPPS 2020; PBNI, 2020a). Governments and relevant authorities in Europe and around the world have adopted similar measures (CJI, 2020; CEP, 2020a). These rapid changes added, in England, to an existing sense of turmoil as they occurred in the midst of wholesale structural changes within probation provision, combining with wider contextual concerns over existing staff shortages, high workloads and low staff morale (House of Commons, 2020).

There is, as yet, little published research exploring the impact of Covid-19 on probation practice. Academics, commentators and interested third sector agencies have considered the emerging provision, producing blog posts, contributing to websites and writing reports. HMIP has reviewed the Exceptional Delivery Model arrangements in probation services, publishing findings (HMIP, 2020) after the fieldwork for this project was complete. This study draws on this mix of early reflections, ideas and evidence.

Many of the key issues and concerns pre-date Covid-19. For example, the exploration and discussion of the quality of interaction within supervisory relationships has been evident for many years (Burnett and McNeill, 2005; Shapland et al, 2012), associated as it is with encouraging motivation and compliance within service users (Ugwudike, 2010). Supervisory relationships are built with involuntary clients (Trotter, 2015); service users are required to maintain contact with their supervisors.

While many issues may be historical, the pandemic does appear to have brought the word 'exacerbated' to the forefront of commentators' minds as the intensity of structural and individual practitioner difficulties grows (CJI, 2020). Additionally, thought has been given to possible new patterns of offending and the implications for practitioners (Ellis Devitt, 2020a). These aggravated issues can be clustered into emerging themes within the limited contemporary literature.

3.1 Emerging themes

All current literature makes reference to the challenges and opportunities found within the sudden onset of predominantly remote forms of supervision, with this practice involving primarily mobile phones and video use (Phillips, 2020; McNeill, 2020; McGreevy 2020; Vollback, 2020, Audick, 2020; User Voice, 2020). For some commentators the supervision process has become focussed largely on offering practical support to service users, through examples such as providing assistance with food deliveries or accessing medication (McGreevy, 2020; McNeill, 2020). Frontline probation staff continue to see higher risk service users in person to some extent and in some fashion (McGreevy, 2020), with 'drive-by' supervision occurring in some instances as probation staff make doorstep visits by car (McNeill, 2020; HMIP, 2020). Groupwork interventions, including Unpaid Work programmes, have virtually





ceased, with the communication of this to service users appearing to be lacking in many instances (User Voice, 2020).

Although phone contact with service users may have increased in terms of its frequency, there are questions about the resulting quality of the interaction. Phillips (2020) suggests it is less beneficial in relation to building rapport between supervisor and service user, with McNeill (2020) indicating that phone supervision can be experienced as too mechanistic in nature and thus less satisfactory for all. In addition, the use of telephone supervision (and specifically the routine use of telephone supervision (specifically the operating model of some CRCs, criticised by, among others, HMIP as ineffective (HMIP, 2019).

The overriding concerns for practitioners in the pandemic, as reflected through the literature, are those of a significant increase in mental health difficulties that service users encounter (Musimbe-Rix, 2020a; User Voice, 2020), often allied to substance misuse difficulties (PBNI, 2020b). Sirdifield and Brooker (2020) powerfully articulate the issues surrounding mental health difficulties brought about by social distancing and isolation measures, aligned to complex social needs and limited medical provision. These concerns are matched by that of an increase in incidents of domestic abuse (Musimbe-Rix, 2020b). Some narratives speak powerfully about the requirements of victims and adapting practice to meet their needs (CEP, 2020b).

The literature relating to remote supervision sits adjacent to that making reference to home working for staff with this again presenting as challenging for some, but welcomed by others (PBNI, 2020c; HMIP, 2020). Issues of confidentiality and invasion of privacy are articulated by McNeill (2020), who notes the potential blurring of professional and personal boundaries. He further notes the pressures this can place upon those with child care responsibilities within a predominantly female workforce. Phillips (2020) reminds us that some two thousand probation staff have been absent from work during the pandemic, placing additional pressures upon the system. He further comments on the emotional demands placed upon supervising officers and how lessons may be learnt from giving consideration to working practices involving emotional labour (Hochschild, 1983) and collective coping measures (Marek, 2003).

3.2 Learning for the future

Much of the literature concludes with comments on developmental learning that can be adopted from recent professional practice within the pandemic. For some commentators, advancements have been made in the use of communication technology, including the development of new applications for mobile phones. Channels of communication between staff and senior management have improved for some and this needs to be sustained (McGreevy, 2020). For others, the practical support measures offered to service users in the pandemic need to continue, with the caveat that increased surveillance of individuals is not the most beneficial way forward and risks the legitimacy of supervision (McNeill, 2020). For lower risk cases the increase in remote supervision could be developed further (Vollback, 2020), and for





some service users, communication is actually enhanced via engagement by phone (Audick, 2020).

Ideas relating to court diversion programmes, specialist caseloads, and improved support services within probation provision have been recently put forward (Sirdifield and Brooker, 2020), albeit it can be argued that many of the issues and proposed solutions are not new and further resources are required. Service user groups would certainly echo the view that an improvement in service provision is sorely needed (User Voice, 2020). The extent to which the above themes are replicated within this current study is captured within the following sections of this report.

4.0 Methodology

In order to answer the research questions this study took a mixed methods approach and gathered data from a survey and from semi-structured interviews. The survey, circulated to all case managers within the three CRC divisions, asked questions about the way that practitioners were using technology to enable remote supervision and sought their perspectives on the strengths and limitations of this approach. The semi-structured interviews provided the opportunity to explore the survey themes in more depth and gather a range of practice examples. These two methods were chosen on the basis that they were likely to generate relevant findings and were practical, manageable and ethical in the context of the study schedule and budget.

4.1 Recruitment and sample

Participation in the survey was voluntary with operational staff in PSO, PO and QDO roles being invited to take part. Staff in three CRC regions (Kent, Surrey & Sussex; Dorset, Devon & Cornwall; and Bristol, Gloucestershire, Somerset & Wiltshire) were included in the invitation. A notice about the research was posted on the Intranet with reminder emails sent on three occasions during the duration of the project. The survey remained open for completion from the 20th July to the 4th September 2020 and was constructed using the JiSC online survey tool. The survey questions can be found in Appendix 1.

Seventy-nine completed surveys were submitted by the deadline. It is not possible to know exactly what proportion of the population of eligible practitioners this represents. Staff were working largely at home from March 2020 onwards and, during this difficult time, a small number had no access to a work supplied laptop or internet enabled smartphone.

Following the survey, 12 semi-structured interviews were undertaken. The interviewees were selected from the group of survey respondents who volunteered to participate in this way. These interviews were conducted by telephone and video-conference between late August and mid-September 2020 and, with the consent of the interviewee, audio-recorded. The interview schedule can be found in Appendix 2.





Table 1 shows the gender, grade and length of service of the interviewees.

<u>Table 1</u>

'Name'	Role	Time in Service
Emily	PSO	Less than one year
Rebecca	PSO	1 year
Lisa	PSO	10 years
Gemma	PSO	13 Years
Sara	PSO	15 years
Nicola	PSO	16 years
Linda	PSO	23 years
Deborah	РО	16 years
Lena	РО	Qualified 3 years ago
Andrew	PO	15 years (qualified 13 years)
Paul	РО	Qualified 17 years
Claire	РО	18 years (qualified 16 years)

Given that the survey respondents and interviewees volunteered to participate in the study they may not be representative of the population of CRC case managers. It is possible that practitioners chose to participate in the research in order to express particularly positive or negative views about remote supervision and probation practice.

4.2 Analysis

The survey and interview data were analysed to identify key themes and concepts. An Excel spreadsheet was used to record and classify the data. All the interviews were analysed by at least two researchers. The research team sought to ensure the quality of the data analysis by working together to share ideas and test the reliability of emerging findings.

4.3 Ethics

The research project observed the ethical principles set out in the KSS CRC RPU Code of Ethics and gained approval from the Institute of Criminology Research Ethics Committee. Care was taken to store and transfer research data securely and safely, protecting the confidentiality of research participants.

In line with ethical research practice, all research participants were assured of anonymity. Interviewees were given pseudonyms (see Table 1) to avoid the distancing impact of using numbers or initials while ensuring their confidentiality.





5.0 Findings

5.1 Description of practice

The pandemic has had a profound effect on practice, requiring staff to make a rapid shift to remote forms of supervision. Prior to the pandemic, few of the research participants had a work mobile telephone. Basic mobile phones, able to make voice calls and send text messages but without the capacity to make video calls or access the internet, were provided in the early weeks of lockdown. Most practitioners did have access to work laptops; some could use this device for video-conferencing (although only if the user was logged out of all secure applications and records). The laptop software also allowed the sending of text messages to service users.

The survey showed that, during the period between March 2020 and early September 2020, voice calls, text messages and letter writing were the most used forms of remote communication. In line with CRC policy and reflecting the available technology, participants were not using video calls (Whatsapp, Facetime, Zoom or similar) to contact service users. Table 2 shows a number of communication methods, illustrating how many survey respondents used each method during the pandemic and how many would want to continue with it in the future. Across the range of methods practitioners were keen to carry on with these ways of working.

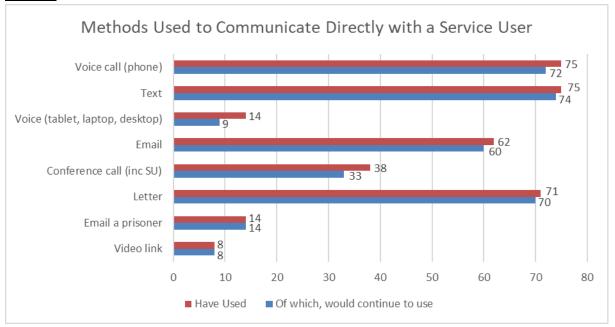


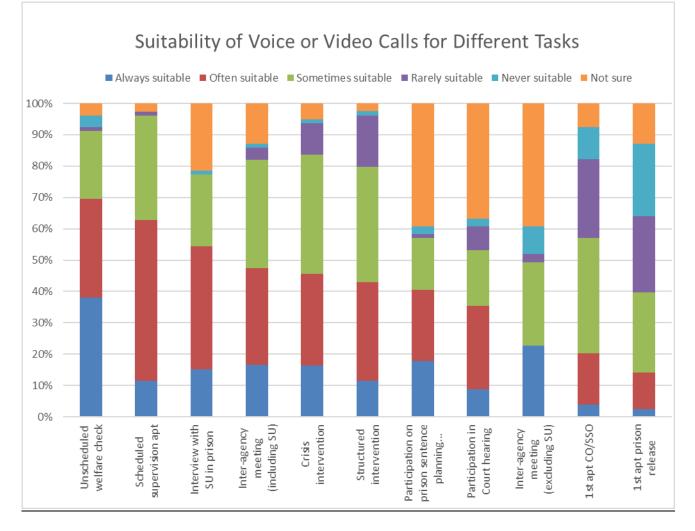
Table 2

Practitioners used telephone calls for a wide range of supervision tasks, including: first appointments with new service users, scheduled reporting and welfare checks, crisis intervention, structured interventions, and inter-agency liaison and meetings. Video-conferencing software (including Zoom and Teams) was used by some practitioners for meetings with other professionals.





Survey participants were asked to rate the suitability of voice and video calls for this range of tasks. Table 3 shows greatest support for the use of telephone calls for tasks such as routine reporting and making unscheduled welfare checks and least support for telephone first appointments, where practitioners and service users meet for the first time.



<u>Table 3</u>

The survey data is supported by the interview data. Claire spoke of the benefits of telephone contact for routine contact:

'demanding someone come to an appointment is a drain on their time, whereas if you say "oh, I'll phone you and see how you're doing" that can be a nice thing. It can feel like you're being more supportive'.

Gemma was one of the interviewees who highlighted the challenge of conducting initial meetings remotely:

'I'm not getting a good feel for them as I haven't been able to sit in a room and see them and I appreciate they probably feel the same about me.'





The survey asked practitioners to rate the suitability of voice and video calls for interagency meetings including and excluding the service users and a significant number of survey respondents were unsure about meetings that excluded the service user. Responses elsewhere in the survey and from the interview data (see Section 5.6) indicate a good level of support for virtual professionals' meetings; with the benefit of hindsight it might have been more helpful to ask about 'inter-agency meetings not involving a service user' rather than to use the phrasing 'excluding the service user'.

Practitioners supported the use of voice and video calls for interviewing people in prison, a task (as with inter-agency meetings) where technology is able to solve practical problems of time and travel. Fewer participants had experience of remote involvement in prison sentence planning meetings or court hearings, but the majority felt that communication technology was at least sometimes suitable for this work.

Asked about the suitability of voice and video calls for structured supervision and crisis intervention work, survey participants offered mixed responses. The survey data suggested that practitioners felt that suitability depended on the particular circumstances of each case, a point borne out by analysis of the interview data. The themes that underpin these responses (the recognition that not all cases are the same, the need to get the full picture, the nature of professional relationships, and the demands of work with involuntary clients) are discussed in the following sections of the report.

Study participants did not view telephone calls as suitable for all tasks, but (as Table 2 shows) they were keen to be able to continue to use this method of communication in the future. One survey respondent wrote:

'Remote contact is a very useful option with the right service user; hopefully one legacy of the pandemic will be an increased recognition of this and a corresponding extension of trust to individual officers to determine when and for whom this option is used.'

Alongside telephone calls, text messaging was an important and popular method of communication for practitioners. Practitioners were texting in two ways: from their work laptops and from their work mobile phones. Texts sent through the laptop software provided supervisors with evidence that the text had been received by the service user's device, but, if the service user replied, that text went to a general mailbox and was not always received by the supervisor. By contrast, texts sent from mobile phones were more direct but less formal.

Text messages were seen as a straightforward, immediate and very practical way of conveying information, particularly about appointments. Practitioners viewed them as working well for service users, who were comfortable with this method of communication and able to read and respond to a text without the interruption of a phone call (something that was valuable for service users in employment). Using text messaging made communication 'dynamic and personal' (Lena).





Paul explained how using text messages to make appointments and send reminders was an efficient and productive way of working, reducing the likelihood of missed sessions followed by warning letters:

'Because you can use text that way, you don't even really need to start making it a formal top down relationship.'

Sixty-two survey respondents had either sent or received email messages from service users (and all but two wanted to continue to use this communication method in the future). As with text messaging, email was seen as a useful way of exchanging practical information. If a practitioner needed to see evidence of something like a medical appointment or job interview, the service user could send this by email. For practitioners, sending emails was seen as more problematic than receiving them. Interviewees observed that they had either been instructed or advised not to send emails to service users, on the grounds of data security and because of the risk that the message might be read by someone other than the intended recipient. While acknowledging the significance of these concerns, some practitioners hoped for a more flexible use of email in the future. For example, Nicola described email as 'part and parcel of how we communicate online, everyone asks for an email address.' She explained that email or text communication was unsuitable in many circumstances when 'voice work' was necessary, but that email was a 'good way of communicating with people in general'.

Practitioners (both through the survey and in interview) were asked about the resources that, during the pandemic, they had been using in structured supervision sessions and as part of Rehabilitation Activity Requirement (RAR) days. In addition to the use of post and email to send out worksheets and workbooks, they provided examples including: mobile phone apps, interactive online resources, public information websites and helplines, and TV and video clips.

Claire explained how her practice had changed in the pandemic. Previously she might have responded to a point made in supervision by drawing a picture or writing something down but:

'I can't do that over the phone... so I might say "right, I'm sending you a link" and I would text or email a link and then we've both got the same thing in front of us.'

Practitioners said that they would welcome more guidance about video or webbased resources to use in supervision, acknowledging that good quality, engaging and appropriate materials are available but hard and time-consuming to find.

'there's so much out there and we are probably missing a few tricks by not using these resources... We might not even know about them ourselves' (Nicola)





Paul explained that he would like to use a wider range of online materials in his work and would value a 'resources toolkit' with guidelines about how best to use the new tools. Lena identified the potential for innovative practice, but only if there was sufficient time for preparation; she explained how it would be possible to create RAR sessions using clips from YouTube videos and talks, enabling discussion of difficult themes in a non-threatening way. Claire explained that she would 'love there to be a logical, organised library of all that stuff to draw on'.

Practitioners also faced technological hurdles. Not all service users have access to internet-enabled devices and, looking beyond the pandemic, the lack of Wi-Fi and work smartphones hampers the ability of supervisors to use online material in supervision appointments.

'I dread being seen as incompetent because of how clunky our computers are in our interview rooms. It takes ten minutes to set up your computer, and get into your [secure] environment... and then you find the resource, or you've got a website or a thing in mind you want to do with that person, then you find it's security locked and you can't access it..' (Lena)

In addition to gathering data about the use that practitioners were making of telephones and the internet, the study also identifies the factors that, looking to the future, could shape the practice approach to these methods.

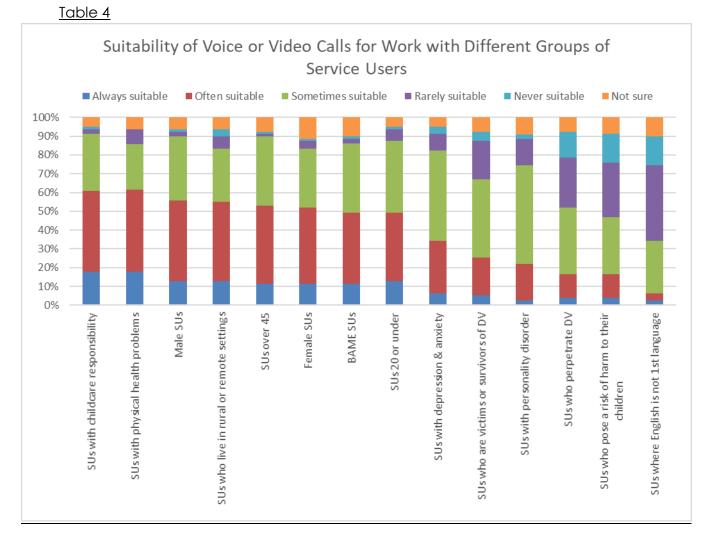
5.2 Cases are not the same

The importance of bringing an individualised approach to supervision emerges strongly from this study. Practitioners were keen to explain that no two cases are the same and that no single means of communication could be appropriate for all service users.

The survey and interviews gathered data about the extent to which practitioners viewed remote supervision as suitable for specific cohorts of service users. Table 4 shows the responses received in the survey.







One striking feature of Table 4 is the extent to which practitioners thought that telephone calls were often or sometimes suitable across a wide range of cases. Telephone calls were seen to be particularly useful when service users found it hard to travel to the office, for example because of childcare responsibilities, working hours, physical health problems or the journey length. Interview participants gave examples of service users in these circumstances, stressing the practical benefits of remote supervision in some cases.

