

Towards Excellence in Restorative Practice:

A Quality Assurance Framework for
Organisations and Practitioners



RESTORATIVE PRACTICES STRATEGIC FORUM

Dr. Kieran O'Dwyer

2014

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Any citation of this report should use the following reference:

O'Dwyer, K. (2014) Towards Excellence in Restorative Practice – A Quality Assurance Framework for Organisations and Practitioners.
Dublin: Restorative Practices Strategic Forum.

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Published by Restorative Practices Strategic Forum, Dublin
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ISBN 978-0-9928763-2-6

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Foreword

This Quality Assurance Framework was commissioned by the Restorative Practices Strategic Forum (RPSF), a membership body open to all those who have a role in the strategic management and development of restorative practices in Ireland. The Forum's vision is of Ireland as a restorative society that embraces restorative approaches as a philosophy and practice, integral to all relationships. It promotes and supports the use of restorative approaches spanning all sectors of the community. Supported by the Childhood Development Initiative, the RPSF has brought together key stakeholders from North and South, voluntary and statutory, practice and academic, community and institutional settings, and together we have developed a set of objectives and activities to drive and embed high quality restorative practices.

One of the Forum's key objectives is to develop capacity, systems and infrastructures that support the growth, evolution and sustainability of restorative practices. The Quality Assurance Framework is an important step in achieving this objective. It is designed to provide clear, practical information and encourage and support individuals and organisations to achieve high-quality restorative practice consistently for the benefit of all. It is anticipated that this Framework will be updated regularly in future years.

It is hoped that the Framework will be a valuable tool to those delivering restorative services. For many practitioners and service managers, it will offer familiar concepts and approaches as well as a checklist for systematically reviewing practice from time to time. It may also have value in supporting and informing the training of new practitioners and in continuing professional development.

The Framework is just one element of a possible overall architecture to ensure consistent quality and safety of practice. Other key elements include registration and accreditation of practitioners and of training and education providers and the development of Irish standards of practice and existing models are considered in this document. The Restorative Practices Strategic Forum is examining the complex issues involved in accreditation and ways to ensure consistent, high-quality, safe practice through independent, transparent, fair systems of oversight. Although the Framework presents sources of standards to inform practice, the development of Irish standards appropriate to each domain remains to be undertaken as a separate follow-up project. The Restorative Practices Strategic Forum is also examining how best to develop such standards.

This Framework is a critical step on the path of valuing, developing and integrating approaches which have been proven to be effective in reducing conflict, building relationships, and improving outcomes. It has been informed by the commitment, insights and wisdom of many young people, parents and practitioners, and we hope we have been true to your voice.

Marian Quinn

Chairperson

Restorative Practices Strategic Forum

Acknowledgements

I would like to thank the many people who contributed to the development of this Quality Assurance Framework for restorative practices. So many people gave willingly of their time and experience. I am always struck by the enthusiasm, passion and generosity of people involved in restorative practice. It is always a pleasure to meet them and discuss issues of theory and practice. All of them are committed to delivering high-quality services, repairing harm and strengthening relationships and communities.

I am especially grateful to those I was able to meet in person: Andy Tuite (An Garda Síochána), Ursula Fernee (Probation Service), Richie Roche (Irish Prison Service), Peter Keeley (Restorative Justice Services), Emily Sheary (Restorative Justice in the Community), Mary Henihan (Le Chéile, Limerick), Elaine Slattery (Céim ar Chéim, Limerick), Ingrid Colvin (Limerick City Children's Services Committee), Vera Hogan (Mediators' Institute of Ireland), Claire Casey (Childhood Development Initiative, Tallaght), Eithne Coyne (St. Mark's Community College, Tallaght), Fiona Temple (Mulroy College, Milford), Cróna Gallagher and Anne McHugh (Donegal Education and Training Board), Paddy O'Connor (NorthWest Mediation Services), Margaret McGarrigle (Independent RP Trainer and Practitioner), Niamh Crudden (Ballyfermot/Chapelizod Partnership), Hugh Campbell and Martin McAlinden (University of Ulster), and Christine Hunter (Probation Board for Northern Ireland).

Many more people offered to contribute or suggested names of other organisations and individuals who were active in the field. Unfortunately, it was not possible to take up all the offers or follow-up all the leads in the time available. I hope those in question will be able to contribute in the development and implementation of this Framework.

I benefited enormously from the resources listed in the references at the end of this document, in particular the significant body of material developed by the UK organisations, the Restorative Justice Council and Skills for Justice. My thanks are due to Jemma Jewkes and Judith Thompson in particular. I am also indebted to Dr. Belinda Hopkins of Transforming Conflict for sharing her work and ideas on the use of restorative practice in the education sector. Thanks also to Nicola Preston of the International Institute for Restorative Practices.

The work would not have been possible without the support of the Restorative Practices Strategic Forum and particularly the members of its Quality Assurance Sub-Group: Claire Casey, Catherine Ashe, Andy Bray, Vera Hogan, Jim McGrath and Liam Purcell. Nor would it have been possible without the financial and other support of the Childhood Development Initiative (CDI).

Kieran O'Dwyer

About the author

Kieran O'Dwyer is a member of the Restorative Practices Strategic Forum and a practising consultant and researcher. He has been involved in restorative practice, primarily in the criminal justice arena, for over 15 years. He is a member of the Board of Management of Restorative Justice Services Ltd, a Chair of its offender reparation panels, Vice-Chair of the Board of Management of the Childhood Development Initiative (CDI), Chair of CDI's Restorative Practices Management Committee and a member of the European Forum for Restorative Justice. He completed a PhD degree in 2008 by research into the Garda programme of restorative justice for young offenders. He was formerly Head of Research in An Garda Síochána and Director of Regimes in the Irish Prison Service.

Glossary

Accreditation is the official approval or formal recognition by a recognised authority of a training or academic course, or of an organisation or practitioner providing a service.

Fidelity is the degree to which a programme or model is delivered compared with the essential elements of the original programme or model.

Harmed person refers to anyone who is affected negatively by the action of another person or persons. Where a crime has been committed, the term 'victim' or 'injured party' is often used instead, although use of such terminology is avoided in restorative encounters.

Offender reparation panels involve meetings between offenders, supported by a case worker, and panels that comprise community volunteers and Probation Service and/or Garda personnel. The panel discusses what happened and how harm caused can be repaired and future offending avoided; agreed actions sometimes include contact with the victim.

Quality assurance refers to the maintenance of a desired standard of quality in a service or product, especially by means of attention to every stage in the process of delivery or production.

Reparation in its broadest interpretation is any effort to repair harm caused by a wrongdoer to a harmed person and can entail any action(s) agreed by both parties. It is often interpreted more narrowly as meaning a financial payment or non-financial alternative to the harmed person or an agreed charity or community cause.

Restorative circles are used in settings other than the criminal justice system, generally for larger groups. They are used proactively to build relationships and discuss general issues and/or reactively to deal with issues that have arisen. They usually involve the use of a talking piece to ensure everyone who wishes gets an uninterrupted chance to speak.

Restorative conferences in the criminal justice system are structured meetings between offenders, victims and supporters, and can include anyone capable of contributing positively to the deliberations and outcomes. They are problem-solving forums and again discuss what happened and how best to repair harm and avoid recurrences. Outside the criminal justice system, restorative conferences tend to be used to address problems and issues affecting a group.

Restorative justice is the application of restorative practice in the criminal justice system and focuses on the repair of harm caused by offending behaviour and avoidance of future offending. It is based on a set of restorative values and principles that is similar to other forms of restorative practice but is generally used in more formal formats, including, in Ireland, victim–offender mediation, offender–reparation panels and restorative conferences. Cases originate either in the Courts or, for offenders aged up to 18, under the Garda Diversion Programme.

Restorative practice is an approach to building and maintaining interpersonal relationships, resolving conflict and repairing damaged relationships. The approach is based on a set of key values and principles and underpinned by a set of skills and techniques. It is applied in a variety of settings, including school, workplace, community, family and criminal justice, and in a variety of informal and formal formats.

Restorative principles are key principles that inform good practice and reflect core values. They include voluntary participation based on informed consent, inclusive practice, non-discrimination, offender accountability and support, victim empowerment and restoration, community involvement, safeguarding of participants' interests and commitments about process.

Restorative values are a core set of values that underpin restorative practice and typically include empowerment, respect, volunteerism, engagement, inclusiveness, collaboration, group responsibility and problem-solving. Values in restorative justice would also include personal accountability, repairing harm, emphasis on victim concerns and community involvement.

Victim-offender mediation involves a face-to-face meeting between a victim and an offender, or indirect contact between them, with the assistance of a neutral third party as mediator, with a view to discussing what happened and agreeing how harm caused can be repaired.

Wrongdoer refers to a person who causes harm to another. The term 'person responsible' is also often used. Where a crime has been committed, the term 'offender' is commonly used, although use of stigmatising labels such as this is avoided at restorative meetings.

1. Introduction

1.1 Outline

The quality of restorative practice relates to the extent to which it adheres to restorative values and principles. The first focus of this Quality Assurance Framework is therefore on the values, objectives and principles that underpin successful restorative practice. The second main focus is on standards that have been developed to guide practice and help ensure fidelity to the underlying philosophy and ethos of restorative practice. The third and final main focus is on techniques and mechanisms that promote quality.

1.2 Application

Restorative practices are used in a wide range of settings, including criminal justice, school, youth work, workplace and community settings, and in both statutory and voluntary organisations. They were first used in the criminal justice system in the form of restorative justice and then spread into other domains in different formats. The formal models and concepts have been gaining traction in Ireland over the last few decades, although many practitioners were probably using restorative principles and practices prior to their formal introduction. It is often argued that restorative practices have resonance with ancient indigenous social traditions and ways, including the Brehon Laws, and are a natural fit with our culture and across cultures. Increasingly, there is Irish and international evidence that this approach can be effective in a wide range of settings and across a continuum of interventions, from prevention and early intervention to victim-offender mediation and serious offences.

1.3 What is restorative practice?

This Quality Assurance Framework relates to restorative practice in all its guises and in all domains. Definitions of restorative practice vary somewhat depending on the domain. The Childhood Development Initiative (CDI) describes restorative practices as *'both a philosophy and a set of skills that have the core aim of building strong relationships and resolving conflict in a simple and emotionally healthy manner'* (CDI, 2014, p. 7). Hopkins (2011, p. 5) talks of restorative approaches being *'all about making, maintaining and, when things go wrong, repairing relationships'*. Common definitions in the criminal justice arena tend to emphasize processes *'that bring those harmed by crime or conflict 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'* (Restorative Justice Council, 2011a, p. 4). Some emphasize outcomes and values rather than processes. The National Commission on Restorative Justice (2009, p. 34), for example, used the following definition:

'Restorative justice is a victim-sensitive response to criminal offending, which, through engagement with those affected by crime, aims to make amends for the harm that has been caused to victims and communities and which facilitates offender rehabilitation and integration into society.'

