

## **Equality Analysis Form**

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١.	mame	or the	strategy,	policy,	or project:

GPS tagging, The Knife Crime on Licence Pilot

2. Officer(s) & Unit responsible for completing the assessment:

Tom Dodsworth and Laura Norton Criminal Justice System Team

3. What is the aim or intended outcome of the strategy, policy or project?

To test the use of GPS tagging as a licence condition for individuals being released from prison following conviction for a knife crime offence.

The pilot has now been running for 14 months and will run for a further 12 months. The pilot will test the effectiveness of GPS as a tool for:

- Improving the management of the risk posed to the public, adults and children.
- Improving the enforcement of licence conditions and increasing deterrence from further offending.
- Using location data to challenge offender's thinking and lifestyle and improve rehabilitation.

As it stands, the requirement will only be used for adult offenders convicted of offences involving the possession or use of a knife who are being released from a London prison (or HMP Onley or Highpoint) to an address within the pilot area. There is a possibility that the scope of the pilot will be expanded to include other offence types.

4. Would you receive a different outcome if you were from a particular group and would this outcome be adverse or beneficial?

Inclusion in the pilot and the length and exact nature of the enforceable licence conditions depends on the already existing process for deciding licence conditions, which are proposed by probation staff, based on individualised risk assessments, and considered for approval by prison Governors. The criteria for these decisions is based on the assessed risk of reoffending and risk of serious harm posed by each case, as documented and evidenced in the approved probation risk assessment tools.

Decisions regarding enforcement of any breaches of GPS licence conditions also sit with the probation offender manager and depend on ongoing assessments of risk posed. The final evaluation report will include analysis of recalls by the protected characteristics where the data is available.

## The Nine 'Protected' Characteristics:

Diversity group	Comments
	This pilot only works with offenders aged 18 and over. It is a matter for the allocated probation staff to determine whether GPS should be proposed as a licence condition for any specific case that is eligible for the pilot.  According to probation data between 45%-49% of those convicted of knife crime offences are aged under 25. After the first year of the pilot 64% of
Age	wearers were aged 18-24, meaning that they were disproportionately represented within the pilot cohort. Evidence shows that young adult offenders are more likely to reoffend following their release from prison <sup>1</sup> and are also more likely to be linked to serious group offending <sup>2</sup> , both of which align to the pilot objectives and may explain why this group are more likely to be included in the pilot.
	It is for the allocated probation staff to decide what other rehabilitative requirements are imposed alongside the tag.

<sup>1</sup> The factors associated with proven re-offending following release from prison: findings from Waves 1 to 3 of SPCR - Results from the Surveying Prisoner Crime Reduction (SPCR) longitudinal cohort study of prisoners), lan Brunton-Smith, University of Surrey and Kathryn Hopkins, Ministry of Justice

<sup>&</sup>lt;sup>2</sup> Dying to Belong, An In-depth Review of Street Gangs in Britain, The Centre for Social Justice, 2009

A GPS tag should not be imposed for an offender who is medically mentally or physically unwell to the extent where they would not be able to comply.

The tag will be fitted to the ankle of the offender, any physical or mental condition which may be affected by the fitting should be considered by the allocated probation officer and information provided to the tagging provider in order to inform whether a tag should be imposed and how this should be fitted. A screening for relevant health conditions is included on the referral form to prompt this consideration. This includes consideration of mental or physical health conditions, some of which may make the offender not suitable for GPS monitoring or wearing a tag due to the potentially adverse impact on their health. These considerations will be kept under review by the probation officer with the support of the project team. If the tag is deemed detrimental to health or well-being the wearer, then this will be removed.

## Disability

It is the responsibility of the prison staff and probation officer to ensure that tag wearers understand their licence conditions in relation to this pilot, in common with all other restrictions. Additional needs in this area will be highlighted in the referral form and the project team will provide extra support and materials as required to ensure tag wearers understand the licence conditions and how the GPS data should be used. This might include explaining the tag requirements and data processing by other means, such as in simplified printed form and regular telephone reminders, if required.

GPS licence conditions can also be used to monitor attendance at appointments for treatment, for example for mental health treatment and can therefore be used to support wellbeing.

Between 88-92% of the knife crime cohort, depending on sentence type, are male. During the first year of the pilot 99% of wearers were male. The disproportionately high inclusion of male offenders is likely to be linked to the increased risk of violence posed by male offenders and their increased likelihood of receiving a custodial sentence for violent offences. In the first year of the pilot around 66% of tag wearers were supervised by the National Probation Service (NPS) who manage a much smaller proportion of the London female offenders compared to London Community Rehabilitation Company (CRC). This shows that GPS is more likely to be used with higher risk cases and therefore less likely to be used for female offenders.

A subject's gender will not preclude them from being subject to a GPS tag and 3 out of the 15 prisons included in the pilot are female only prisons.

Where possible, the tag will be fitted by a person of the same gender or a nominated gender if this is the preference of the tag wearer.

The victims of non-domestic knife homicides in London are disproportionately male (94% in 2017). Therefore, this pilot, which aims to decrease the risk posed by knife crime offenders to potential victims (both known individuals and the public), may reduce the impact on this group.

According to London CRC probation caseload data, for those whose ethnicity is recorded and who received a custodial sentence for knife crime, individuals from Black, Asian or Minority Ethnic (BAME) groups are over-represented. NPS probation data on knife crime pre-sentence reports in London also found a disproportionately high number of individuals self-declared as coming from a Black, Asian or Minority Ethnic (BAME) group.