'I have a guy with fibromyalgia.... he has times when it affects him a lot more and in times he uses a wheelchair and access into our building is not easy because to even get to the lift, I think you need to go up two stairs first, so for him if he is... having to use his wheelchair it's a lot easier for to me to be able to phone him rather than make him come to the office. The office is not great for people who use aids' (Gemma)

Some interviewees advocated a flexible response to service users who, for whatever reason, found it hard to come to the office; this would combine office appointments with home visits and telephone sessions making 'the effort on both sides' (Lena).





Demographic factors (including gender, ethnicity and age) did not have a big impact on practitioners' judgment of the suitability of telephone contact. Practitioners generally wanted to consider cases 'on an individual basis' (Linda) rather than set expectations for, say, all women or all young adults. For example, Nicola noted that both men and women could face childcare challenges.

Three sets of circumstances led practitioners to be more circumspect. First, where the telephone exacerbated communication problems: this was an issue for work with service users who did not speak English fluently and with people with hearing impairment (the survey did not specifically ask about hearing impairment, but this point was added by many survey respondents). Rebecca explained how the pandemic had reduced the quality of the service she could provide to service users who did not speak English:

'I had to call their friend to get through to them, and things like that. Things like that can't go on, because it's not fair on the service user.'

Second, survey respondents felt that telephone supervision was less suitable with service users with mental health problems. Interviewees shared this concern; over the telephone it was possible to miss evidence that someone was becoming unwell and difficult to respond appropriately. Linda explained the challenge of telephone contact with someone speaking of suicide:

'It's hard to change the tone of your voice enough to indicate that you're concerned or are caring.'

However, and reflecting the desire for an individual response, practitioners also had examples of supervising people with mental health problems where telephone supervision brought benefits. For some service users, speaking on the phone avoided the anxiety of travelling to the office and enabled them to talk about difficult issues from somewhere they felt safe. Emily had a good experience of communicating by text message, avoiding the need for speaking altogether:

'he sometimes doesn't feel able to speak over the phone so he'll text me... it's his last ditch sort of attempt to communicate with someone before he does anything drastic, that doesn't require him to have to speak.'

The survey did not specifically ask about the telephone supervision of service users with drug and alcohol problems, however a small number of respondents specifically identified this group as unlikely to be appropriate for this approach. Again, interviewees shared this concern, making similar points about service users with substance use problems and those sleeping rough or in short-term accommodation. Where supervisees were in unstable and rapidly changing circumstances, potentially under the influence, '*neglectful of staying in contact*' (Sara) and likely to lose, sell (or be robbed of) their mobile phone, supervisors saw benefit in the routine and structure of office reporting.





Third and finally, risk issues played an important role in practitioners' thinking, with almost half the survey respondents deeming telephone supervision to be never or rarely suitable for perpetrators of domestic violence or people who posed a risk of harm to their children. Interview participants talked about risk too. Telephone supervision was seen as more suitable for routine reporting in low risk cases, for 'those who are going well and don't actually need any extra support from probation, they are just doing it as part of their order' (Rebecca), and at the end of orders when:

'you can't close the order down yet as they are on a suspended sentence they still have time to run, but everything has been completed' (Deborah)

'why would you drag someone out just to tick a box?' (Lisa)

Practitioners were clear that assessing and managing risk was hard to do remotely. Delivering interventions intended to reduce the risk of harm was problematic too. Many of the examples offered by interviewees were about work with perpetrators and victims of domestic violence. Emily explained that it was hard to work with someone if you were not sure what was going on at their end of the phone. Lena suggested that telephone intervention with a perpetrator who lived with a partner had the potential to make things worse.

'[By discussing things] that might make him angry, and then he puts the phone down and it might have repercussions on the partner. If they come to the office, and they are on the bus, they might cool down by the time they get back home'

Work with sex offenders was also identified as requiring a face-to-face approach. None of the interviewees were currently supervising sex offenders, although some had previous experience of this work; they could not envisage discussing sexual behaviour over the telephone and without the ability to gauge the supervisee's response. Practitioners who were enthusiastic about increasing the use of online resources acknowledged that many sex offenders are not permitted to access the internet.

In order to assess difficult situations and monitor changes in unsettled circumstances, practitioners wanted to get the full picture, something that is often denied by remote supervision.

5.3 Getting the full picture

Not being able to see people is a strong disadvantage of telephone calls. Practitioners (in the survey and in interview) were clear about the difficulties of having to work without being able to see the other person. They explained that communication was about spoken words, but also about body language; managing without body language meant that communication was harder and important messages were often missed. When practitioners work face-to-face they pick up on visual clues and on discrepancies between what someone is saying and how they are looking.





'They are not in front of you so you can't gauge their body language... you can pick up a lot with their body language, in front of you, to gauge whether what they are saying is quite true or not - and on the phone that is quite difficult. It's easy for them to say on the phone, "oh yeah everything's good, everything's fine, nothing is happening" whereas face-to-face you might pick up some other things that you're not too sure if that's actually the case' (Nicola)

'conversation isn't just about what's being said, it's about how it's being said, your body language, are you being threatening, are you being open, you use gestures a lot to get your point across, so having a visual contact is preferable' (Paul)

Not being able to see people increased practitioners' worry about missing information that was necessary for risk assessment and risk management. It was not possible to see if someone's physical health or personal care had deteriorated. Speaking specifically of service users with substance use issues, Gemma said:

'You need to be able to see them often to verify what they are telling you, whether they're using or not - because over the telephone you can't see if there has been a dramatic weight loss or if their personal care standards have significantly dropped... being able to see them definitely helps with your assessment of how they are doing, how's their welfare, have they neglected themselves, have they relapsed, are they drinking more, are they under the influence? They could say "Oh I sound like this because I'm tired" but it could actually be because they have taken something.'

Over the telephone, it was not possible to be sure that someone was where they claimed to be, or to know whether other people (friends, family members or children) were listening into the call. It was harder for practitioners to take a curious and investigative approach if solely reliant on telephone contact.

Few study participants had experience of using video calls as part of supervision. Many took the view that video calls offered potential benefits over voice calls; it would be possible to see whether someone looked well, it would be easier to understand where they were and if they were alone. However, video calling was still seen as a poor substitute for face-to-face work, and not just because the quality of video calls can be poor.

'Seeing someone through a screen rather than seeing them in person, there's still kind of a wall up against you because they could be putting on a whole different persona just because they know you could see them at that time..' (Paul)

Sight was not the only sense identified as important for probation work. Practitioners explained that using the telephone required very careful listening, which was demanding and tiring. Poor connections and background noise meant that people





could be hard to hear. Practitioners also valued their sense of smell as a means of gathering important information about the well-being of service users and as a warning sign of increased problems with alcohol and drug use.