Restorative justice can be seen as a subset of restorative practice that applies in the criminal justice system, notwithstanding its earlier genesis. Thus definitions of restorative justice do not capture important aspects of restorative practice in other domains, which emphasize relationship-building and pre-emptive interventions as well as positive, respectful ways of interacting with one another in everyday situations. Key features of such informal restorative processes are that they are used proactively to prevent harm, they are integrated into practitioners' everyday work, they are used on-the-spot to deal with issues that arise and they can involve training children and young people (as well as parents, residents, professionals and others) to use the skills themselves, for example, as peer mediators or just in daily interaction with each other.

1.4 Different domains, common values

All restorative practice shares common values and principles (*see Chapter 2*) and these inform common standards. In light of these shared characteristics, the Framework is applicable to restorative practice in all domains, including education, youth work, neighbourhood, family, criminal justice and workplace arenas. The different domains have sufficient in common to justify a common approach to quality assurance and standards, recognising at the same time that not all elements of the Framework may be as relevant to a particular service or area of practice.

1.5 Quality across different models of restorative practice

It is important to recognise the existence of different models of restorative practice within domains. In the education domain, restorative practices range across a spectrum of interventions, including circles, restorative conversations and informal and formal conferencing. Schools, at both primary and secondary levels, are increasingly seeing restorative practices as a whole-school approach, which supports and embeds a philosophy as well as enhancing the skills and relationships within the school. Youth and community work organisations, residents' associations, local authorities and many others working in disadvantaged communities have also begun to employ these informal preventive restorative practices in different parts of the country. As reported in a recent evaluation of the use of restorative practices in an Irish community, *'the practice was applicable in every situation and I suppose gave us more confidence in really applying it to our work and the situations we are dealing with'* (Fives *et al*, 2013, p. 34). This Quality Assurance Framework is applicable to all models and sub-domains in all areas.

In the criminal justice domain in the Republic of Ireland, for example, common models include conferencing, offender reparation panels and victim–offender mediation. *Conferencing* mainly takes place in relation to young people in the context of the Garda Diversion Programme (under Section 29 of the Children Act 2001) and the Probation Service Court-based pre-sentence programme (under Section 78 of the Act). The *offender reparation model* involves adult offenders coming before panels comprising community representatives and criminal justice professionals to discuss the harm caused, how it might be repaired and how future harm might be avoided. *Victim–offender mediation*, where it occurs, is mainly in the context of the above youth programmes or as part of adult reparation processes. There are variations within these models. For example, Garda cautioning can entail restorative elements that closely resemble conferencing; mediation can be direct or indirect; and the two current reparation services differ in a number of respects (e.g. number of community participants, presence of Probation Service personnel, number of panel hearings). Availability of services is national in the case of the interventions for young offenders, but confined in the main to two regions for adults (Dublin and the South West).

1.6 What do we mean by quality?

Quality as defined in the Oxford English Dictionary (2011) is *'the standard of something as measured against other things of a similar kind; the degree of excellence of something'* and quality assurance is *'the maintenance of a desired level of activity in a service or product, especially by means of attention to every stage in the process of delivery or production'*. This Framework focuses on the degree of excellence of restorative practice as measured against standards that are generally accepted internationally and standards that apply to each stage of the process, from preparation to follow-up of participants, to selection, training, supervision and support of practitioners. A relevant question is whether standards are minimal or something higher. It is useful to consider minimum standards (*see below*) without which practice cannot be said to be restorative, but the real objective is high quality and good practice. The measurement of practice against standards is critical and issues of how and when measurement should take place are discussed below.

1.7 Why quality?

Quality is important for reasons that may be fairly obvious, but are nevertheless worth setting out. Quality has to be viewed primarily from the perspective of the recipients of a service. In restorative practice, quality is about safety and consistency, adherence to principles and values, and achievement of fair outcomes. Commitment to standards and, for some services, independently verified achievement of these provides reassurance to various stakeholders. These include:

- the wider public who may be encouraged to participate in restorative initiatives;
- staff and students/service users who may engage more fully in restorative approaches;
- funders and oversight bodies who can have confidence in the service;
- individual practitioners who can access guidance and support, be reassured that their practice continues to adhere to best practice after initial training, and gain recognition of their skills;
- service managers who have a route-map for development of practice and achievement of desired results.

Poor results in some early programmes of restorative justice were seen by some as attributable to poor practice rather than flawed models or weakness of underpinning theory (see, for example, Braithwaite (1994, p. 199) and Morris and Maxwell (2001, p. 268)). But one bad experience has the potential to damage confidence in restorative practice and derail positive initiatives. Quality assurance mechanisms help avoid such negative experiences.

1.8 Standards in prevention and early intervention services

The development of restorative practice in prevention and early intervention services in Ireland, north and south, is a fairly recent phenomenon, often driven by motivated individuals rather than as a policy or strategic direction. Good practice also in education, community and voluntary settings is informed by academics, trainers and leading practitioners, such as Belinda Hopkins, Margaret Thorsborne and the International Institute of Restorative Practices, as well as learning from restorative justice approaches. Training for Irish practitioners has often been delivered by overseas trainers, although a cohort of Irish trainers has made a significant contribution and this pool is now well established and continuing to grow. Other key sources of training and quality standards for individual practitioners in all domains, including criminal justice, have been the Mediators' Institute of Ireland and academic institutions such as the National University of Ireland at Maynooth and the University of Ulster. However, for many, the approach has been based on instinct, common sense and generic best practice – not because of any lack of professionalism, but due to an absence of appropriate information. This document aims to address this.

1.9 Standards in criminal justice

The development of restorative practice in criminal justice in the Republic of Ireland has been shaped in large measure by experiences in other countries and training for many services and organisations in that domain has often been sourced abroad, at least until recently. Training typically focuses on skill development in the context of the principles and values of restorative practice. Actual practice is underpinned to varying degrees by standards that have evolved over time, usually as a separate process. The link between practice and standards is usually indirect, with a focus primarily on inculcation of practices that are, in turn, informed by standards.

The experience in criminal justice in Northern Ireland has been somewhat different, with a key early role played in service delivery and standards development by community-based restorative justice services.

Overall, standards relating to restorative practice in criminal justice are well developed, underpinned by international organisations such as the United Nations and Council of Europe, and discussed widely in the large academic literature on restorative justice. Criminal justice services in the Republic have adopted and adapted these standards to guide their own practice. Two authoritative sources of standards in the UK are the Restorative Justice Council, which has produced various forms of guidance and more recently launched a Restorative Service Quality Mark, and Skills for Justice, which has produced a range of occupational standards for restorative practice.

1.10 Why Irish standards?

One option for setting overarching standards in Ireland is simply to adopt the entirety of standards of the UK bodies. However, an inclusive process of developing and agreeing standards with stakeholders is important in order to achieve full ownership and commitment. The process of development also helps ensure that standards take account of Irish cultural and other differences, as appropriate, recognising at the same time that (1) most standards have universal applicability and (2) organisations often operate to their own sets of standards derived from the overarching standards. A possible consequence of drawing up distinct Irish standards is that different sets apply north and south of the border. This is not necessarily a problem since it is unlikely that the standards will differ substantially and practitioners and services have an option to commit to both sets of standards if they wish to operate in both jurisdictions.

1.11 Pathways to practice

The landscape of restorative practice in Ireland encompasses significant diversity as to levels of practice and skill. It is hoped that this Quality Assurance Framework will have relevance for and be useful to all those engaging in restorative practice, at whatever level that might be. Four broad approaches to skill development and, for those interested, possible pathways to accreditation can be identified:

- Third-level and private colleges provide academic courses at different levels that typically incorporate professional and practical skill formation and are accredited by the colleges themselves or associated bodies.
- The Mediators' Institute of Ireland offers courses in mediation that lead to accreditation by the Institute and a module on restorative practice has been developed.
- Organisations like the International Institute of Restorative Practices, Restorative Solutions, Netcare, Transforming Conflict or the Childhood Development Initiative provide skill development courses, typically ranging from half-day awareness sessions to week-long facilitator skills courses.
- Finally the Quality and Qualifications Ireland (QQI) framework offers opportunities for training and education.

There is a need to recognise the benefits and limitations of different approaches to training and education in restorative practice and a need to recognise prior learning and experience. Short courses, for example, are valuable in terms of learning basic techniques and introducing restorative approaches, reaching large numbers quickly and beginning the process of changing organisational culture, but they are not designed to equip participants to mediate in serious and complex cases. Many participants on short courses are not interested in becoming accredited practitioners, but do wish to apply restorative techniques in their everyday life. Thus a continuum of training options is important.

1.12 Use and development of the Quality Assurance Framework

The Quality Assurance Framework should be a resource for individual practitioners that helps them review their practice and ensure that it remains of high quality long after initial training has been completed. They should be able to access standards and checklists relevant to their individual practice. For service managers, the Framework can facilitate regular review of services and offer the supports necessary for staff and volunteers. For policy-makers and funders, it can provide a structure for ensuring effective, safe delivery and future development of services in accordance with best practice, while also potentially informing monitoring and commissioning processes. For oversight bodies, it provides a framework for evaluating services against objective, recognised standards and identifying and addressing shortcomings.

The Framework should be considered as a first step in a process of articulating standards of acceptable practice and developing an island-wide system to which everyone can subscribe and which can guide practice. It needs to be informed by the ongoing experiences of practitioners and the needs of clients. It is intended to be sufficiently flexible as to leave open choices of model and adaptation to local needs, subject to agreed universal principles and minimum standards. It should be reviewed regularly by practitioners, researchers and oversight bodies to ensure that it is updated in the light of research and developments in Ireland and internationally.

2. Restorative values, objectives and principles

2.1 Basis for standards

Standards for training, education and practice at different levels of practice and in different domains are based on the values, objectives and principles relating to restorative practice and in some instances are stated only in such terms.¹ Regardless of the format of standards, it is important to understand the underlying philosophy and ethos of restorative practice in order to appreciate the rationale for standards and any scope that might exist for flexibility in their application. This is all the more important in domains where standards might not yet have been developed fully.

Standards can be broad enough to cover most eventualities, but should not be so detailed as to be restrictive. Each restorative event has unique features and practice choices are required on an ongoing basis. Understanding the basis for standards helps ensure that choices are faithful to the overall ethos and objectives of restorative practice. Restorative practice is not just a set of tools to be applied mechanically from time to time in certain circumstances, such as dealing with a high tension situation in a work or school environment, or a criminal offence. It is also a framework of values, language and social skills that facilitate building, protecting, maintaining and repairing relationships so as to make communities, organisations, schools and services better placed to achieve their objectives. The approach adopted by practitioners changes according to the domain (e.g. schools, youth work, criminal justice) and the circumstances (e.g. impromptu, informal restorative conversation to deal with less serious issues and formal conference for more serious issues). It may also be embedded in the way of working (such as a daily circle in an education or residential setting or in communications with users of a service) or be limited to specific occasions (such as dealing with the aftermath of an incident). Regardless of the occasion or context, quality is assured by adherence to standards that give expression to restorative values, objectives and principles.