After the first year of the pilot we have found that BAME individuals were over-represented when compared to the proportions of BAME offenders sentenced to custody for knife crime offences. The significance and causes of this difference, which was around 10 percentage points, are not yet clear and may reflect unconscious bias within probation risk assessments and/or other factors within the criminal justice system that are more likely to link BAME young men to risk and serious criminality.

Decisions on which individuals to include in the pilot rest on the assessed risk of each case as completed by the probation officer. The previous pilot for GPS tagging, which also relied on individualised assessments completed by probation staff, found no disproportionality in terms of race. The evaluation reports of this previous pilot, which includes data and analysis of the proportionality in terms of gender, age and race can be found here:

https://www.london.gov.uk/what-we-do/mayors-office-policing-and-crime-mopac/data-and-statistics/academic-research#acc-i-52581

Sex

Race

	The victims of non-domestic knife homicides in London are disproportionately from BAME groups (64% of the male victims in 2017). Therefore, this pilot, which aims to decrease the risk posed by knife crime offenders to potential victims (both known individuals and the public), is testing whether GPS can reduce the disproportionate impact on these groups.				
	Literature will be translated from English where required.				
	The equipment should not interfere with religious observance.				
Religion or Belief	During the fitting of the tag, the identity of the subject must be confirmed however the fitting staff will be sensitive to those wearing religious clothing.				
	Where possible, the tag will be fitted by a person of the same gender.				
Sexual Orientation	There should be no impact on this characteristic				
Gender Identity	There should be no impact on this characteristic.				
Marriage and Civil Partnership	There should be no impact on this characteristic				
	When a tag is fitted to a woman during pregnancy, consideration will be given to the monitoring of the fitting of the strap. Straps can be changed according to need.				
Maternity and Pregnancy	Where advised by medical professionals that the use of the tag may interfere with medical treatment or the health of the woman or their child, the Responsible Officer will be informed that the tag and monitoring will cease.				
	Any data regarding the GPS monitoring of any pregnant individuals will be recorded for evaluation purposes.				

5. Can you, and how would you, mitigate any adverse outcomes? Are there any opportunities' to promote equality and diversity?

GPS can be used by probation staff as an alternative to recall back to prison.

Information on age, sex and race will be collected at the point when each case is tagged to keep a live record of this information and this will be shared with the evaluation team. This

data will be included in the evaluation reports and analysed at the halfway point and at the end of the pilot. Should any concerns arise from this analysis at the half way point of the pilot then further investigation will take place to determine the cause of these concerns and action will be taken, either through staff training and guidance or a review of processes, to mitigate against any adverse outcomes.

The clear guidance provided to staff about the criteria on which to assess each case, which is based on the assessed risk and the features of each case which might be best managed by GPS, provide an objective framework to inform the judgement of probation staff.

GPS location data can also provide an objective record of the movements of offenders on licence. This will be extremely relevant in cases who are being considered for recall due to poor compliance or increasing risk of serious harm or reoffending. This data will also be useful in assessing the most justifiable response for offenders who are alleged to have committed a further offence on licence and to rule out individuals who might have been wrongly implicated in an alleged offence. In these ways GPS monitoring can provide more information for an evidence-based response to concerns about reoffending or increasing risk, thus limiting the scope for these decisions to be based grounds more open to conscious or unconscious bias.

## Review:

After the first year of the pilot we have compared the demographic data on protected characteristics with the information on the wider knife crime cohort to look for any differences and how this might be explained by our understanding of how the pilot has developed. The differences in gender and age are consistent with evidence of offending patterns in young adult males, who are shown to pose a higher risk of violence, be more likely to be linked to non-compliance on licence and serious group offending and more likely to go to prison for these types of offences. These factors all provide a possible explanation for why young males are over-represented within the pilot.

There is a lack of data about these differences for BAME offenders and the role that race may play in the risk assessments and decision making of probation practitioners on who to include in the pilot. To understand and address the relevant factors related to this characteristic we will allow specific discussion of this within practitioner training and guidance documents.

- 6. Use the action plan to describe the actions you will undertake as a result of this EA:
  - Guidance will continue to be offered to probation practitioners, prison Governors and MPS staff.
  - Refresher training will be offered to probation staff, which will outline the eligibility criteria and encourage practitioners to consider how GPS could be used in a variety of cases.

- The possible causes of disproportionality within the pilot will be discussed at the London GPS Programme Board.
- We will develop part of the refresher training to present the information on racial disproportionality and allow for practitioner discussion of the role of unconscious bias or other relevant factors in decision making. This information will be fed back into revised practitioner guidance.
- The updated EIA will be shared with the GPS provider to ensure that they comply with the information set out above.
- An ongoing record of cases assessed and approved for GPS will be kept, and the
  data will continue to be reviewed to identify trends with regards to the diversity
  outcomes and whether there are any adverse outcomes linked to protected
  characteristics that require further exploration or mitigation.
- MOPAC have been working to engage more CRC probation practitioners with the
  pilot, to encourage the referral of a range of cases (not only those who pose the
  highest risk). This will be continued throughout the remainder of the pilot and
  should help to mitigate some of the disproportionality identified in the first year of
  the pilot, especially with regards to gender.
- The evaluation report will address any disproportionality identified in the pilot cohort and assess potential reasons for this.

Tim Read and Valerie Forrester The CJS team							
	8.	Signed by MOPAC I	ead:				
	9.	Approved by Acting	Chief Executive:				
	10.	Published :	No				

Submitted for quality assurance and peer review

7.

Commentary: