



HM Inspectorate
of Probation

Safeguarding adults at risk of harm supervised by the probation service in England: a thematic inspection

Tuesday 25 November



About us

Our vision

High-quality probation and youth justice services that change people's lives for the better.

Our purpose

HM Inspectorate of Probation is the independent inspector of probation and youth justice services in England and Wales. We set the standards that shine a light on the quality and impact of these services. Our inspections, reviews, research and effective practice products provide authoritative and evidence-based judgements and guidance. We use our voice to drive system change, with a focus on inclusion and diversity. Our scrutiny leads to improved outcomes for individuals and communities.



Why this thematic inspection?

- The **increased level of risk** to people on probation.
- The **Care Act 2014** - the probation service is named as a relevant partner and therefore has a statutory responsibility to ensure adults under its supervision at risk of abuse or neglect receive the necessary safeguarding interventions.
- The **chance to review the effectiveness** of probation policies and practice as well as the outcomes for people on probation identified as at risk of harm.
- The **effectiveness of multi-agency arrangements** in this area of work.

Methodology



- Six PDUs across six regions May - July 2025.
- 62 focus groups with staff and managers.
- National inspection week July 2025.
- Ninety-nine cases were inspected remotely in the first two fieldwork weeks of the inspection - all cases marked 'vulnerable' on nDelius.
- User Voice - 242 survey responses and 26 interviews.
- Evidence in advance.



Contextual facts

- **1,404** - total number of death among people on probation 2023/2024.
- **392** - number of deaths recorded as self-inflicted for people on probation 2023/2024.
- **306** - number of deaths recorded as drug related 2023/2024.
- **1,267** - total number of suicides recorded for people on probation 2011-2021.
- **69 per cent** - percentage of people on probation in one PDU having at least one emergency hospital attendance between April 2022 and March 2025 (34 per cent attended five or more times).



Policy, strategy and national leadership

- Safeguarding Adults Boards - National Partnership framework and updated safeguarding adults at risk in the community - evident in the PDUs but minimal operation impact in relation to people on probation.
- Health and social care is a growing priority for the probation service underpinned by a national partnership agreement 2022-2025 - evidence of some positive initiatives.
- National suicide prevention plan - forums evident in the region but not fully integrated strategically or operationally.
- Death under supervision process, introduced in 2022, is an important framework but it must be focused on systemic learning and questioning, not individual practice.



Partnership working and local leadership

- Probation service representation on SABs was broadly in line with policy expectations but its impact on service delivery for people on probation was limited.
- A lack of consistent data on adult social care referrals, and the absence of escalation pathways for rejected referrals, indicated that the probation service is not yet fully embedded in safeguarding systems.
- Inconsistent engagement from mental health services. While some PDUs had developed escalation pathways or direct referral routes, others faced significant barriers. This highlights the limitations on the probation service's ability to ensure appropriate support for people on probation.
- MARMMs and complex lives panels offer potential ways of coordinating support for individuals who fall outside statutory safeguarding thresholds.
- The use of MAPPA to secure agency involvement suggests a need to strengthen alternative multi-agency mechanisms.
- EPOP teams are emerging as a valuable asset in safeguarding work.

Safeguarding adults supervised by the probation service

- **Safeguarding registrations** - inconsistent, inaccessible and contradictory.
- **Assessment of vulnerability** - how useful is the term? Disproportionately assessed men and women - stereotypical assumptions.
- **Assessment in silo** - public protection and safeguarding the person on probation.
- **Adult social care referrals** - inconsistent threshold – “deserving and undeserving thresholding” decisions.
- **ASC** - absence of escalation policies either regionally or nationally.
- **Service delivery /engagement strategies** - no evidence of a trauma informed approach for men.



Safeguarding adults supervised by the probation service

- **Assessment** - in most cases included a focus on safeguarding issues - false distinction between public protection and safeguarding adults in most cases.
- **Planning** – safeguarding not overtly evident in planning but often this is what cases were focused on - crisis management.
- **Delivery** - good in most cases - often in crisis with PPs holding cases in isolation, inconsistent mental health engagement.
- **Excellent wrap around services** for women and developing approach for 18–25-year-old cohort.
- **Health and justice coordinators** - positive impact and route to engagement - pre-release planning hepatitis C and health testing on site. GP registration pilot.
- **Probation reset** – limited evidence of planning.
- **Engaging people on probation** – some positive engagement initiatives.