2.2 Restorative values

Restorative practice is underpinned by a set of core values. Quality assurance systems need to ensure that these are upheld and seen to be upheld, whether or not they are set out explicitly in agreed standards. Restorative services and organisations working restoratively should articulate clearly the values that inform their practice. Commonly accepted values include empowerment, honesty, respect, engagement, voluntarism, healing, restoration, personal accountability, inclusiveness, collaboration and problem-solving (Restorative Justice Consortium, 2004). Most of these are incorporated in the principles outlined below, but are a useful guide in their own right.

Zehr (2002) highlights three key values in restorative justice, which are also applicable outside the justice domain: interconnectedness, particularity and respect. *Interconnectedness* refers to the web of relationships between people that crime or harm disrupts or that it is hoped to strengthen proactively. *Particularity* recognises diversity and individuality, and appreciates that context, culture and personality are important. *Respect* applies to all, including those who are different or perceived as enemies.

Umbreit (2001) lists values of restorative justice that put particular emphasis on victim concerns, community role and offender accountability. In his eyes, restorative justice is marked by a far greater concern for the restoration of the victim or victimised community than the punishment of the offender, elevation of the importance of the victim through greater involvement or input, and holding the offender directly accountable to the person or community harmed. Restorative justice also places greater emphasis on offenders taking responsibility and making amends than on severity of punishment. The community is involved to a greater extent in holding the offender accountable and promoting a healing response for both victims and offenders, and should recognise responsibility for social conditions that contribute to social behaviour.

¹ In New Zealand, for example, the Restorative Justice Network (an informal association of community groups and agencies that offer restorative justice services) opted for a values-based approach to defining standards of practice.

Restorative practice outside criminal settings may not place the same emphasis on victims and offenders (obviously true where its use is proactive and not sparked by a specific incident), but recognises similar values of respect, inclusiveness, collaboration, interconnectedness, diversity, individuality and wider group or community responsibility.

2.3 Restorative objectives

Quality assurance systems need to take account of the objectives of the restorative practice in each setting. In a school setting, objectives might include a positive mutually supportive learning environment, a focus on making, maintaining and repairing relationships and developing social responsibility, and a reduction in anti-social or disruptive behaviour. Similar objectives could apply to youth work or residential care settings, along with promoting and enabling young people to take responsibility for their behaviour and the atmosphere and social environment. In communities, families and workplaces, objectives might be improvement of relationships, reduction in conflict and strengthening of collaboration.

In the criminal justice system, overall objectives typically include (1) offenders repairing the harm resulting from their criminal acts, experiencing and expressing remorse and being fully reintegrated into communities of law-abiding citizens and (2) victims being healed of the trauma of their experiences (Johnstone, 2003). Sharpe (1998) emphasizes the need for victims to come out of the process satisfied, for outcomes to address the reasons for the offence and both victim and offender to get a sense of 'closure' and be reintegrated. She summarises the goals of restorative justice as putting key decisions in the hands of those most affected by crime, making justice more healing and, ideally, more transformative, and reducing the likelihood of future offences. Marshall (1998) includes as primary objectives (1) the re-creation of a 'working community' that supports the rehabilitation of both offenders and victims and is active in preventing crime and (2) avoidance of costs and delays.

The Restorative Justice Consortium (2004) identifies the primary aim of restorative justice processes as 'the repair of harm', which can be understood in broad terms of harm to victims, communities, offenders, relationships. Offender accountability is sometimes set out as a separate objective, frequently in terms of offenders accepting responsibility and showing remorse. The absence of genuine remorse is not necessarily a barrier to partial repair (through reparation, for example) and efforts by offenders to make amends need to be recognised and valued. Each organisation and service should have a statement of objectives that take up these points and reflect at least some of the values and principles set out above and below.

2.4 Restorative principles

A general starting point for restorative practice is that participation is entirely voluntary and based on informed consent. This is seen as especially critical for persons harmed/injured parties (whose needs are considered in more detail below). With the passage of time and in light of experience, this principle has become more nuanced as regards offenders. Some professionals are willing to 'play down' any opt-out choice if they think it is in the offender's best interest to participate, while not denying them this opt-out possibility. The same professionals would acknowledge that the voluntary principle must not be compromised when it comes to formulating an agreement.

Informed consent involves providing full information at the preparatory stages, including the consequences of not participating, and requires giving adequate time to reflect and get independent advice before deciding on involvement. Expectations of intending participants need to be managed carefully to avoid these being unrealistic. Participants should also be made aware that they have the right to leave at any time before or during a restorative event. For offenders, possible consequences, such as prosecution or resumption of Court proceedings, need to be pointed out. Offenders may therefore feel they have limited meaningful choice, but it is still their right to opt out and take the alternative route.

The principle of voluntary participation may have less direct applicability in other settings, such as restorative circles in schools or work settings and in informal restorative conversations. But circle participants should have permission to pass when their turn arrives and be invited to take up or resume active participation later. The voluntary principle is relevant to any conference or mediation-type event that involves people harmed and those causing the harm (e.g. in bullying cases).

2.3.1 Restorative practices should be inclusive and have a problem-solving focus

Restorative processes should seek to ensure representation of all parties affected by an incident or issue, ensure active participation in dialogue and decision-making, and favour inclusive outcomes such as reconciliation and restoration rather than exclusion or stigmatisation. Dialogue may be indirect through intermediaries (including facilitators or case workers), although direct dialogue should be favoured subject to respecting the needs and capacity of, and potential risks to, all participants. The focus should be on repairing harm caused and repairing damaged relationships (past orientation) and preventing recurrence and proactively building and maintaining relationships (future orientation). Agreed actions should be customised to the needs and wishes of the participants as articulated by them and be consensual. The focus should be on problem-solving rather than assigning blame.

2.3.2 Non-discrimination

Restorative practice treats all participants as equal. Practitioners need to show equal concern for and commitment to all parties, respecting diversity, catering for differences in language or other communication abilities, respecting the dignity and inherent value of all participants and requiring all participants to respect these values. Translation and interpretation need to be provided where required.

2.3.3 Wrongdoers' accountability and support

In cases where harm has been caused by anti-social, unacceptable or criminal or otherwise unacceptable behaviour, wrongdoers should be required to agree on essential facts about the incident and accept some involvement or responsibility. In a criminal justice setting, this is the case even if they have been found guilty or if they accepted guilt for tactical reasons. All wrongdoers should be supported and encouraged to understand the impact of their actions and offered opportunities to take responsibility and make good the loss or harm caused. Agreements aimed at repairing harm should comprise fair, appropriate, proportionate actions that are achievable and are not intended or experienced as punishments.

Managing these processes requires a skilled facilitator and an ability to remain focused on positive solutions. Mechanisms to support this approach are proposed in Chapter 4. Conferences that deal with harmful incidents in school and similar settings should involve parents, or require parental permission to proceed in their absence, and should also allow peer support. Wrongdoers and, where relevant, their peers should be supported to avoid further harmful behaviour and any agreement should ideally include actions designed to help them in this endeavour.

If a victim declines an offer of reparation that is considered warranted in a criminal matter, the offender should have an opportunity to make reparation to the community or others who have suffered harm. Offenders should know that by showing remorse and repairing the harm, they can move on with their lives and avoid any stigma and labelling as an offender – they can remain or be reintegrated as valued members of society. The good in wrongdoers and their potential to display positive behaviours should be recognised and nurtured. More generally, all participants should be encouraged to be mindful of the effect of their behaviour on others. Wrongdoers should be encouraged to bring a support person to any meetings or hearings if they wish. This is a requirement for under-age offenders in the criminal justice system.

Every effort should be made to include victims of crime or persons negatively affected by behaviour in the restorative process. The choice to be involved must be theirs alone, but they should be facilitated as far as possible by information provision, adequate time to reflect, explanation of the process and possible outcomes, flexibility as regards arrangements and support prior to, during and after the process. The process must show respect for their personal experiences, acknowledge the harm caused and recognise their right to repair of that harm and protection from future harm. Harmed people should be afforded the opportunity to ask questions of their harm-doer and seek reassurance about the future. They should be encouraged to bring a support person to any meeting if they wish. Harmed people should be given appropriate support even if they decline to be involved in a restorative process and should be offered indirect participation and/or feedback. Where a person directly harmed does not wish any involvement but the wrongdoer is open to doing so, alternatives should be sought, including participation of surrogate harmed people and/or reparation to the community or a charitable organisation.

Restorative practices should take account of community interests and involve the community to the greatest extent possible. Communities can be defined in different ways. In a school setting, it may constitute a class or school and include teachers, students and parents. In a criminal justice setting, it may be a local or wider community affected by social disharmony or specific offending behaviour. In a youth work setting, it may be all those attending in whatever capacity as well as parents or guardians and local residents. In a residential setting, the community may include some or all residents. Communities may be represented in different ways, either as direct participants, as members of the restorative service or as providers and recipients of relevant information. In the criminal justice system, for example, offender reparation panels include one or two community volunteers and Garda conferences sometimes include community representatives if the offence has harmed communal property or other shared interests. Restorative services need to promote community safety and social harmony in their deliberations with participants and communications with the general public, and raise awareness and understanding of non-violent ways to resolve conflict. Having mechanisms by which to engage community representatives, especially where there is no obvious victim, is also an important process to be developed.

2.3.4 Protections for participants

The interests of all participants must be safeguarded in terms of confidentiality of proceedings, personal safety, support for vulnerable participants and respect for human rights and personal dignity. Participants should have access to relevant agencies for help and advice, and access to alternative methods of dispute resolution where relevant. Participants should be informed in advance about the types of information that may be provided to third parties, such as Court authorities, outside services or non-attending victims. Proceedings are privileged, subject only to public interest considerations. Confidentiality in most settings, especially where larger groups are involved, cannot be an absolute and it is unrealistic to demand otherwise. What is important is that confidentiality is maintained about the detail of the event and who said what.

2.3.5 Service commitments

Key restorative principles for service providers include neutrality and impartiality of practitioners, confidentiality and security of information, commitment to best practice and continuing improvement, use of restorative processes internally, transparent and responsive complaint and grievance procedures, and respect for all parties. Facilitation should be non-directive and non-judgmental. A distinction should be made, for example, between the offending behaviour and the offender. Adequate time needs to be allowed for inclusive dialogue, acknowledging harm or loss experienced and the context in which the incident took place. Dialogue is a significant feature of the restorative process and focusing only on outcomes deprives participants of process benefits or lessens the extent to which they are achieved. Crawford (2002) argues that *'the deliberative potential of restorative justice should be its primary raison d'être and overarching principle'*. Restorative dialogue also enhances understanding of harm caused and is likely to be more effective in reducing future misbehaviour than normative or moralising dialogue (Dignan, 2005). Adequate time is also required to provide an opportunity for discussion of an agreement that will meet the needs of all concerned. The consequences, if any, of not reaching an agreement or not delivering on undertakings given in the agreement need to be explored fully.