'You might be able to tell over the phone if they are under the influence, slurring their words and things like that, but some people are really good at hiding it. If they actually come into the office I can see, I can smell, so things like that really help.' (Rebecca)

'on the telephone they can present as sober, you can't smell their breath, you can't see their eyes' (Andrew)

Sara talked about having a 'probation radar' which enabled her to identify when someone was contemplating change or falling into trouble. Communicating remotely deprived her of the ability to read body language and to 'sniff out' shifts in motivation. Her probation radar did not work as well over the phone.

5.4 The professional relationship

Remote supervision posed a challenge to the process of building and sustaining a professional relationship. Few of the study participants would choose to start a period of supervision with telephone contact. Face-to-face sessions were the best way of getting to know someone, enabling both practitioners and service users to be able to put a face to a name.

'What I found difficult is the new cases that you got, you've only ever spoken to them over the phone, you can't put a face to the name, you can't picture that person. I just think for getting to know someone, and building rapport those face to face meetings are quite crucial at the beginning' (Deborah)

One survey respondent explained the value of meeting service users like this:

'Professionally I feel that clients deserve face to face contact. It humanises our service to them and affords officers an insight into clients' lives and struggle by way of reading body language.'

Practitioners spoke of the strategies that they used to build rapport and develop a working relationship over the telephone. They stressed that they used familiar processes: listening to people, being friendly and approachable, and being clear about the purposes, expectations and options of supervision. Remote working brought emotional labour, an intrinsic aspect of probation work, into sharper focus. Experienced practitioners (including Nicola and Claire) reflected on the way that they had adapted their communication approach to suit remote supervision.

'Obviously it's not the same as meeting them day one... but I think I have been able to build more or less the same rapport because... it's all about how you talk to somebody' (Nicola)





'I've only just realised how much of it [the job] I do by looking pleasant, and you know I'm quite smiley, I'm quite friendly - and if people don't hear that on the phone, I think possibly I sound a bit sharper on the phone, as it were, I talk quite fast... which probably makes a difference to people... I have had to work on talking more consciously slowly. I think possibly the way I come across if people haven't spoken to me before is just less approachable, maybe, on the phone, because I think I'm doing a lot of work with my body language' (Claire)

Practitioners were considerably more positive about the use of the telephone to communicate with service users with whom they had an established professional relationship. Few practitioners thought that the telephone had no place in probation supervision. Many had examples of telephone calls in which service users were more relaxed and open. Linda reflected on the possibility that both supervisor and supervisee could benefit from being away from the office environment.

'I don't know whether that's because they don't need to cover up any body language on the phone, or maintain eye-contact. I don't know if they open up a bit more. I seem to have found out loads more about my service users than when they were in the office.'

One survey respondent wrote:

'I have found telephone discussions to be more open and engaging with some service users than face to face - one has said that he so hates just coming into the office (everything it represents for him), that he is in a state of agitation before seeing me, and so the first period of supervision is spent supporting him to relax (and this service user has been on licence for some years now); we do not have to go through this on the phone and the difference in engagement is remarkable.'

The use of telephone supervision also shed new light on the issue of boundaries in professional relationships. Practitioners who had not previously had a work mobile phone found themselves accessible to service users in unfamiliar ways; they had to make decisions about how many times to ring non-communicative service users and also how to respond to service users who phoned often and outside of agreed appointment times. Some practitioners found it easier than others to turn off the work mobile phone outside of office hours.

Gemma described herself as strict with boundaries:

'because I haven't given out my number to service users I haven't had these issues, but others who have given out their work number have had instances where SUs are constantly calling them or ringing them at inappropriate times.'

Lena observed that negotiating boundaries was part of her role; the use of email and mobile phones led to new ways in which people could over-step supervision





boundaries, but, in some cases, she did judge it appropriate to share her email address with a service user.

Practitioners varied in the extent to which they welcomed the changes in interpersonal dynamics that came with an increased use of telephone supervision. One of the most positive comments came from this survey respondent:

'Service users have the benefit of feeling like they are in a two-way relationship with their Programme Facilitators because they can easily contact them (with a message) on the phone, rather than simply being required to turn up to meetings with a group. This must encourage the impression that they are equal and responsible agents in their own rehabilitation, so improving their engagement and receptiveness'

For the majority of the research participants, their experience of telephone supervision overlapped with a period of working from home. Wider issues arising from home working are outside the scope of this study but, for practitioners, working at home added to the complexity of setting appropriate boundaries for professional relationships; it was not always possible to separate work time from home time and practitioners felt that, on occasions, telephone calls (particularly about difficult or intimate topics) risked being overheard by household members in their home as well as that of the service user. The use of video calls, if the supervisor was working from home, was identified as particularly inappropriate.

'I would really have to think about that because I am in my home, it's my background, it's too much of an invasion for me... too much information' (Linda)

5.5 Working with involuntary clients

Probation practitioners work with individuals who are subject to statutory supervision; service users are involuntary clients. This context brings a set of obligations and requirements with implications for the use of telephone and internet-based approaches to practice.

A number of practitioners identified that telephone supervision usually involved the supervisor making the call, whereas face-to-face supervision required the service user to attend an office appointment. This shift of responsibility was seen as increasing compliance; more appointments were kept and fewer warnings issued. Service users were more likely to answer the telephone than to report to the office.

Nicola's experience was that there was less need for enforcement action as:

'they just pick up their phone....At the end of the day, they've answered you and you've contacted them.'





'Compliance has actually been quite a lot better during the pandemic as people don't tend to avoid a phone call in the same way they avoid coming to the office' (Emily)

Other interviewees painted a more complex picture of the impact of telephone reporting on the formal nature of the supervision process. Sara voiced the concern that the informal nature of telephone reporting was 'over-familiar' and risked service users becoming 'complacent'.

Andrew made a similar point: he judged that coming to the office signalled supervisee compliance in a way that answering the phone did not. He was uncertain about the authenticity of telephone supervision.

'I hate it... I don't like it at all...you feel like you could be being lied to... without face to face contact, there's no way to know if what you are being told is the truth. You kind of get the feeling when you are talking to some people they are just spinning you a bit of a yarn really... almost laughing at you.'

One consequence of statutory supervision is the need for evidence of the pattern of appointments offered, instructions given, appointments attended, appointments missed and explanations received. Practitioners in this study valued the way that, when they used the computer system to send a text message, they received confirmation that the message had been delivered to the service user's device. This confirmation could then be used as evidence in enforcement proceedings. Records of text messages sent replaced the paper appointment slips provided in face-to-face sessions.

