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To: Nina Champion

Director, Criminal Justice Alliance

Via email: amal.ali@criminaljusticealliance.org.uk

RESPONDING RESTORATIVELY TO COVID

Dear Nina,

Thank you for your letter dated 10 November 2020, and for sharing your briefing which helpfully raises important points about restorative justice and how restorative practice can help meet the challenges of these exceptional times as we respond to the global coronavirus pandemic. I am sorry for the delay in responding to you. Your report is interesting, illustrated with fascinating examples of innovative work and concludes with considered recommendations. I will briefly respond to those relating directly to HM Prison and Probation Service (HMPPS) below.

COVID has had an unprecedented impact on the Criminal Justice System. We have well-developed policies and procedures in place to manage outbreaks and infectious diseases. This means prisons and probation services are well prepared to take immediate action whenever cases or suspected cases are identified. Our measures so far have included restricting regimes, minimising inter-prison transfers and compartmentalising our prisons into different units to isolate the sick, shield the vulnerable and quarantine new arrivals. Our experience and evidence gathering provides an indication that these measures have had a positive impact on limiting deaths and the transmission of the virus in prisons. This is available on GOV.UK: https://www.gov.uk/government/publications/covid-19-population-management-strategy-for-prisons

Our National Framework, which sets out in detail how we will take decisions about easing coronavirus-related restrictions in prisons, was published on GOV.UK on 2 June: https://www.gov.uk/government/publications/covid-19-national-framework-for-prison-regimes-and-services Our plan for easing restrictions in prisons (and re-introducing them where necessary) will be guided by public health advice alongside an operational assessment of what can be safely implemented, whilst ensuring we can keep staff and prisoners safe.

Your briefing specifically concerns restorative justice and the impact restrictions brought about through our response to COVID have had on that. The Government supports the provision of good quality, victim-focussed restorative justice to help victims cope and recover from the effects of crime. There will be

circumstances where restorative justice may not be appropriate. It is not mandatory and depends on the circumstances of the case.

RJ is a process that brings those harmed by crime, and those responsible for the harm, into communication, enabling everyone affected by a particular incident to play a part in repairing the harm and finding a positive way forward. RJ offers victims an opportunity to be heard and to have a say in the resolution of offences, including agreeing rehabilitative or reparative activity. It can enable the victim to move on.

RJ also provides an opportunity for offenders to face the consequences of their actions, recognise the impact that it has had upon others and where possible make amends. In this way, RJ has the potential to help rehabilitate offenders. It may help motivate them to change and become responsible, law-abiding and productive members of society.

Under the Code of Practice for Victims of Crime, all victims in England & Wales have the right to receive information about the availability of restorative justice services and where appropriate be referred to those services. The Code also stipulates the obligations on providers of restorative justice, including ensuring that victims are able to give informed consent to participation and that it is in the best interests of the victims.

The Ministry of Justice provides annual funding to Police and Crime Commissioners with which to commission a wide range of local support services for victims, including restorative justice services. RJ is also available in the youth justice system and through the National Probation Service.

HMPPS works in close partnership with commissioners and service providers to ensure safe and effective, evidence-based practice in accordance with national standards. HMPPS has proved its commitment to RJ by establishing its own Restorative Practice Hub (re:hub) in 2019 to support and coordinate RJ across the Agency. re:hub is concerned with the full spectrum of restorative practice covered in your briefing. I will ask re:hub to contact you and discuss your recommendations with you in more detail.

HMPS is conscious of the consequences of the pandemic on individual wellbeing and relationships within our prison communities. One of the ways HMPPS responded as prison regimes were curtailed in response to the pandemic was to produce in-cell resources for prisoners and this effort has been helpfully supported by some of our partners. I understand re:hub has been working with individual RJ service providers also interested in developing in-cell resources that relate to restorative justice. re:hub has been liaising with commissioners and service providers to coordinate what restorative work is possible currently under our published National Framework.

I am glad you highlight the introduction of key work and our new offender management in custody model (OMiC). Every prisoner should be assigned to a key worker (Prison Officer) throughout the COVID pandemic and recovery of key work can be carried out by a team of key workers rather than a consistent key worker due to resource issues and risks at local level.

We would expect as a minimum that a key worker has 20 minutes of 'face-to-face' contact with the prisoner they are carrying out key work with each session (through COVID this can be carried out via in-cell telephony).

Key work will provide staff with an opportunity to allow the individual to raise any pressing problems in terms of their health and / or wellbeing; check that the individual has contact with family / friends where possible; provide information about the COVID-19 situation, checking that it is understood; ensure that COVID safe practices are known and followed; and link in with their POM (Prison Offender Manager) and sentence planning needs as required.

Beyond key work specifically, all of our prisons have structures in place for resident voice and even with the constraints of lockdown this engagement continues with some really encouraging efforts to keep up with socially distanced discussions, surveys and other means to keep conversations going between staff and residents. Several prisons are asking residents to get involved with recovery planning and work alongside staff and partners in thinking through what is possible and how to get there, together.

Whilst there is not at present a published national plan for 'restorative prisons', re:hub is currently working to map and capture the experience of HMPPS across recent decades in applying restorative approaches including with prisoners' families and where there are mental health needs. A number of establishments already use restorative approaches for resolving conflict and to help reduce violence and the Conflict Resolution model used across the Youth Custody Service is based on restorative principles.

We are committed to building back prison communities that are safe and where the culture is characterised by respect, cooperation and hope. This ongoing commitment is demonstrated by our continued focus on rehabilitative culture and procedural justice as well as developing the application of restorative practice in many of the ways you have suggested.

HMPPS is committed to learn from the experience of the pandemic and keep hold of some of those adaptations and new practices that we have introduced that have been of benefit and we would not want to lose, to apply the evidence on community recovery that steers us toward transparency, fairness and collaboration while being always open to learn and adapt. These principles are at the centre of our strategy going forward.

Thank you again for bringing these matters to my attention at this critical moment and for the very valuable contribution you and your members make to the Criminal Justice System generally and HMPPS in particular.

Yours sincerely,

DR JO FARRAR