2.3.6 Determining suitability

Restorative practitioners have a duty to protect all participants, before, during and after a restorative intervention. An assessment of suitability of participants and attendant risk factors needs to be carried out, potentially using a formal assessment tool which is flexible enough to take account of individual circumstances and allow use of professional judgement. Processes should not be initiated where there is a significant risk of further harm or where there is substantial disagreement over key facts, unless the harmed person wishes to proceed in full knowledge of the risks. Criteria for determining suitability or unsuitability should be made clear, recognising that professional judgement is ultimately required. All decisions should be transparent and defensible. The assessment of suitability needs to take account of the circumstances of the harmful behaviour and characteristics of the parties involved.

2.3.7 Reaching agreements

The process of reaching agreement needs to be fully inclusive and responsive to the needs of the participants who are most directly affected by the incident under discussion. Outcomes should reflect what the participants themselves think can be done to repair the harm caused. Assistance in identifying options can be given by other participants when invited or when necessary. While facilitators must remain neutral throughout the process, they have a key role in ensuring that agreements are entered into voluntarily with full knowledge and informed consent, and that undertakings are proportionate, fair, realistic, achievable, credible and time-bound. Agreements should address the needs of all participants, including restoration for the victim and support for the offender. Agreements should be recorded in writing unless explicitly decided otherwise and the consequences, if any, of non-compliance should be made clear.

2.3.8 Monitoring outcomes

Agreements reached in restorative processes need to be monitored to ensure compliance and signal any emerging shortcomings at an early stage. Clear responsibility needs to be assigned for checking on implementation, which requires clarity about what constitutes successful completion and whether and how success is to be acknowledged. Remedial action should be taken where necessary and additional support and encouragement provided to parties who find completion difficult. Significant developments about compliance should be reported to affected persons unless they have indicated that they do not wish to be kept up to date. In some criminal justice instances, outcomes are reported as part of the overall process (e.g. to Court for a final determination of the case). Summary information should be reported publicly from time to time to increase public awareness and understanding. Processes and outcomes should be reviewed and evaluated regularly, including longer term outcomes and impacts.

3. Standards

This chapter identifies the need for clearly articulated standards to inform practice, as recommended by international bodies. It draws on UK experience to describe appropriate principles and standards. These are intended to be flexible, practical and supportive of high-quality practice, but organisational review, adaptation and ownership is also vital.

3.1 Need for national standards

Formal standards in relation to restorative approaches are most advanced in the criminal justice area, where their promulgation has long been recommended by international bodies. In 1999, for example, the Council of Europe set out principles that Member States should consider in developing mediation in penal matters, including notably that mediation services should be governed by recognised standards, be monitored by a competent body and that standards of competence and ethical rules should be developed, along with procedures for the selection, training and assessment of mediators (Council of Europe, 1999). In 2002, a United Nations Resolution on basic principles on the use of restorative justice suggested that countries adopt guidelines and standards, with legislative authority when necessary, that included standards of competence and rules of conduct governing the operation of restorative justice programmes (UN, 2002).

In the absence of formal national structures for standard setting and monitoring in criminal justice in the Republic of Ireland, service providers and funders have developed their own systems. They have drawn, for example, on international literature and training, and focused more on principles and values than explicit standards. This is also the case for domains other than criminal justice, where formal standards have been slower to develop internationally. The Mediators' Institute of Ireland (2014) has recently developed a Code of Ethics and Practice for its members that sets out minimum requirements to obtain a certificate of professional practice and fundamental principles that underpin the mediation process.

The present Quality Assurance Framework has drawn primarily on UK exemplars that have been developed through collaborative processes among practitioners over the past two decades.

3.2 Restorative Justice Council

In the UK, the Restorative Justice Council (RJC) has a suite of resources that includes guidance for practice and practitioner and trainer codes of practice, as well as accreditation of practitioners and a quality mark for services once stipulated standards are met. The RJC's (2011a) *Best Practice Guidance for Restorative Practice* sets out standards in the form of required knowledge and skills for core restorative practice, sensitive and complex cases, informal restorative processes, co-working, guidance for case supervisors, guidance for line managers and guidance for service providers (see Appendix 1). The RJC's (2011b) *Practitioner Code of Practice* includes a commitment to practice based on the *National Occupational Standards for Restorative Practice* developed by Skills for Justice (2013) (see below and also Appendix 2).

3.3 Required core knowledge and skills

The required knowledge for core restorative practice, as written by the Restorative Justice Council, is set out in full in Appendix 1 and includes an ability to:

- provide a definition of restorative practice as a process;
- articulate how a restorative process differs from other approaches;
- explain why, when and how restorative practice works, with reference to research and theory;
- demonstrate an understanding of the different situations in which a restorative process could be used;
- demonstrate an understanding of the context and statutory framework for the restorative practice, where relevant;

- demonstrate an understanding of the principles of restorative practice and their implications for practice;
- demonstrate a commitment to working with partners in both statutory and voluntary sectors.

The associated core skills include an ability to:

- demonstrate effective and confident communication and personal skills;
- create a safe environment for participants;
- treat people fairly without discrimination;
- record decisions and outcomes accurately;
- manage one's work;
- maintain confidentiality subject to the requirements of the law and organisational policy;
- demonstrate self-awareness;
- work effectively with others.

3.4 Required abilities

Required abilities are presented by the Restorative Justice Council for (1) the preparation stage for restorative processes (working to facilitate a safe process, informing participants about the process and assisting choice); (2) facilitating communication in a restorative process (facilitating face-to face or indirect processes, forming outcome agreements and allowing informal time at the end of restorative meetings); and (3) completing the process by evaluation, monitoring and ongoing support.

Additional required abilities are stipulated for informal restorative processes, such as circles. In these environments, the abilities for work with individuals comprise (1) use of a range of questions to enable individuals to reflect on their behaviour and its impact on others; and (2) encouraging the use of statements or brief comments by those affected to show the impact of that behaviour on them.

For work on-the-spot with two people or small groups to resolve specific incidents of harm (also known as 'corridor conferencing' or 'street restorative justice'), abilities include (1) use of a range of questions to get people to reflect on their behaviour and its impact as well as what happened, who was harmed and what is needed to repair the harm; and (2) making a risk assessment to judge suitability.

For work with groups, facilitating circle processes requires the application of core abilities to circles, agreeing ground rules, giving everyone an equal chance to speak (perhaps with a 'talking piece'), honouring everyone's right to pass and offering a chance to contribute when they are ready, and addressing breaches of circle protocol respectfully, modelling restorative values in doing so.

3.5 National occupational standards

The UK *National Occupational Standards for Restorative Practice* were developed by Skills for Justice (2013), the selected provider charged with developing, revising and maintaining national occupational standards in the UK for the justice domain. The suite of standards for restorative practice comprises 13 units. The standards focus primarily on cases where someone has caused harm to another, in formal or informal restorative processes, but include proactive use where no harm has been caused.

The standards for facilitating and managing restorative processes, facilitating informal processes and maintaining quality assurance could be of particular interest in any future process of developing standards in Ireland.

4. Quality Assurance mechanisms

Quality relates to a continuum of activity, from the selection of personnel to evaluation of programmes and policies. It includes a number of dimensions, with some overlaps: selection, training, supervision and continuing professional development; accreditation of practice and commitment to standards; learning from practice through self-reflection, debriefing, feedback from clients, independent observation and feedback, and record-keeping; and review and evaluation. Checklists or templates are useful tools to support quality to a consistent standard. The need for a coherent overall policy and transparency are also important. These are discussed in the following sections.

4.1 Selection, training, supervision and continuing professional development

4.1.1 Staff selection

Selection of personnel to deliver restorative services or play key roles is obviously critical, both initially and after training. It is necessary to have robust and fair systems in place that ensure that only suitable staff and volunteers are carried through each stage of recruitment, training and probation. Personnel must have the skills, knowledge and understanding that will allow them to function effectively. Organisations providing restorative services must resist the temptation and pressure to fill gaps by taking on individuals who do not meet all requirements and be strong enough to re-align responsibilities if staff cannot reach or maintain the necessary standards with support and additional training.

Meeting the needs of clients, not staff, is paramount. Playing central roles in restorative practice is not for everyone and non-selection or de-selection is not a negative reflection on a person. There may be other roles that meet the needs of staff and volunteers as well as service needs. The capacity of personnel to deliver evidence-based programmes is discussed in the Childhood Development Initiative's report *Quality Services, Better Outcomes: A Quality Framework for Achieving Outcomes* (Murphy *et al*, 2011, p. 29). The report identifies desirable personal characteristics, which include emotional intelligence, conscientiousness and agreeableness.

4.1.2 Staff training

The selection and training of people is related to their role and function. Everyone can benefit from training in restorative approaches, language and skills. The facilitation of problem-solving circles, family conferences, reparation panels or victim-offender encounters, on the other hand, requires an enhanced set of skills and aptitudes, and different selection criteria apply. Considerable effort is required in respect of training. Case workers and facilitators are normally required to undertake formal training before taking on these roles, but the same standards should apply to professional staff and volunteers who are assigned key roles. Inadequate training and support can mean that team members are not always consistent, especially if they come from different backgrounds or professions. It is also extremely useful for people who will be working together to share training experiences, challenge each other and develop a common understanding. Similarly, the training role itself is not for everyone – desired qualities include command of the subject, strong communication skills, confidence, charisma, energy and flexibility – and quality assurance systems are needed in respect of training of trainers' courses and for subsequent training practice.

Completion of training and commencement of restorative practice approaches needs to be followed up on an ongoing basis in order to maximise its implementation and ensure that practice is faithful to the model. Opportunities to practise may be limited in some instances, training lessons may be forgotten or practice may get rusty. Practitioners also need to be confident that their practice is up to scratch and the quality of their practice needs to be verified independently. There are numerous ways of building on initial training, some of which are set out in Section 4.1.4 below.

4.1.3 Supervision and support

The term 'supervision' is used here to encompass two dimensions: performance measurement and personal support. All practitioners require supervision, especially newly appointed personnel, be they permanent staff or volunteers. Supervision could be fairly frequent initially and less frequent as experience and confidence grows. New approaches will become integrated more quickly with regular, structured review, which affirms positive skills attainment, encourages trying out new ways of working and also challenges those who are reluctant to step out of their comfort zone. Supervision offers an ideal place to do this. It needs to be available at the request of practitioners and also at predetermined regular intervals. Services and management have a responsibility to ensure that performance meets standards and take appropriate action when performance falls short of what is expected. Their response may include advice, support, information, affirmation, guidance, further training or staff re-assignment. The support dimension includes checking in with individuals about concerns and issues they might have in relation to their role and identifying appropriate actions, and sharing experience in a safe, confidential environment. It is important that notes of supervision are kept to track agreements and progress.

