

**THE POLICE AND CRIME COMMISSIONER FOR DERBYSHIRE
INDEPENDENT CUSTODY REVIEWING SCHEME
PROBATION MONITORING AND FEEDBACK FORM**

To be completed by experienced Independent Custody Visitors at the end of their visit
with a new ICV.

Your name: <i>(capitals)</i>
ICR name (For review):..... <i>(capitals)</i>
Date of Visit:.....

Before the visit

Is it easy to make contact with the visitor? ... Yes/No*

If not, please state why
.....

Is it easy to arrange a suitable time/date for the Visit? Yes/No*

If not, please state why
.....

Does he/she arrive promptly at the arranged time to make the visit? Yes/No*

If not, did he/she explain why?
.....

During the visit

Is he/she able to interrogate the custody record effectively? Yes/No*

Is he/she able to use the I.T. system successfully? Yes/No*

Does he/she use the aide-memoir/checklist? Yes/No*

Does he/she make notes effectively? Yes/No*

If the above named completed the Report Form, did you feel they were competent and
confident in doing so?

Yes/No*

Behaviour / attitude during the visit

Does he/she communicate effectively, orally and / or in writing? Yes/No*

Is he/she polite and considerate when in contact with the following:-

Yourself Yes/No*

Other Staff Yes/No*

Was it easy to work as a team during the visit? Yes/No*

Did you work in consultation with him/her? Yes/No*

Is he/she co-operative and open to constructive advice/criticism? Yes/No*

Do you feel that he/she displays the required ability, commitment and attitude to carry out the role? Yes/No*

Please explain your reason for this
.....
.....

Any other comments
.....
.....
.....

*delete as appropriate

Please complete and return to:

ICV Scheme Administrator, The Office of the Police and Crime Commissioner for Derbyshire, Butterley Hall, Ripley, Derbyshire, DE5 3RS