Rebecca explained that, as she needed to be able to give an accurate account of contact and attempted contact from service users, she found it hard to turn off her work mobile outside of office hours. If the phone was turned off she did not have the detail of missed calls. If the phone was turned on she was aware of it ringing, sometimes repeatedly and during the night, leaving her anxious that she might be ignoring an emergency.

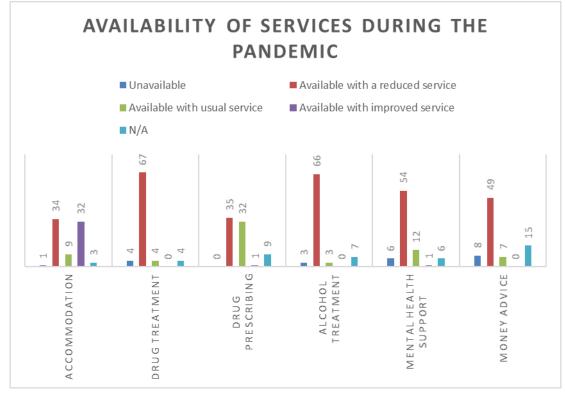
Alongside the requirement to maintain contact with service users, practitioners were also aiming to deliver the interventions and programmes identified in supervision plans. As Table 3 shows, fewer than half of the survey respondents viewed telephone calls as always or often suitable for the task of structured supervision.

One problem faced by supervisors was that implementing supervision plans during the pandemic was made harder because other agencies were having to deliver services in a reduced manner. Table 5 shows that access to drug, alcohol, mental health and money advice provision was constrained by the pandemic. The picture for accommodation services was more mixed, reflecting the considerable effort to reduce homelessness and rough sleeping during the crisis.









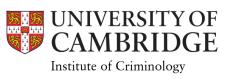
A further problem was the extent to which the service user was able or willing to concentrate on the session material. It was hard to recreate the focus that existed in face-to-face sessions and some service users chose to take the telephone call from a public place. Practitioners had examples of cases where service users gave only very short responses to questions, said that they were unable to hear, and simply ended the call.

'Early on [at the start of her career] I discovered that having a smiley face and just being able to look non-threatening and engaged in person I think probably goes a long way to counteract the fact that most of the time you are asking quite pertinent questions to people who don't want to tell you. And so when you are asking quite bold questions over the phone my experience has been people are more able to say something like, "well why do I have to tell you that?" "Sorry, what is this all about?" or even on various occasions to cut me off and pretend that they lost signal.' (Claire)

That said, practitioners also worked with service users who were less distracted and more able to participate than they had previously been in the probation office. For example, someone in full-time work as a van driver was now able to schedule lunchtime telephone appointments with his supervisor and speak from the privacy of his cab. Prior to the pandemic he had found it hard to attend appointments at the end of his working day, arriving in the office tired and stressed from the rush-hour traffic.

Practitioners found it challenging to lead sessions without the visual aids and workbooks that they used in the office. However people had found a variety of ways





of broadening the range of programme materials that they used in remote supervision sessions. Linda explained that she was sending information packs in the post and then, in some cases, having productive discussions over the telephone. She gave the example of victim awareness work with a service user:

'you could hear he was thinking over the phone... that was quite constructive'.

5.6 Inter-agency work

A further element of statutory supervision is inter-agency work with partners including prisons, police and children's services. Before the pandemic, practitioners had made extensive use of telephone and email to communicate with other professionals and, in this sense, practice had not changed in recent months.

The pandemic had, though, increased the use of video-conferencing and multiperson telephone calling for inter-agency work, technologies that were seen to have merit.

'It's a time-saver as you are not having to trek across town to a social services meeting.' (Linda)

'If it's just a professionals' meeting, it's quite an efficient use of time to use a video link.' (Claire)

Practitioners did speculate that remote meetings might be more difficult for new members of staff who had yet to build relationships with partner agencies.

Lena explained how an inter-agency meeting could have benefit beyond its immediate agenda, something that could be lost with video-conferencing. She explained how in face-to-face meetings:

'There is always the offer of a coffee, or the offer of a chat afterwards, there might be another case you might mention because you're already coworking with them, you get to know the environment they work from, and what environment the service user would go into working with that person. You get a lot more insight. And I think it's important to get that before you shift that online.'

Paul drew attention to the way that video-conferencing could affect inter-agency dynamics. He had experienced more opportunity to intervene and challenge other professionals:

'Practitioners can be a little bit riskier, or forthright, in giving their opinion than in an environment where everyone is looking at their full body language... You don't get ten pairs of eyes looking at you going, "how can you suggest that? what do you mean? there isn't evidence for that decision!"'





Practitioners varied in their view about whether remote inter-agency meetings were good practice when they also involved and included service users. Deborah was positive about her experience of using conference phone calls for child protection work. She missed the chance to chat with the service user before the meeting, but reflected that:

'the service user found it a little bit easier rather than walking into a meeting with everybody sat round the big table and it feeling really quite formal and scary. I think he found it a little bit easier because it was over the phone.'

By contrast, Claire talked about the difficulty of supporting someone in a difficult virtual meeting. She explained that in a physical meeting:

'You can make eye contact with somebody, or you could say "do you need a break or whatever". You feel you have a direct line to that person - even though there are seven other people in the room you can still communicate with them. But if they're on a call and they are speaking into the abyss, they can't see anyone who's listening to them, they can't see encouraging facial expressions – and that can be quite traumatic, I think, for everybody. And I can't imagine how awful it is for them, the only one on the phone, and everyone else being able to see each other [on the video link].'

Finally, and a recurring theme both in this study and in the work of HMIP (2020), the options for remote work were shaped and constrained by the technology available to both service users and practitioners, and the extent to which that is compatible with that used by probation's partner agencies.





6.0 Discussion and Talking Points

6.1 Supervision cannot rely on telephone contact alone

It goes without saying that probation supervision cannot rely entirely on remote supervision. This study illustrates the range of difficulties faced by practitioners required to work without face-to-face contact. Deprived of the opportunity to see, hear (and sometimes smell) properly, supervisors were not getting the full picture of service users; they knew that, reciprocally, service users were not getting a full picture of them. This distance hampered the process of relationship building.

Telephone supervision constrained practitioners' ability to gather the information needed to assess risk accurately and was not always sufficiently formal given the statutory nature of probation supervision. Face-to-face meetings do not guarantee open and purposeful supervision, but working over the telephone brought additional obstacles.