4.1.4 Continuing professional development

All practitioners need to engage actively in continuing professional development (CPD) and be supported in doing so. Participation in formal CPD events may be a requirement of relevant accreditation bodies for restorative practitioners, but should be encouraged and supported even where accreditation is not at stake (not all restorative practitioners want or need accreditation). Formal events include conferences, seminars, courses, master classes, workshops or lectures, but also sharing and learning forums. The formal events may offer CPD points, which contribute to a total that may be required for continued accreditation each year. The Mediators' Institute of Ireland requires attendance at a number of sharing and learning events each year, where issues of practice are raised and discussed and where practitioners take turns to present cases. It is important that participants in sharing and learning events find them positive experiences, where they can feel safe in revealing aspects of their practice without fear of criticism or censure.

A practice developed by the University of Ulster as part of one of their courses is that learners report on a practice issue and feedback is provided by their fellow-learners in ways that focus on their own experience rather than any direct critique of what they have just heard. Other forms of sharing and learning include Communities of Practice (COPs), Professional Learning Communities (PLCs) or similar groups that meet at regular intervals to share experience. Teachers in St. Mark's Community School in Tallaght West, for example, meet weekly at lunch time to share and reflect on issues and experience; participation is voluntary, but numbers have grown substantially since inception. Trainers in restorative practice from different organisations, who trained with the Childhood Development Initiative, meet every 6 weeks to share experiences and learn from each other. Organisations can also promote and support their staff and volunteers to meet their own professional responsibility for development through access to resource material and research evidence. Material can be provided to their own staff and volunteers in situ or to a wider audience by electronic means.

4.2 Accreditation and commitment to standards

4.2.1 Accreditation

Participation in accredited training and educational courses gives some assurance about quality, as does accreditation of practitioners, once the criteria for completion and accreditation are themselves robust.

Accreditation of practitioners usually involves signing up to codes of practice or codes of ethics². The Restorative Practices Strategic Forum has mapped existing accredited courses in restorative approaches and these are available at www.restorativepracticesireland.ie. Whilst accreditation enables some indication of the level of training and knowledge achieved, it should not replace ongoing quality assurance processes such as those described here. Organisations should encourage signing up to such codes, even where the practitioners do not wish to be formally approved by an accreditation body or in the absence of such a body. Monitoring adherence to these codes should form part of supervision or of team reviews.

² There is currently no system in the Republic of Ireland for registration of restorative practitioners, other than through accreditation bodies.

4.2.2 Codes of ethics and practice

The *Practitioner Code of Practice* of the Restorative Justice Council (RJC, 2011b), an extract of which is provided in Appendix 2, is an example of such codes. It requires the practitioner to make four key commitments:

- to work to the principles of restorative practice and to uphold its core values;
- to have completed appropriate training;
- to build on the initial training;
- to adhere to national occupational standards and best practice guidance.

The RJC's *Practitioner Code of Practice* refers to a highly developed system of principles, standards, guidance and accreditation, some of which is not yet in place in Ireland for restorative practice. In the meanwhile, it is open to Irish practitioners and services to sign up to the UK system (although to meet the training commitment, training has to be in accordance with the RJC's *Trainers' Code of Practice* and delivered by an organisation on the RJC Trainers' Register).

The Mediators' Institute of Ireland (2014) *MII Code of Ethics and Practice* also sets out the fundamental principles of mediation and requires members to commit to certain standards of practice, including continuing professional development and practising within approved areas of competence.

4.3 Learning from practice

4.3.1 Self-reflection

It is highly desirable that practitioners should take time to reflect on their practice and use of restorative skills as a way of self-development and quality assurance. Everyone needs to remind themselves periodically of the principles and values underpinning their practice. This is true of experienced practitioners as much as novices. To be effective, self-reflection needs to be disciplined and structured. It can be focused on specific aspects of practice or more generally on values and principles. It should be a routine and regular activity, but may also be in response to interventions that were perceived to have been successful or disappointing, focusing on what went well or badly and why. Structured self-reflection can be assisted by use of checklists (*see Section 4.5*).

4.3.2 De-briefing among practitioners

A useful adjunct to self-reflection is de-briefing with colleagues and other participants in an intervention. The focus of post-intervention conversations is often on outcomes or the performance and contributions of others. Such de-briefing sessions may sometimes of necessity be short as the next client arrives or as busy professionals return to other tasks or even home after a long day. However, it is extremely useful to take a few minutes to focus on what went well or badly, and on how practice might be improved. It should be part of the restorative culture that constructive criticism is encouraged, welcomed and appropriately offered. Skills should be developed or taught that facilitate such feedback in de-briefings or in other forums where practice is reviewed, such as supervision, team or organisational reviews.

Modelling these skills and attitudes is critical to engendering a culture that sees feedback as helpful and should be a key element of managers' roles. Ground rules can be agreed that make it safe to give feedback. A practice used by Céim ar Chéim in Limerick, for example, in staff and staff/student circles is that someone is nominated to be the 'keeper of restorative values' and that person keeps a check on language and interactions during the meeting and gives feedback.

4.3.3 Feedback from clients

Restorative practice services should regularly and actively look for feedback from users, or clients, in respect of the service they received. This can be part of checking-in with people after use of a restorative process or as part of periodic reviews and evaluations. As part of a checking-in process, records should be kept using a common template. Feedback offers important opportunities for learning and service improvement, and can also be valuable in affirming practices. Structured feedback (e.g. through surveys, questionnaires or interviews) should also be established.

The organisation should also have clear procedures for receiving and dealing with complaints and grievances, which should be handled in accordance with restorative principles. The complaints procedure should obviously allow for processing of the complaint by someone other than the person originally involved in delivery of the service. Records should be kept of all feedback, including complaints, and analysed on a regular basis.

4.3.4 Observation

Independent observation is highly desirable as a quality assurance mechanism and is strongly encouraged. It does not have to occur each and every time to be useful, although the concept of a 'keeper of restorative values' (*see Section 4.3.2*) is easily implementable and capable of becoming a standard practice in many environments. Most services are under resource pressures and may find it difficult to appoint someone external without resource implications, or spare an internal volunteer or staff member to observe and provide feedback. However, observation is an important element of supervision, support and development, and should take place from time to time.

The role and focus of observers should be explained to all participants in every instance. The agreement of service providers from partner agencies, where this is a feature of the restorative model being employed, is required. Structured oral and written feedback should be provided to those delivering the restorative intervention. The structure should be according to an agreed checklist of dimensions to be monitored. Observers should take care not to disrupt proceedings, distract participants or intervene. They should also be discreet in taking notes. Recording devices should not generally be used and then only with the prior informed consent of all participants and subject to agreed procedures for safety and confidentiality of the material.

4.3.5 Record-keeping

It is important that services keep records of all significant restorative interventions. Appropriate record-keeping can be seen as a standard in its own right, but reliable summary records have immense value in reviewing performance and ensuring overall service quality and relevance. The nature of required records needs to be worked out in association with staff, funders and oversight bodies, and record-keeping needs to conform to data protection legislation and codes of practice. A balance has to be achieved between utility and burden of collection: data recording should be kept to the minimum deemed necessary for accountability and review.

In the criminal justice system, summary information recorded could include source and date of referral, type and date of offence or incident, assessment of suitability, number and nature of participants, nature of contact (notably dates, time and location) and nature of agreements. More detailed information would be kept in individual case files, including copies of documentation such as referral forms and agreements reached and intervention follow-up. Summary information could potentially also be kept on inputs (e.g. preparation and intervention times) and on process aspects of interest (e.g. level of involvement of participants).

Similar records should be kept in other domains that use restorative approaches to deal with specific incidents, including circles, conferences and mediations that address incidents that cause harm or hurt. On the other hand, it is not necessary or practical to record details of informal uses of restorative approaches embedded in everyday working, such as impromptu restorative conversations or even group circles that are used to check-in with participants at the beginning or end of school sessions.

Summary information can be extremely valuable in terms of quality assurance as regards frequency and type of intervention, profile of offence and offender, number and profile of participants, and extent of completion of agreements. It is not unusual, however, for information to be neglected or at least under-utilised even where actually collected. To make an obvious point, it is important that the information is analysed from time to time. This can be as simple as reading through reports at quarterly supervision, to identify common themes, to developing IT systems or inputting data, and to support more rigorous interrogation of the information.

At an organisational level, records that inform the extent to which overarching objectives are being achieved are important. For example, the commitment to work restoratively may arise from a desire to reduce formal discipline processes, decrease staff sick leave or improve participation in decision-making processes. Tracking these will be necessary in order to assess efficacy.

4.4 Review and evaluation

Periodic reviews and evaluations also have an important place in quality assurance. They constitute systematic, in-depth examinations of processes, outputs and outcomes, and assess the extent to which objectives are achieved. They can be carried out internally or externally, but the greater the distance between the service deliverer and the evaluator the better – independent evaluation enhances objectivity and credibility. Rigorous evaluation is onerous and often expensive, and is usually only necessary after a number of years of delivery. Ongoing review can help ensure that the validity of earlier evaluations has not been eroded or that recommended improvements have been made. Evaluations typically involve analysis of records, observing practice, eliciting stakeholders' views, assessing participation levels and agreements, and measuring outcomes.

Observation gives an immediate opportunity for feedback to practitioners on how processes measure up in terms of restorative values, principles and objectives. Observations can also be written up as case studies, which, duly anonymised, can inform wider practice and become a valuable training and advocacy resource. Stakeholders' views are often collected through face-to-face or telephone interviews, using semi-structured interviews to collect information to a standard format while allowing for free expression of views. Key issues examined include consent, preparation, experience of the process, perception of impact and satisfaction with the process and outcomes. Interviewees in the criminal justice domain include victims, offenders, supporters and professionals. In other domains, the views of participants in restorative events would be sought, all participants in smaller events and a representative sample where numbers are large.

Assessing participation levels goes beyond examining numbers attending and considers the extent to which participants are involved and play an active role. Assessing agreements focuses on individual elements and issues of proportionality, fairness (to all) and realism. Compliance rates also need to be assessed.

Measuring outcomes is perhaps the most challenging aspect of any evaluation. A complicating factor is that many desired outcomes need to be measured over longer periods (e.g. reduced re-offending, increased community safety, fewer discipline problems). More challenging still is the linking of wider impacts to specific restorative interventions, establishing a direct cause-and-effect relationship. Anti-social behaviour, for example, has many underlying causes and a restorative intervention with individuals or groups may not result in positive changes in overall levels in the short or medium term. Evaluations usually include both retrospective elements (e.g. assessment of existing records) and prospective elements (e.g. observation of cases, interviews). Expert advice is recommended before commencement of an evaluation.

4.5 Use of checklists

Templates for reviewing practice are needed for consistency and comprehensiveness, whether the review takes the form of self-reflection or external observation. Checklists tend to focus primarily on process issues and adherence to restorative values and principles. The examples below can be readily adapted.

4.5.1 Circles checklist

For restorative practice circles – for example, in schools or workplaces to build relationships or discuss general issues – the checklist could include the following:

- Was a talking piece agreed and passed around serially?
- Was the right to pass explained? How were those who passed re-integrated into the circle?
- Did check-ins and check-outs occur?
- Were mixers/ice-breakers appropriate and inclusive?
- Were energisers used as needed and were they effective?
- Did I ensure that everyone had an opportunity to speak, without interruption? Did I encourage everyone to speak? Overall, did I allow sufficient time for dialogue?
- Did I treat everyone equally? Did I allow personal bias to affect my dealings with anyone? Was I consistent with previous practice?
- Did I ensure that everybody felt that what they had to say was valued and that their opinions, thoughts, feelings and needs were listened to and acknowledged?