Recommendations

1. Develop a strategy to ensure the death under supervision process focuses on systemic learning and improvement. This should include sharing the analysis of death under supervision findings with the key regional strategic boards.
2. Ensure that referrals to adult social care are monitored and that escalation processes are in place at both regional and national level.
3. Ensure that trauma-informed practice is applied to men. This should include a review of assessment and engagement practices and take into consideration learning from other public sector organisations.
4. Ensure that the risks to people on probation are integrated into the assessment and planning framework for people on probation.



Recommendations

4. Review the use of the term 'vulnerability', and how it is assessed, in relation to people on probation.
5. Ensure that the assessment of vulnerability and the risks to men on probation are not influenced by assumptions about gender.
6. Review the number and use of risk registrations on nDelius to ensure they are accessible and assist probation practitioners in their supervision of people on probation.
7. Ensure suicide prevention is central to probation delivery and that training is mandatory.

The Voice of 'Adults at Risk of Harm' on Probation.

Samira Obed
Paul Duckworth

25th November 2025



HM Inspectorate
of Probation

USER VOICE

Who we are

At User Voice, our purpose is to change minds and transform lives by bringing together people impacted by the justice system with those who deliver its services to create much needed transformative change.

We believe justice should heal as much as it punishes, creating safer communities for all.

80% of our staff have convictions, meaning we've been there – in court, in prison, or on probation – we own our own pasts, so we understand the challenges first hand and use our own lived expertise to inform everything we do.

METHODOLOGY

User Voice conducted surveys and in-depth interviews with individuals marked as 'risk of harm' on probation.



268

PEOPLE HAD
THEIR SAY



26

INTERVIEWS



242

SURVEY
RESPONSES

OBJECTIVES

The overall objective of the consultation was to better understand the experience of adults at risk of harm on probation and whether their needs are met, especially in relation to safeguarding. Furthermore, our objectives were:

- To understand what support adults at risk of harm, have or haven't had on probation.
- To better gauge their understanding of their time on probation.
- To better understand the quality of their relationship with their probation practitioner.
- To understand any specific positive or challenging aspects of their probation experience.

OFFENCE AND VULNERABILITY

- Overall, **65%** of participants told us they were happy with the support they have received from probation.
- Although all participants were classed as 'vulnerable adults at risk of harm' by probation, only **77%** saw themselves as vulnerable, often because they viewed this as a past issue.
- **Alarmingly, 90% of participants reported being neurodivergent.**
- **65%** of participants reported that their vulnerability was connected to their offence, citing factors such as domestic abuse, substance misuse, mental health challenges, exploitation, and PTSD-related reactions (e.g., when being unexpectedly grabbed from behind).
- Some people said prison/probation experience itself had made them feel vulnerable.



PEER-LED SOLUTION:

Practitioners should ensure communication is clear and consistent, particularly for those with neurodiverse conditions, to reduce anxiety etc. For example, provide appointment reminders when requested and avoid cancelling or rescheduling appointments.

"Send weekly or fortnightly text message reminders of appointment days and times. Take into account peoples health, memory issues and help people as a service, link with others and keep us updated. More structure of focus to the appointments as they offer nothing."

RELEASE FROM PRISON, AND PROBATION INDUCTION

- Half of interviewed people said a practitioner met them before release and created a plan considering their vulnerabilities; the rest reported no contact or plan and were released without knowing what to do or where to go.
- **57%** of people said probation took time to understand their vulnerabilities in induction.
- In good inductions, practitioners took time to understand people and supported their mental health and neurodivergent needs.
- Those who were not happy with their induction said the focus was mainly on their offence and that it felt very 'tick-boxy'.



PEER-LED SOLUTION:

No person on probation who is classed as a vulnerable adult at risk of harm should end up homeless after coming out of prison.

"Well, pull their finger out and start housing people. People coming out of prison who are classed as vulnerable, why are they just let out to walk the streets? They don't take any responsibility for that."

APPOINTMENTS AND SERVICES

- When asked what is the biggest issue they have faced while on probation, difficulties to travel to appointments due to mental health, physical challenges or financial reasons were the most common responses.
- Also, **19%** of the participants said they do not feel safe when going to probation offices.
- **59%** agreed probation have helped them to access all the services they need, and **half** had received additional support for their vulnerabilities.
- People said that mental health and housing services were hardest to access.



PEER-LED SOLUTION:

When possible, offer more remote appointments and check-ins; and support people who are struggling financially with their travel costs.

"It's understanding that people's health has an impact if you can get out and about, when it's bad you can't always get to an office and face seeing someone. This needs to be considered."

RELATIONSHIP WITH PRACTITIONER

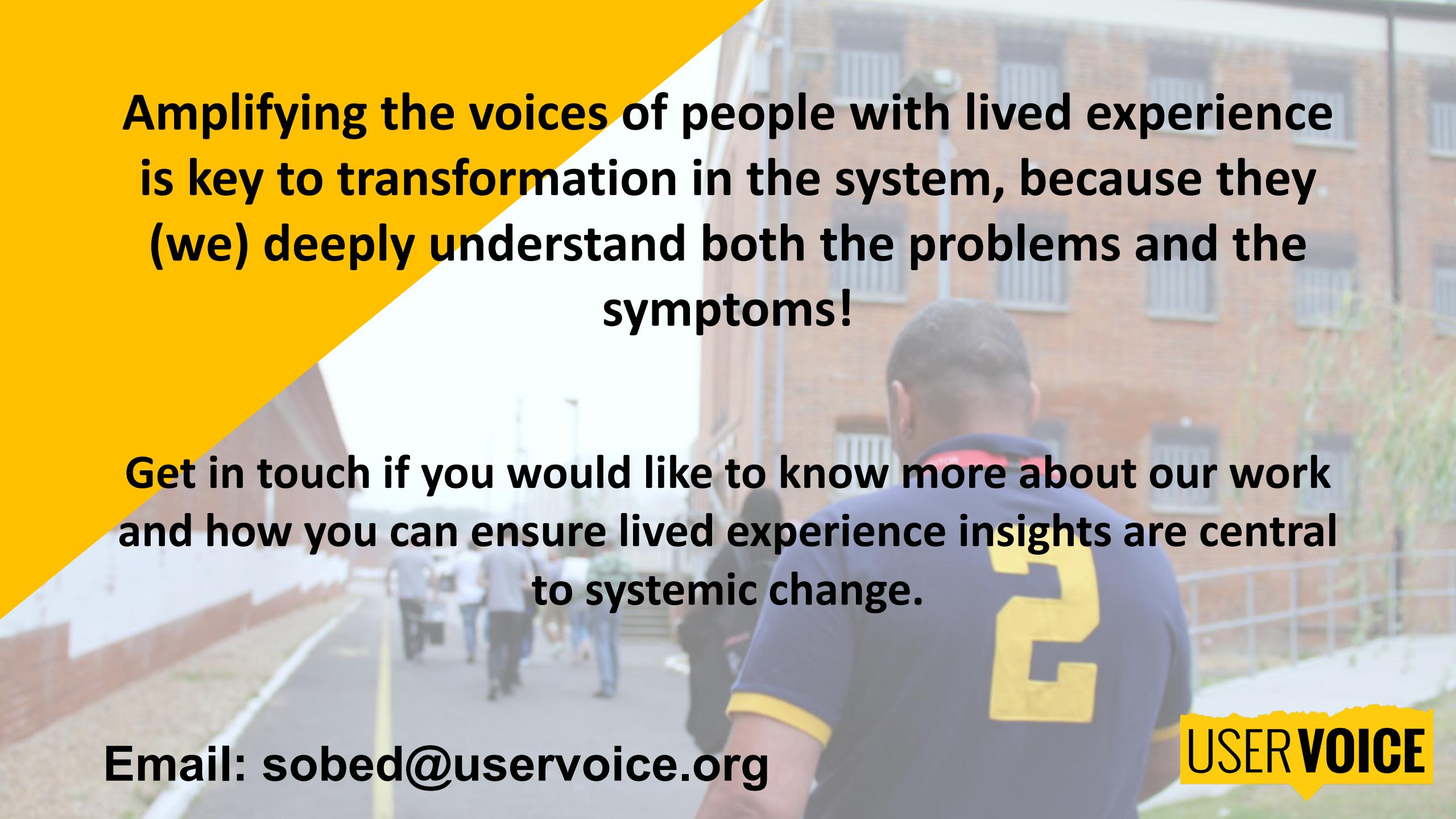
- When asked what has been the most positive aspect of their probation experience, most people talked about their practitioners who they can rely on for understanding and support.
- **75%** said they have a good relationship with their practitioner.
- **50%** of the surveyed individuals and **65%** of those interviewed reported having had multiple probation practitioners.
- Changing of practitioners were mentioned as challenging by many people.