Telephone supervision was simply inaccessible for a small minority of service users. For some this was a consequence of disability or communication problems. Others did not own telephones or lived in circumstances where phones were lost, stolen or sold. More generally (and congruent with findings from HMIP (2020)), remote supervision was a difficult experience for vulnerable service users and those with complex needs.

6.2 There is a place for the use of telephone calls in probation work

Telephones are not new technology and, for many service users, voice calls and text messages are routine forms of communication. The study shows that telephone supervision can work well: in cases where staff and service user knew each other well, where the service user's circumstances were stable and where risk was assessed as low. Telephone supervision enabled service users to meet their work and family commitments and avoid the expense and travelling associated with office visits. Staff also appreciated the flexibility that telephone supervision offered them.

Beyond these practical points, the study also provides examples of good quality engagement and planned individual interventions conducted over the phone. In some cases and for some individuals, telephone supervision enabled conversations and reflections that were more comfortable, genuine and purposeful than those that took place in an office interview room. There may be scope for probation to learn from established and skilful practice that uses telephone helplines to support people in difficulty (for example, from the work of Samaritans).

6.3 The importance of professional discretion

Looking to the future, the study supports the continued use of the telephone and internet resources by probation supervisors. Staff and service users, on a case by





case basis, are best placed to decide together when remote means of communication are appropriate and effective.

Practitioners in this study would welcome this increase in their professional discretion, enabling them to make focussed choices about when to supervise remotely. Guidance to staff needs developing to take account of these changes in working practices and professional boundaries: for example, around use of work equipment, sharing of email addresses, security of data and recording of decisions about modes of contact. Increasing the scope for the use of professional discretion in this way also brings new support and training needs for staff.

6.4 Thinking about video calls

The study supports the continued use of video-conferencing for inter-agency meetings. It also suggests that there may be a place for video calling (e.g. WhatsApp video call, Facetime, Zoom) in direct work with service users. The participants in this study had no experience of video calling in supervision, but some viewed it as an enhanced form of voice calling offering the prospect of seeing (as well as hearing) service users and their immediate surroundings. While many service users would not have the technology needed for video calling, for others this is an increasingly everyday means of communication with friends, colleagues and professionals.

A trial of video calling would enable interested practitioners to explore the benefits and limitations of this technology, assess its usefulness and contribute to developing the necessary protocols and practice guidance.

The current technology available to staff does not encourage the increased use of video-conferencing. Work mobile phones often are not internet-enabled and without cameras; video-conferencing software runs in a very restricted way on work computers. More innovative use of communication technology would require upgraded equipment.

6.5 Developing the use of internet resources for supervision

The study also points to the possibility of broadening the range of materials used in structured supervision by drawing on online resources. Once again, staff ability to use these resources is hampered by issues like the lack of smartphones for practitioners and Wi-Fi in offices, and the security settings on work devices. There are also access issues for service users and the risk of digital exclusion (where some opportunities are denied to people without the skills and resources to work online).

Staff were asking for more information about useful and appropriate online resources that had been assessed for quality and effectiveness. Some expressed enthusiasm for a library (containing things like video clips and online quizzes) that could be used as part of individual supervision. However, they acknowledged that developing, maintaining and becoming familiar with programme material requires a considerable investment of time across the organisation.





6.6 Flexible working for practitioners becomes easier with greater use of remote supervision

'Working at home' and 'remote supervision' are two different things which, in the context of the pandemic, overlap. This study is about remote supervision (with the two people not in the same place) which, in the future, could happen with the supervisor in the office. Some of the objections to telephone supervision voiced in this study are really objections to working at home. For example, the sense of intrusion into the practitioner's home does not apply when the telephone call is made from the office. Working from the office may also reduce feelings of isolation following a difficult supervisory phone call.

It is worth noting that, in common with findings from Ellis Devitt (2020b) and HMIP (2020), some study participants were strong supporters of the flexibility to work at home more of the time. They hoped that, after the pandemic, they would be able to maintain the benefits of travelling less, staying late in the office less frequently, and managing their family responsibilities more easily.

6.7 Next Steps

Every research study raises fresh questions and identifies areas for further work.

This study identifies themes for possible policy and practice development (in areas like supporting professional discretion, trialling newer communication technologies, and developing contemporary resources for structured supervision). Future evaluations of remote supervision, building on this research, would benefit from hearing the experiences and perspectives of service users as well as staff.

Deborah spoke for many of the research participants, explaining how her learning over past months encouraged her to continue with some elements of remote supervision alongside more traditional practice:

'I don't think we ever would have gone to this phone contact if it hadn't been these exceptional circumstances. It's been forced to come in. But there certainly have been some benefits... it's the mixture that's needed. That balance between the two.'





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Appendix 1: Survey Questions

- 1. Which of the following have you used to communicate directly with a service
 - user? (Tick all that apply)
 - Voice call on a telephone
 - Video call on a telephone
 - Text message (either sent or received by you; e.g. SMS, Whatsapp, Messenger)
 - Voice call on a tablet, laptop or desktop computer
 - Video call on a tablet, laptop or desktop computer
 - Email message (either sent or received by you)
 - Conference call (including the service user and other people)
 - o Letter
 - Email a prisoner (for custody cases)
 - Video link (for custody cases)
 - Other (please specify)
 - o None
- 2. Will you continue to use any of the following to communicate directly with a service user after the pandemic? (Yes / No / Have not used)
 - Voice call on a telephone
 - Video call on a telephone
 - Text message (either sent or received by you; e.g. SMS, Whatsapp, Messenger)
 - Voice call on a tablet, laptop or desktop computer
 - Video call on a tablet, laptop or desktop computer
 - Email message (either sent or received by you)
 - Conference call (including the service user and other people)
 - o Letter
 - Email a prisoner (for custody cases)
 - Video link (for custody cases)
 - Other (please specify)

3. Which of the following have you used with service users as part of supervision? (Tick all that apply)

For example: to provide advice, guidance, support or intervention.

- Mobile phone apps
- o Interactive online resources (e.g. quizzes, online training)
- o Videos, TV programmes
- Other (please specify)
- o None
- 4. Are you using any video or web-based resources that you would recommend to colleagues? (Yes (Please provide details) / No)

These questions are about voice and video calls (by telephone or other mobile device) with the people you supervise and with workers from other agencies.