4.5.2 Skills checklist

A checklist focusing on specific skills, most likely used by an independent observer, could include the following:

- Was the facilitator skilled in the use of key restorative questions? Was use of the questions natural or stilted?
- Was the facilitator's body language appropriate and consistent?
- Was the facilitator skilled in use of listening, probing, reframing and formulating plans in a non-directive way?
- Did the facilitator show empathy, interest, concern and understanding?
- Was the facilitator open to ideas?
- Was the facilitator accepting of differences of opinion?
- Was the facilitator able to elicit everyone's needs and facilitate discussion on how to meet them?
- Did the facilitator demonstrate awareness of underlying restorative principles and values?

These kinds of questions could potentially be asked by practitioners themselves in self-reflection, but would require a high degree of self-awareness, clear recall and objectivity.

4.5.3 Checklist relating to harm caused

A checklist for restorative practice addressing specific incidents of harm caused might include the following:

- Was my preparation adequate? Did participants know what to expect?
- Did I make introductions and explain roles?
- Did I ensure that participation was voluntary? Did I make clear the right to leave and/or terminate the event or ask for a break?
- Did I get agreement on ground rules? Did I explain and get agreement about confidentiality and the grounds for sharing information?
- Did I ensure that everyone fully understood what was going on at all stages? Was my language natural, clear and jargon-free?
- Did I ensure that my own and other professionals' interventions and observations were non-judgemental?
- Did I encourage people to find their own solutions and involve them in decision-making?
- Did I ensure respect was shown to all participants? Did I intervene where necessary to ensure that people were respectful to each other?
- Did I ensure that the interests of all parties were safeguarded?

- Did I ensure that the harmed person and wrongdoer were positively affirmed?
- Was the location suitable? Was the room restricted to those directly involved? Was the seating appropriate?
- Were the right people present? Were supporters encouraged to attend?
- Did I ensure that personal accountability was achieved without making wrongdoers feel bad about themselves?
- Were agreed outcomes voluntary, fair, proportionate and achievable, and focused on repair of harm and avoidance of recurrence?
- Was there clarity on the monitoring of agreed actions?

Not all these questions are relevant to each model of restorative practice. For offender reparation panel hearings in the criminal justice arena, for example, decisions about location might be taken at corporate level and allow no flexibility, roles might differ (e.g. as regards preparation) and victims are often not involved. Checklists need to be adapted to the circumstances of each model used.

4.5.4 Restorative organisation checklist

The task of self-reflection or observation is more challenging when the objective is development of a restorative organisation, when almost every aspect of the way of working requires to be examined. In a classroom that aspires to be restorative, for example, quality would include the following, as identified by Hopkins (2011):

- Everybody has their own unique and equally valued perspective – everybody matters and everybody's ideas are valued.
- Thoughts influence emotions; emotions influence actions – the class tries to make what is invisible visible by talking about and listening out for thoughts and feelings.
- Empathy and consideration – the class recognises that what they say or do has an effect on everybody else and because they care about each other, they think before they speak or act.
- Needs and unmet needs – the class knows that each member needs to give of their best and consider everybody else's needs as much as possible as they work together.
- Collective responsibility for problem-solving and decision-making – the class recognises that they are all connected and that it is up to all of them to make the class function well, so they will plan together, make decisions together, solve problems together and help each other out if things go wrong.

This vision of a restorative classroom involves building relationships through circles, fostering social responsibility through empowerment and collaborative problem-solving, developing restorative language and skills, resisting the temptation to manage behaviour in traditional ways, teaching and learning restoratively and working with colleagues restoratively. It involves a transformation of relationships and a move away from traditional concepts of authority and discipline. For example, it sees a student misbehaving as a student making a mistake and the appropriate response as restorative rather than punitive. A teacher in such an environment would reflect on how their teaching behaviour affected their goals of creating and maintaining a restorative classroom, how they responded to errors of behaviour, if they created ways in which students could feel emotionally safe and whether they escalated or de-escalated incidents.

Classroom checklist

(readily adaptable for youth work settings, team meetings, residents' associations, etc)

- Did everyone have the opportunity to participate?
- Did I give appropriate attention to everyone (including the quiet/well behaved students)?
- Did I encourage students to explore more deeply? Did I challenge them?
- Did any difficulties get managed appropriately? Did I demonstrate empathy?
- Non-judgement? Did I facilitate the class in identifying its own solutions?
- Was I consciously aware of their dynamic in the room, its impact on me and my subsequent emotions?

Consideration of organisational culture at a wider level, in terms of commitment to restorative approaches, will require consideration of, among others, governance structures, decision-making processes and monitoring mechanisms. The following provides an example checklist to support this process.

Organisational culture checklist

- Are our governance structures transparent? Does everyone know:
 - what the governance structures are?
 - their roles and responsibilities?
 - who the members are and why they are members?
 - what the functions of each structure are?
- Are our decision-making mechanisms participating? Can staff/volunteers/service users influence our decisions? Are they informed and equipped to do so? Do we respond appropriately to constructive criticism?
- Do we have an agreed vision and objectives? Are the appropriate people engaged in reviewing these? Is the review process adequate?
- Do we have agreed mechanisms for monitoring the achievement of these objectives?
- Do our policies reflect our restorative ethos? (*see Section 4.6.1*)
- To what extent do staff/volunteers/service users experience us as a restorative organisation? How could we improve this?

4.6 Policy and transparency

4.6.1 Restorative practice policy statement

It is desirable that organisations or services that engage in restorative practice have a clear policy statement that sets out objectives, principles and values. It should include commitments to stakeholders, explain how restorative practice will operate and set out what service users can expect. Part of that commitment should be to the quality standards that will underpin practice. The policy should have clear visible support from top management and have buy-in from all stakeholders. Measures should be taken to ensure that the policy is widely available and that there is general awareness, understanding and acceptance of it. Ownership can be enhanced through involvement of stakeholder representatives in drawing it up. Relevant messages should be prominently displayed so that people are regularly reminded of key aspects of the place of restorative practice in the organisation. Existing policies should be reviewed to ensure consistency with the restorative practice policy and its values. The policy should be reviewed periodically to ensure its continued relevance and freshness, and to ensure consistency between the policy and evolving practice.

The exact format of the policy document and the way in which it is drafted may vary according to the nature of the business and the extent to which it is hoped to change organisational culture and behaviour. Some schools, for example, have used restorative practice to introduce fundamental change in the relationship between staff and students, and the way in which education is delivered, moving away from over-reliance on traditional authority roles. Some services have prioritised using restorative practice to manage interactions with their clients, without seeking to introduce significant change within and across the whole organisation. The policy document should articulate the vision of restorative practice in the organisation, however radical or conservative that vision is.

An organisation's management and Board should review restorative practice performance on an ongoing basis, even where this is not its core business. The Childhood Development Initiative's (2014) *A Community-wide Restorative Practices Programme: Implementation Guide* suggests ways in which such reviews can be carried out.

4.6.2 Transparency

Review and evaluation findings should be shared and published to the maximum extent possible. It is a natural instinct for organisations to restrict access where weaknesses are identified, at least while remedial action is taken. On the other hand, everyone can gain from sharing and learning from the experiences of others. It has been a key principle and commitment of the Childhood Development Initiative, for example, to have all of their projects independently evaluated and published, without distinction as to the success or failure of the project. Transparency is desirable in respect of all restorative services in terms of regular reporting on cases, numbers and their characteristics, or other uses and benefits of restorative practice.

Too much good practice goes unnoticed. Publication, online or in more traditional formats, and dialogue regarding insights and learning serve the valuable purpose of increasing public awareness, as well as meeting public accountability needs. A self-perception that use or outcomes are too modest should not prevent publicising or sharing performance information. Sharing facilitates quality if it invites reflection and feedback. A commitment to sharing helps ensure commitment to good practice.

5. Conclusion

5.1 Summary

This Quality Assurance Framework starts from the premise that quality in restorative practice depends critically on adherence to the values and principles that underpin restorative practice. The first step in ensuring quality is that practitioners are fully aware of and understand these restorative values and principles. We may learn about them in initial training and education, but risk losing sight of them over time. We may alternatively learn techniques that do not adequately articulate the underlying philosophy and ethos. The first main focus of the Framework, in Chapter 2, was therefore on restorative values and principles.

The second step in ensuring quality is that practitioners commit to standards that incorporate these restorative values and principles. Standards have the dual benefit of operationalising values and principles for practitioners and providing reassurance for clients and third parties. Standards can take many forms, including codes of ethical practice, guidance documents and more detailed standards, with or without independent verification. The second main focus of the Framework, in Chapter 3, was accordingly on standards.

The third step in ensuring quality is that practitioners use mechanisms to ensure that their practice attains and maintains levels of high quality. The third main focus of the Framework, in Chapter 4, was therefore on various techniques for ensuring quality across a range of activities, from selection and training to evaluation of service delivery.

This final Chapter summarises the earlier content by examining key characteristics of practitioners and organisations that deliver high-quality restorative practice.

5.2 High-quality practitioners

Restorative practitioners who provide a consistently high-quality level of service are likely to do most or all of the following:

- undertake appropriate training from recognised providers;
- be aware of, understand and believe in restorative values and principles;
- use restorative approaches in their interactions with others, in the workplace and in everyday situations;
- commit to meeting standards that enshrine these values and principles;
- commit to codes of ethics and codes of practice, where relevant;
- display key values and standards in their place of work;
- build on their initial training by engaging in continuing professional development through a variety of formal and informal methods;
- actively learn from practice through self-reflection, de-briefing with colleagues and feedback from clients;
- be open to independent observation and feedback;
- keep adequate records of their use of restorative practice;
- use checklists to provide structure for reviewing their practice.

5.3 High-quality organisations

Organisations that provide restorative services of a consistently high quality or seek to embrace restorative principles in their operations are likely to do most or all of the following:

- select staff who have the potential to deliver a high-quality service, support staff to do so and work restoratively with staff who are not meeting standards;
- provide access to appropriate training for staff and encourage their participation;

- be aware of, understand and commit to restorative values and principles at all levels in the organisation, including senior management;
- use restorative approaches in their internal operations as well as with external clients;
- commit publicly to meeting standards that enshrine restorative values and principles;
- commit publicly to codes of ethics and codes of practice, where relevant;
- have a clear policy on the use of restorative practices and embed restorative practices in all their policies;
- display key values and standards in workplaces;
- facilitate and encourage staff to build on their initial training through continuing professional development and learning from practice;
- provide support and supervision for practitioners;
- carry out periodic independent evaluations and share findings;
- review their organisation from time to time as regards penetration of a restorative ethos;
- keep adequate records of their use of restorative practices and make appropriate information easily accessible by third parties.