PEER-LED SOLUTION:

How vulnerabilities impact people on probation need to be considered when organising appointments and deciding on the conditions of their sentence.

“Stop having a blanket approach and start seeing people as individual, look after and care for people in different ways.”



**Amplifying the voices of people with lived experience
is key to transformation in the system, because they
(we) deeply understand both the problems and the
symptoms!**

**Get in touch if you would like to know more about our work
and how you can ensure lived experience insights are central
to systemic change.**

Email: sobed@uservoice.org

USER VOICE



Effective practice guide

Guide contents:

- **Introduction**
- **Background**
- **Our standards:** what we looked for and our expectations
- **Learning from people on probation**
- **Examples of effectiveness including:**
 - **Organisational delivery**
 - Leadership and governance
 - Partnerships and services
 - Engagement strategies
 - **Delivering effective case supervision**
 - Exploitation and coercion
 - Neurodiversity and complex needs



Where we see our
standards delivered
well, in practice.

AN HM INSPECTORATE OF PROBATION EFFECTIVE PRACTICE GUIDE

**Effective practice guide:
Safeguarding adults on probation**

Based on: Safeguarding adults at risk of harm supervised the Probation Service in England: a thematic inspection

November 2025

Effective practice guide

Finding your way



Useful links and tools



External video



HM Inspectorate of Probation
recorded interview

Reflection questions

Thinking about your practice as a leader and/or practitioner managing the risks to people on probation:

- How well does your area's work align with safeguarding standards, particularly in managing risks faced by people on probation? What could be improved?
- How well do you understand the safeguarding risks and needs of people on probation in your area?
- How does your engagement with people on probation incorporate the exploration and understanding of the safeguarding risks they experience?
- How do you work with partners to ensure equitable access to services, continuity of care and timely support for those at risk?



Leadership and governance

Example of effectiveness: Health-informed safeguarding, National

Recognises the link between health inequalities and vulnerability among adults on probation

Targeted health needs:

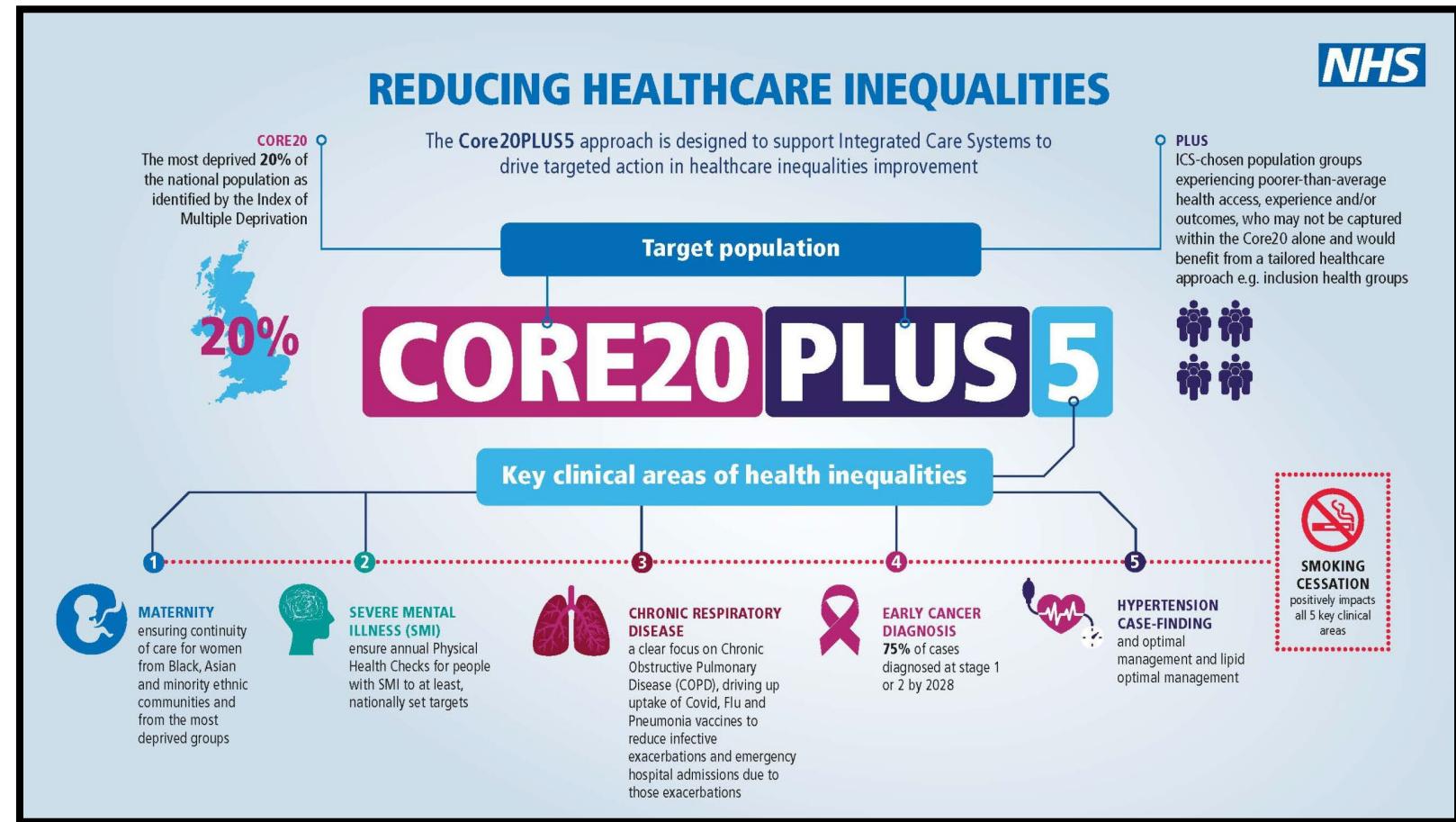
- Maternity care
- Severe mental illness
- Chronic respiratory disease