- 5. Which of the following tasks have you undertaken by voice or video calls? (Tick all that apply)
 - First appointment on a new Community Order or Suspended Sentence Order
 - First appointment on day of release from prison
 - Scheduled supervision appointment





- Unscheduled welfare check
- Crisis intervention
- Structured intervention (including RAR day activity, one-to-one programme work)
- o Interview with service user in prison
- Participation on prison sentence planning board or parole hearing
- Participation in Court hearing
- Inter-agency meeting (including service user)
- o Inter-agency meeting (excluding service user)
- o None
- Other (please specify)

6. How suitable are voice or video calls for the following tasks?

Please rate each task whether or not you have been using voice or video calls for this task. (Never suitable / Rarely suitable / Sometimes suitable / Often suitable / Always suitable / Not sure)

- First appointment on a new Community Order or Suspended Sentence Order
- First appointment on day of release from prison
- Scheduled supervision appointment
- Unscheduled welfare check
- Crisis intervention
- Structured intervention (including RAR day activity, one-to-one programme work)
- o Interview with service user in prison
- Participation on prison sentence planning board or parole hearing
- Participation in Court hearing
- Inter-agency meeting (including service user)
- o Inter-agency meeting (excluding service user)
- Other (as above)
- 6a. Are there any differences in suitability between video and voice call for the tasks above? [open text]
 - 7. How suitable are voice or video calls for work with the following groups of service users? Please rate each task whether or not you have been using voice or video calls with each group. (Never suitable / Rarely suitable / Sometimes suitable / Often suitable / Always suitable / Not sure)
 - Female service users
 - Male service users
 - \circ Service users over the age of 45
 - Service users aged 20 or younger
 - o Black and minority ethnic service users
 - o Service users who do not speak English as a first language
 - Service users with depression and anxiety
 - Service users with personality disorder
 - o Service users with physical health problems
 - o Service users with childcare responsibility
 - o Service users who pose a risk of harm to their children
 - o Service users who perpetrate domestic violence
 - Service users who are victims or survivors of domestic violence





- o Service users who live in rural or remote settings
- 7a. Are there any other groups of service users who would need additional consideration when using voice or video calls? (Yes (please specify) / No)
- 7b. Are there any differences in suitability between video and voice call for the groups above? [open text]

These questions are designed to give you space to say more about your opinion of the strengths and weaknesses of these ways of working.

- 8. A good thing about using the phone or other remote options for supervision is ...? [open text]
- 9. The biggest shortcoming with using the phone or other remote options for supervision is ...? [open text]
- 10. Is there anything else that you want to say about using the phone or other remote options for supervision? (Yes (please describe) / No)
- 11. Have you had any face-to-face contact with service users during the
- **11a. Where did this take place?** (Tick all that apply)
 - On their doorstep
 - Outside in a public place
 - Inside a CRC office
 - o Inside a Community Hub
 - Other (please specify)
 - 12. To what extent have these services been available to your supervisees during the pandemic? (Unavailable / Available with a reduced service / Available with usual service / Available with improved service / N/A)
 - Accommodation
 - o Drug Treatment
 - Drug prescribing
 - Alcohol treatment
 - o Mental health support
 - Money advice
 - Other service (please state)
- 13. Is there anything else you would like to tell us regarding the topics in this survey? [open text]





Appendix 2: Interview Schedule

1.0 Introduction

- Explain more about the project/go through Participant Information sheet
- Explain how the project links with survey/other sources of data
- Explain project outcomes (reports/dissemination etc)
- Allow participant to ask any questions
- Cover ethical issues confidentiality/anonymity; disclosure protocol
- Sign off informed consent form
- Give estimation of time of interview approximately 45 minutes to an hour

2.0 Talking to service users on the phone

- What are the advantages of talking to service users on the phone (prompt for examples)?
- What are the problems with talking to service users on the phone (prompt for examples)?
- Are there any tasks which can never be done by telephone? (If yes, what and why?)
- Looking ahead to work after the pandemic, what use should be made of phone calls in probation supervision. Why do you think this?

3.0 Using video calls with service users

- Have you used video calls with service users?
- If yes, ask similar questions to Section 2 above
- If no, would you like the option to use video calls (e.g. Zoom, Whatsapp video etc) with service users? Why/why not?

4.0 Using text messages and email with service users

- What are the advantages of using text and emails with service users (prompt for examples)?
- What are the problems with using text and emails (prompt for examples)?
- Are there any tasks which can never be undertaken in this way? (If yes, what and why?)
- Looking ahead to work after the pandemic, what use should be made of texts and emails in probation supervision. Why do you think this?

5.0 Using internet/online resources in supervision

- Do you use internet/online resources in supervision (i.e. things like mobile phone apps, interactive online resources like quizzes and online training, videos, worksheets)?
- If no, why is this?
- If yes, what has worked well? What has worked less well?
- Would you like to make greater use of resources like this in the future? What needs to happen to make this possible?

6.0 Meeting the specific and individual needs of service users

- Everyone has their particular circumstances and needs. Are there some service users, or groups of service users, who
 - Are not suitable for phone calls or other forms of remote supervision? (Why is that? Give examples?)





• Are particularly suitable for phone calls or other remote forms of supervision? (Why is that? Give examples?)

7.0 Building working relationships, trust and rapport with service users

- Has remote supervision changed the way that you deal with relationship building, or maintaining trust and rapport with service users?
- If yes, give examples (probe sensitive or difficult topic/subject areas? Particular phases of the supervision process?)
- What are the lessons for practice in the future?

8.0 Inter-agency working

- Working with other agencies can be an important element within any supervision of service users. Have you attempted any remote inter-agency working over the last few months?
- If yes. Can you tell me how that went? (probe positives? negatives?)
- If no. Why is that?
- What are the lessons for practice in the future?

9.0 Closing comments

- If you could give probation managers and policy makers one or two pieces of advice about using phones and the internet to enhance supervision, what would you say?
- Anything else that you would like to say about the strengths and weaknesses of these ways of working?





Appendix 3: Glossary

BAME	Black, Asian and minority ethnic	
CEP	Confederation of European Probation	
Cll	Centre for Justice Innovation	
СО	Community Order	
CRC	Community Rehabilitation Company	
DV	Domestic violence	
HMIP	Her Majesty's Inspectorate of Probation	
HMPPS	Her Majesty's Prison and Probation Service	
PBNI	Probation Board for Northern Ireland	
РО	Probation Officer	
PSO	Probation Service Officer	
QDO	Quality Development Officer	
RAR	Rehabilitation Activity Requirement	
RPU	Research and Policy Unit	
SSO	Suspended Sentence Order	
SU	Service User	