5.4 Challenges to quality

Potential barriers to achieving consistent quality in restorative practice include:

- inadequate access to training opportunities, especially as regards continuing professional development;
- inadequate supervision and support;
- insufficient provision for learning from practice;
- failure on the part of funders or senior management to understand and safeguard the essentials of restorative practice, such as adequate time for preparation prior to encounters and for dialogue within the restorative events;
- lack of visible active support for quality standards;
- lack of a coherent system of practice oversight;
- pressure to meet unrealistic output targets, such as numbers of cases processed;
- pressure to carry out restorative events within unrealistic timescales;
- pressure to use restorative approaches in unsuitable cases or situations;
- inadequate resourcing;
- failure to keep adequate records and unwillingness to share information.

5.5 Final remark

It has to be recognised that without an ongoing commitment to quality, practice risks becoming mundane and lacking the restorative essence that make it successful. In that scenario, practice slips down the restorativeness scale, risks making situations worse and is devalued and discredited. If high quality is to be achieved consistently, it cannot be taken for granted and needs to be reflected in job specifications, resource levels and timetables. Individuals and organisations need to commit to quality and it is hoped that this Framework document is helpful in that endeavour.

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Appendix 1: Core knowledge and skills required for core restorative practice

The following is an extract from Best Practice Guidance for Restorative Practice by the Restorative Justice Council (2011a). It is cited verbatim, except for footnotes in original text and with minor reformatting.

Section A Core restorative practice

Section A1 Core knowledge and skills

1(a) Core knowledge for restorative practice

You must be able to:

1. Provide a definition of restorative practice as a process, including reference to:
 - victims/persons harmed, offenders/perpetrators and communities;
 - the aims of restorative practice in different contexts, and potential outcomes.
2. Articulate how a restorative process, by aiming to meet the needs of both victims/persons harmed and offenders/perpetrators, differs from other approaches, including:
 - other disciplines (for example, advocacy or counselling);
 - community mediation and conflict resolution (i.e. what difference it makes when there is an identified perpetrator responsible for a particular incident of harm);
 - other approaches to crime and unacceptable behaviour (e.g. a retributive approach, mainstream CJS responses).
3. Be able to give an appropriate explanation of why, when and how restorative processes work, with reference to research evidence and a theoretical base (e.g. conflict resolution theory, theories relating to emotions or social psychology).
4. Demonstrate an understanding of the various different situations in which a restorative process could be used.
5. Demonstrate an understanding of the criminal justice context and/or statutory framework for your restorative practice, if applicable.
6. Demonstrate an understanding of the principles of restorative justice, as published by the Restorative Justice Council in 2004, and the implications of these principles for your own practice.
7. Demonstrate a commitment to working with partners in both statutory and voluntary sectors.

1(b) Core skills for restorative practice

You must be able to:

1. Demonstrate effective and confident communication and personal skills, including:
 - an ability to inspire confidence;
 - the ability to motivate and encourage;
 - active listening;
 - explaining so that others can understand, and checking for that understanding;
 - an ability to promote dialogue and enable others to express themselves;
 - awareness of and ability to read non-verbal signals;
 - summarising and reflecting back;

- telephone and face-to-face communication skills;
 - giving and receiving feedback;
 - prompting dialogue constructively and positively;
 - enabling participants to make their own choices.
2. Create a safe environment for participants, including:
 - building, and maintaining throughout the process, trust and confidence of all participants;
 - being non-judgemental;
 - being sensitive to diversity and difference;
 - demonstrating an ability to manage conflict and aggression, while remaining calm;
 - assessing imbalances of power and acting to redress these;
 - remaining neutral and demonstrating impartiality to all participants.
 3. Treat people fairly without discrimination on the basis of gender, age, ethnicity, ability/disability, sexuality, culture, faith or crime committed, including by:
 - ensuring equality of access to restorative process;
 - showing respect for all participants, their opinions and views.
 4. Record decisions and outcomes accurately, following agency guidelines.
 5. Demonstrate that you can manage your work, including:
 - planning and evaluating your work;
 - showing you are following a clear process with each particular case;
 - problem-solving and handling complexity.
 6. Maintain confidentiality, subject to the requirements of the law.
 7. Demonstrate self-awareness, including:
 - awareness of your own prejudices, and ability to set them aside;
 - ability to acknowledge, in each specific case, the boundaries of your own knowledge and experience;
 - recognition of when it is necessary to seek help.
 8. Demonstrate the skills and ability to work effectively with others, including:
 - as a co-worker when appropriate (see Section D);
 - as a team member with colleagues in your service.

Section A2 Preparation for restorative processes

2(a) Working to facilitate a safe restorative process

You must have the ability to:

1. Carry out an initial assessment of the incident and potential participants to consider any risk of harm to participants and others through a restorative process, and how these risks should be managed.
2. Access available assessment information relevant to the risk of harm during a restorative process (e.g. relating to prior incidents, mental health needs, substance abuse issues), prior to contacting participants.
3. Assess considerations relevant to safety and prepare participants for the restorative process in relation to:
 - their feelings, attitudes and behaviour, both at the time of the incident and in the present;
 - their expectations of the process;
 - their motivation for being involved;
 - substance abuse and mental health issues;
 - any language or communication difficulties, physical or learning disabilities, mental impairment, or ill health;

- intimidation of any participant;
 - the ongoing emotional impact of the original incident, including that of any death or serious injury;
 - the emotional state of the participants;
 - any previous history between the participants, or repeat victimisation;
 - significant power imbalances between individuals;
 - constraints on the likely location for any restorative meeting (for example, if any meeting would need to be held in prison or a secure residential setting, the security needed and how participants would be able to get there).
4. Assess cases for the presence of any complex issues of intimidation and vulnerability which would require referral to a senior practitioner (who has demonstrated their ability to work with sensitive and complex cases), other professionals or to a specialist support service.
 5. Record concerns about safety and risk and ways in which they might be addressed, and refer to the appropriate level of management and/or partnership agency (e.g. all child protection concerns).
 6. Develop potential measures to manage any identified risk (involving others in the process, including case supervisors) and discuss these with participants, including:
 - working out with potential participants which type of communication will be most helpful at each stage of the process and any safety implications;
 - selecting venues to maximise participants' safety and to minimise their anxieties or concerns, in particular considering how participants will enter venues, where they will wait, how refreshments can be provided, whether it may be helpful to have additional facilitators present if there is a large group/people needing to be accompanied from different parts of the building, whether there are break-out/time-out rooms available;
 - managing and balancing the presence/absence of supporters who can influence the emotional and physical risks of the process and its outcome.
 7. Continue this process of assessing and managing safety and risk throughout the process.
 8. Maintain opportunities to re-assess the appropriateness of continuing the process and keep open options to continue the process in different ways.
 9. Be able to apply responses to aggression which minimise risk.
 10. Recognise when the risk of continuing a particular process, or aspect of the process, becomes unacceptable and end the process safely.

2(b) Informing participants about restorative processes and assisting choice

Given the research evidence, participants should be offered a face-to-face restorative meeting, unless there are safety reasons for not doing so.

You must be able to:

1. Provide clear and accurate information to individuals and any supporters about:
 - the purpose and potential benefits of a restorative process and a description of what actually happens;
 - the roles and responsibilities of those who will be involved;
 - the links between restorative and other interventions;
 - how the restorative process would relate to any criminal justice or other proceedings, and the implications for the participants (see 2(b)).
2. Communicate with individuals throughout the process, and encourage them to communicate, in a manner which:
 - acknowledges their situation and their needs within the process;
 - treats them fairly, with dignity and respect, whilst recognising the harm that has been caused;
 - is appropriate to them;
 - encourages an open exchange of views;

- is free from discrimination and oppression;
 - addresses each person in the way they wish to be addressed;
 - allows them the time and space they need in which to make decisions;
 - recognises that, for some, participation in the process may be required by the court, following their informed consent.
3. Encourage and assist people who have offended/caused harm to:
 - identify and reflect upon their behaviour, the factors that contributed to it and the impact that their behaviour has had on the victim/person/community harmed;
 - take responsibility for their behaviour and its impact on others.
 4. Encourage and assist individuals to:
 - identify and reflect upon the nature and effects of the harm done and its consequences for them;
 - find effective ways in which, if they choose to, they can express this during the restorative process;
 - raise any questions and express any anxieties they have about restorative processes;
 - be open about their expectations of the process, and to consider how they will feel if these expectations are not met.
 5. Enable participants to think through a decision about whether to participate in a restorative process, by providing information about:
 - any risks identified and how you will manage these (see part 2(a) above);
 - how, through the process, you will manage any specific issues identified by participants as causing anxiety;
 - the evidence for safety and potential benefits that a restorative process brings.
 6. Where your risk assessment indicates that a face-to-face meeting would be unsafe, but safety could be managed through other forms of communication, explain the options on offer to participants (see 3d).
 7. If, having considered the information provided to them, participants are unwilling to meet face-to-face, other options for communication should be offered (see 3d).
 8. If any individual decides not to proceed, support them in exercising their rights to opt out, and support any others who would have participated to cope with any disappointment.
 9. Ask the primary victim/person harmed and the offender/perpetrator who they want to be involved in the process, ensuring that no one is involved against their own wishes or the wishes of the victim/person harmed.
 10. Assess who else in the participants' circles has been harmed by the crime/incident and might benefit from being involved, balancing the benefits of greater numbers of participants (both for their own restoration, their support to the primary participants and for their contribution to the process) with time/resource constraints. Take into consideration any legal requirements and best practice guidance (for example, around involving parents).
 11. For crimes/incidents with a corporate victim, or where a community has been affected, assess who among the participants has been most affected, or is best placed to communicate the impact of the crime on the wider community, or to contribute to an outcome agreement and prepare them to fulfil this role.
 12. Risk assess any additional participants (in addition to the primary victim/person harmed and the offender/perpetrator), taking account of available measures to manage these risks.
 13. Make a clear assessment, with the various participants, of the most important issues and harms from all participants' points of view.
 14. Ensure that all participants are provided with clear information about the restorative process, its structure and potential outcomes, so as to create a sense of safety and clear expectations.
 15. Encourage participants to consider before the meeting what form of restoration in an outcome agreement might meet their needs.

Section A3 Facilitating communication in a restorative process

3(a) Facilitate direct (face-to-face) restorative processes

You must be able to:

Preparing for a face-to-face meeting

1. When working with a co-facilitator, assistant or supporter, ensure that you both understand your roles, as do the participants (see Section D).
2. Assess the likelihood of strong emotions or conflict during the meeting, and ensure you have a plan in place for separate meetings, or time out during the meeting, should this be needed.
3. Assess whether it will help you to use a script, or framework, reflecting the chosen structure for the meeting.
4. Select an appropriate venue and prepare the venue appropriately, including setting up seats according to a seating plan, ensuring refreshments are available and ensuring the premises will meet the needs of all the participants.
5. If you are planning a face to face meeting, and you wish to invite observers:
 - inform all participants about the possibility of observers being present;
 - check whether all participants are willing for this to take place;
 - inform participants about where in the room observers will be sitting, and gain their agreement to this.
6. Manage the arrivals of the participants, ensuring that where possible the participants do not have to meet or wait together prior to the meeting, and that they are not left on their own without access to support and information while waiting.