Innovative practice in partnership:

- GP registration pilots at probation sites
- Peer-led health education
- Data linkage (West Mercia project)

Impact on safeguarding:

- Improved access to care
- Continuity of support
- Lived experience shaping practice
- Safer, healthier rehabilitation





Example of effectiveness: Use of the Regional Outcomes Innovation Fund (ROIF), Kent, Surrey and Sussex

Targeted commissioning to address unmet needs and support safeguarding priorities

- Telephone substance misuse counselling
- Release pathway in Suffolk to reduce isolation and risk post custody
- Mentoring in Maidstone for minority individuals with lived experience,
- Wrap around support for those with housing need
- Neurodiversity resources
- Youth mentoring project across five sites for under 30's with violent/gang related histories
- Trauma-informed, culturally responsive delivery



Surrey Drug and Alcohol Care

Data led commission and collaboration with PDUS to enhance safeguarding and rehabilitation.

Example of effectiveness: MAPPA chair development, Basingstoke



- Strengthened MAPPA safeguarding through targeted guidance and expanded focus on vulnerabilities (e.g gangs, exploitation, remand status)
- Developed Q&A guide for MAPPA chairs to support decision making
- Shared learning from serious case reviews via bespoke PowerPoints and SharePoint access
- Embedded equality, diversity and inclusion as a standing item in MAPPA meetings
- Prioritised safeguarding for remand prisoners in the local business plan
- Improved continuity of care through data use and health service engagement
- Achieved 94% attendance from duty to co-operate agencies

Promoted a shared understanding that vulnerability is integral to public protection

Engagement strategies

Example of effectiveness: Engaging people on probation (EPOP), Coventry

A focus on trust, safety, and seeing individuals beyond cases.

- Co-produced sentence planning
- Peer mentors
- Inclusive engagement
- Cultural awareness
- You said, we did actions
- Survey impact



Cultural shift in emphasising vulnerability as integral to public protection.

"The question becomes not just 'what must be done?' but 'what does this person need to feel safe, supported, and seen?'"

Example of effectiveness: Enhancing health pathways, Liverpool North

Health needs analysis of 150 individuals informed bespoke pathways for men and women

Women's health:

- Fast-tracked GP registration
- Direct referral routes
- Plans for on-site female trauma worker



Men's health:

- On-site physical health checks
- Mobile NHS units offering health checks and liver scan at probation office and prison



Strategic integration:

- Embedded in Combating Drugs Partnership
- Close collaboration with Mersey Care and Primary Integrated Care Teams

Trauma-informed, equitable practice:

- Challenged gendered assumptions about trauma support
- Promoted holistic health as a key enabler of desistance





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