During the meeting

7. Remind participants of the agreed structure and ground rules for the meeting.
8. Communicate with individuals, and encourage them to communicate directly with one another, in a manner which:
 - acknowledges their situation and their needs within the process;
 - treats them fairly, with dignity and with respect, whilst recognising the harm that has been caused;
 - is appropriate to those involved;
 - encourages an open exchange of views;
 - minimises any constraints on communication;
 - is free from discrimination and oppression;
 - addresses each person in the way they wish to be addressed.
9. Make constructive contributions to the process, aiming to facilitate the dialogue between participants in ways which:
 - keep the focus on participants' communication with one another;
 - encourage everyone to contribute actively and fully in the process;
 - move the process forward at a pace that balances the needs of everyone involved and the need for a fair and respectful process with the time and resources available;
 - encourage individuals actively to participate in identifying positive outcomes;
 - does not suggest your own 'solutions' or opinions;
 - retains the focus on this as the participants' meeting.
10. Assess whether at any point it is necessary to stop the meeting, call time out, or have separate meetings.
11. When unexpected issues arise, check with participants which issues should be dealt with during the meeting and which they would prefer to deal with outside the meeting.
12. Promote the independence of individuals during restorative processes, for example, by using eye contact to encourage participants to speak directly to one another.
13. Continuously monitor participants':
 - emotional and physical well-being;

- compliance with any meeting ground rules established at the start and take appropriate action if the ground rules are not adhered to.
14. Identify any signs that indicate potential harm and intervene immediately to protect participants.
 15. Give participants space and time to discuss what they want to come out of the meeting, and use these discussions to formulate an agreement.
 16. Encourage individuals to review what has happened during the meeting and confirm their perceptions of agreements reached and any unresolved issues.

3(b) Forming outcome agreements

You must be able to:

1. Enable participants to consider and discuss the outcomes they want to see from the restorative process, including:
 - any kind of restoration meaningful to the participants;
 - rehabilitative outcomes (including any identified support needs relating to substance misuse, mental health, education and employment, etc);
 - material or financial reparation, either to the direct victim/person harmed or to the community, depending on the wishes of the victim/person harmed;
 - any outcomes required by statutory agencies (including completion of identified programmes, adherence to curfews etc).
2. In order to do this, you will need to take into consideration:
 - the abilities of the offender/perpetrator;
 - what restoration would be welcomed by the victim and would be appropriate to the harm caused, recognising the wide range of outcomes that repair emotional harm (apologies, letters, dialogue, insights, commitments, etc);
 - the timing of any financial, practical or emotional restoration, and a schedule for completion;
 - any identified needs of the offender/perpetrator, such as support for mental health, substance abuse needs and support available to them;
 - the need for reparation activity to be clearly defined, measurable, proportionate to the harm caused and supported by the participants;
 - the availability of other services/input from other professionals and community-based agencies to undertake any rehabilitative or reparative activities;
 - the support available to help the offender/perpetrator to complete the agreement;
 - any health and safety implications of the proposed reparation;
 - whether insurance is in place to cover any practical work planned;
 - any other practical issues relating to costs, transportation, etc;
 - whether restoration has been agreed with the participation and free informed consent of everyone present;
 - any practical limitations on offenders/perpetrators serving prison sentences.
3. Ensure that no one is listed as a recipient of reparative activity in the outcome agreement without their expressed consent.
4. Ensure that there is an agreed person or agency responsible for monitoring the agreement/contract.
5. If the offender/perpetrator needs support to complete their outcome agreement, make clear, if possible, who will provide this.
6. If money is to be handed over, ensure arrangements are in place to document its movements and have them witnessed.
7. Ensure that all participants understand whether or not the outcome agreement forms a legally binding (breachable) agreement, or whether completion is voluntary.

8. Clearly set out what the consequences will be, and what actions will be followed, if the outcome agreement/contract is not complied with.
9. Whilst maintaining agreed confidentiality relating to what happens in the meeting, make full and accurate records of decisions and outcomes, obtain any necessary signatures on the outcome agreement, and send copies promptly to all who need, and are entitled, to receive them.
10. Provide all participants with a record of what has been agreed, unless this is not required, or desired, by participants.
11. When producing an outcome agreement that could result in prosecution if not complied with, ensure that correct (interagency) procedures are followed and inform participants about CJS monitoring arrangements and the consequences of non-compliance. This includes making it clear who will be monitoring the contract and clearly setting out what actions will be followed if the contract is not complied with.

3(c) Informal/refreshment time at the end of formal restorative meetings

1. Allow time at the end of the meeting for informal discussion between participants, and a time for reflection following the end of the formal meeting, ideally with refreshments available.
2. Remain present throughout, and be alert to significant further exchanges or moments of restoration between participants, particularly if these should be recorded in the outcome agreement (for example, a request to stay in touch).

3(d) Facilitating indirect restorative processes

You must be able to:

1. Support participants through their chosen restorative process. Where participants have chosen not to meet face-to-face, this choice should be respected and indirect options offered.
2. Where participants choose not to meet face-to-face, or where your risk assessment indicates this would be unsafe, assist participants to choose a form of indirect communication that will work for them, including:
 - indirect 'shuttle' mediation;
 - video conferencing;
 - telephone conferencing;
 - the use of a two-way screen;
 - audio or video recordings;
 - written communication.
3. Ensure that the option of a face-to-face meeting remains available to participants throughout, subject to any safety concerns.

Indirect mediation

If participants have chosen not to meet, but want to communicate via the facilitator, an indirect process may be beneficial. This may be particularly suitable in sensitive and complex cases and may be part of preparation for a face-to-face meeting at a later stage. Where participants have chosen this approach, you must be able to:

4. Gather information relevant to the restorative process, seek clarity and for each item of information record whether it can be shared with other participants as part of an indirect restorative process, and how it is to be shared (or whether it is for your information alone at this point).
5. Ensure you have clarity about what information can be shared and what is confidential, and seek consent to exchange each piece of information.

6. Sensitively and appropriately relay the information each participant has asked to be passed on, giving careful consideration to what the recipient has already indicated they wish to know, and withholding information if there is a serious risk of the information causing harm.
7. Make clear, when passing on information to all parties, where information has come directly from the other participant, and where it is based on your own assessment of the situation.
8. Make accurate and complete records of discussions and agreements with individuals, the decisions that have been reached and the arrangements that have been made, working within any agreements about confidentiality, and taking account of agency arrangements for storage, disclosure and confidentiality of records.
9. Assess whether and when to bring indirect communication to a close and whether to move to a face-to-face meeting. Consider offering other forms of indirect process which might subsequently lead to a meeting.

Written communication between participants

10. Where appropriate, assist either the victim/person harmed or the offender/perpetrator with the planning, preparation and writing of a letter, taking into consideration:
 - their literacy skills, and possible need for support;
 - the possibility of enlisting their supporters or others to assist them;
 - the need for letters to address the concerns of the victim/person harmed;
 - the need to manage expectations about the contents and style of the letter;
 - the need for letters to be both honest and respectful;
 - the need to risk assess letters for any hidden messages.
11. Provide the person writing the letter with clear information about how the letter will be handed over or read out to the recipient as part of the restorative process.
12. Ask what response they wish to receive or feedback on how their letter was received, and ensure that as part of an ongoing process, or as part of follow-up (see Section 4 below), these wishes are met.
13. All letters should be checked for risk of further harm and never handed over in a sealed envelope.
14. Letters should be given to the victim/person harmed only when they have agreed that they are willing to receive it.

Video and Audio communication

15. Where participants choose to communicate through video (video conferencing) or audio (telephone conferencing) communication, this should be prepared for in the same way as for a face-to-face meeting.

Section A4 Completing the restorative processes – Evaluation, monitoring and ongoing support

You must be able to:

Assist with, supervise and monitor the completion of outcome agreements

1. Assist and/or supervise the offender/perpetrator to complete their outcome agreement as agreed when it was formulated.
2. Assess whether the offender/perpetrator has completed the actions they agreed with the victim/person harmed.
3. If the offender/perpetrator has not completed the agreement, assess whether any further support you could realistically give would enable them to do so.
4. If further support is impossible or ineffective, sensitively inform the victim/person harmed, if they wish, and any other agencies whom you have a duty to inform, whether or how far the offender/perpetrator has completed the outcome agreement.

5. Where it is assessed that an individual has not complied with the outcome agreement/plan, and where it has formed part of a statutory requirement, ensure that structures are put in place for passing this information back to the appropriate CJS (or other) agency and the victim/person harmed.

Evaluate the process with individuals involved

6. Relay information about outcomes to other parties as agreed by the participants.
7. Provide the parties with the opportunity to discuss openly and honestly their thoughts and feelings about the restorative process and its outcomes.

Appendix 2: Practitioner Code of Practice of the Restorative Justice Council

The following is an extract from the *Practitioner Code of Practice* by the Restorative Justice Council (RJC, 2011b).

Restorative processes bring those harmed by crime and conflict, 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.

Restorative skills can be used to deliver a formal restorative process (for example, a restorative justice conference involving victims and offenders, in a care home following an incident of harm, or in the community to resolve a dispute between neighbours). The skills can also be used informally, to resolve conflict in the course of daily work (for example, as used by a police officer to deal with low level crime on the beat, or a teacher to manage a conflict between young people in the classroom).

Quality in restorative practice is essential, to safeguard the well-being of participants in a restorative process, to build public and community confidence, and to provide everyone involved with the best possible outcomes. This Code is the minimum required for a restorative practitioner to join the RJC Practitioner Register, either as an Associate or as a full Registered Accredited Practitioner.

1. The Practitioner commits to work to the *Principles of Restorative Practice* (RJC, 2004) and in particular, to uphold core values of restorative practice, including: Empowerment, Honesty, Engagement, Voluntarism, Restoration, Inclusiveness, Collaboration, Confidentiality, Impartiality and Problem-solving.
2. The Practitioner will need to have completed, as a minimum, the workshop training and/or the full practitioner training in accordance with the RJC *Trainers' Code of Practice 2010*, delivered by an organisation on the RJC Trainers' Register.
3. Recognising the skills needed for safe and positive restorative practice, the Practitioner commits to build on their initial training through:
 - regular supervision;
 - co-working and mentoring from experienced restorative practitioners;
 - obtaining feedback from participants;
 - reflecting on their practice and use of restorative skills;
 - continuing their professional development through training, learning and contact with other practitioners; and
 - where appropriate, to work towards an RJC quality marked accreditation.
4. Recognising the need to base practice on established and evidence-based good practice, the Practitioner commits to practice based on:
 - *National Occupational Standards in Restorative Practice* (Skills for Justice, 2013);
 - *Best Practice Guidance for Restorative Practice* (RJC, 2011).

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