

Harris Review Public Hearing

14:00 – 16:300 Thursday 25 September
National Council for Voluntary Organisations Society
8 All Saints Street, London N1 9RL.

Notes

1. Liaison and diversion of young adults

- Is there sufficient provision of community based interventions?
- The system is geared towards managing risk and does not take account of individual need. This is more pronounced for black and minority ethnic young people.
- Need to treat children as children in the criminal justice system. Evidence from stop and search data shows there were 1000s of occasions in which children under 10 years were stopped and searched. The system is criminalising young people.
- Important to look at how government integrates diversion activities across budgets – how to encourage cross-government cooperation on this topic? Suggestion that local authorities could be made responsible for the cost of prison places for young people and would then have a stake in effectiveness of interventions. [Note: the cross government model used for governance and funding of reducing reoffending has fallen away but was it respected and could it be applied to this age group?]
- Example of intervention by Leap Confronting Conflict (<http://www.leapconfrontingconflict.org.uk/>): Working with children at school to reduce the risk of exclusion is best value for money. They cost of exclusion and places in pupil referral units would be saved and money re-invested in working cooperatively with children,
- Example of intervention, the Horse Course (<http://www.thehorsecourse.org/>). It is a behaviour change programme run over seven days to enable young offenders to develop assertive, empathic behaviour. The horses are specially trained to pick up on energy levels and mood. Positive research findings. Difficult to operate for prisoners and have focused delivery on those at risk of offending.
- Note: NPS staff writing pre-sentence reports need to know about local sentencing options or be asked to develop more creative and targeted local interventions for young people?
- How can an 18 year old end up in a 'scary adult prison'.

Family contact (covered at point 5 too)

- Young people are too far from home and isolated from family.
- How can families be involved in assessment before sentence? There is currently no account taken of family views on sentencing and how they might support community based interventions. Families are a good source of support to enable offenders make the most of interventions (particularly for young people?).
- More to be done to reinvigorate local projects that supported families at court to help prepare them for their loved one's imprisonment and to ensure they know what to expect on a visit.
- Families to be involved in sentencing planning. But distance from home impedes this.

2. Dealing with mental illness of young adults in the criminal justice system

Information sharing

- There are problems with the flow of medical information into the prison after someone is remanded or sentenced to custody. How can this problem be addressed?
- The flow of information between prisons and within a prison is unreliable, important information is not being shared.
- IT systems don't work properly.
- Systems to arrange for clinician to clinician contact are difficult, the IT doesn't allow for skype.
- There is no time to look at a patient's historical clinical information when a 15 minute appointment is all that is allowed. System 1 doesn't use the necessary coding to make it easy to read a medical history.
- There is poor summarisation of prisoner medical records and a poor attitude to prisoners as patients.
- Medical practitioners in prisons could be more research friendly and find out what is going on and how this is manifested in the prison population.

Mental Health treatment, training and interventions

- There is no specific training for prison staff around mental health nor around young people.
- Staff may be presented with violent, disordered young people they don't have the training and are under resourced to look after them, this needs investment.

- Lack of staff is leading to people not being able to access visits, telephones and the library, they are spending too much time in their cells which is affecting their mental health.
- The political climate is for people with mental illness to be sent to prison, they are becoming the new asylums; people who are mentally ill should be treated in the community.
- Prisoners who are mentally ill and should have been sectioned are waiting too long for a mental health bed, sometimes they are very difficult for staff to cope with and may be held in Segregation.
- Mental health In-Reach is very good but there is also a need to lower level support such as CBT, counselling and other primary care level interventions.
- The integrated mental health pathway should include these lower level interventions.
- Primary Care in prisons is inconsistent and there is very little capacity in the system to learn from what has gone wrong. The task driven approach to healthcare means that young people are not given sufficient clinical analysis to identify their individual needs and it is difficult to get a speedy diagnosis and the help needed.
- The Clinical Review which the PPO commissions following a death in custody is a good process and there is clear guidance for prison healthcare to review their own decisions. However this needs further development by NHS England, they are aware of this and the need to have a thematic review to highlight issues such as inconsistency and the sharing of these Reviews.
- 88% of women on an ACCT were still self-harming.
- The ACCT process focuses more on process than purpose.
- Young prisoners may be traumatised by the death or near death of someone in prison and they may not be equipped to deal with it.
- There is confused and inconsistent commissioning of prison healthcare.
- GPs working in prisons need to be vocationally committed to their work and commit to the job.

3. Activity and regimes

- Very difficult to recruit officers as well as to contracted organisations (e.g. education) to geographically isolated prisons.
- Classes are cancelled at short notice because staff numbers are so tight or because contractors are not able to provide a substitute if their teacher is off sick.
- The national policy behind OLASS contracts is poor in that it provides for prisoners improving low level skills and obtaining a number of certificates in areas that are not

valued by employers and education providers in the community. Longer term prisoners and those who come in and out repeat the same qualifications and there is not enough progression.

- IMB: Attempts to collect information on purposeful activity. This shows that the official data recorded by prisons and contractors is at odds with what is really happening. There is a knock on effect of having no activity, which some attendees thought led to higher level self harm and violence. There are also difficulties because those who have debts on the wing are not able to earn enough money to re-pay.
- Consider risks associated with psychoactive substances – particularly popular amongst younger prisoners.
- The low staff numbers in prisons accentuate risks of officer corruption because they become more vulnerable to manipulation from corrupt staff.
- Leadership is key and governors need to consider the whole span of training required for officers to work effectively with young people. For example, training in MMPP or C&R would not be sufficient to enable staff to work effectively with challenging behaviour without resort to restraint. They need to know how to develop positive relationships with prisoners and with colleagues. This often falls to an exceptional governing governor but it should be designed into the system.
- Prisoner time out of cell at present is often squeezed to less than one hour per day and so they will prioritise showers and phone calls over other options.
- Access to activities should not be linked to IEP, particularly for this age group, if you are attempting to reduce risk of reoffending then the most disruptive young people need to be positively engaged and occupied.
- The risk of running on an 'emergency' regime while they wait to recruit staff is that the management team and officers will start to normalise the poor level of service they are offering.

4. The importance of prisoner-staff relationships

- The saddest thing is the breakdown of the Personal Officer scheme, prisoners don't know if they have a personal officer and there is no one and no time to talk to. Staff and prisoners don't know each other.
- The '5 Minute Intervention' / Every Contact Counts practice has changed staff attitudes and it did seem to be effective but staff still don't have enough time for this.
- The benefits of training staff to communicate with young people would be huge, they need particular skills to support and respond to young people. LEAP told the meeting that the response to the training they had done at Chelmsford had been a 25% reduction in prisoner/staff incidents and 53% reduction in prisoner/prisoner incidents. However, there was no budget for this work going forward.

- Some staff find young people difficult and have a problem with them, this is a systemic and environmental issue and can lead to staff resenting the development and improvements that young people can make.
- Staff/ prisoner relationships can be poor due to fear; they don't know how to deal with the young person, they don't feel supported to know how to respond to mental health issues, day-in-day-out they are dealing with self-harm and worrying about that to do in the 5 minute intervention.
- Conflict is a tool of power and staff may escalate a situation to a conflict so that they can exercise their power to break up a situation and put people in their place. There needs to be an analysis of the culture that allows this to happen.
- There is some ignorance among staff about religious, race, cultural and sexual issues, sometimes this is used to 'wind-up' young people.
- Individuals who are good can be inspirational and change the way people's issues are treated, it is up to the leadership to take their work forward and use these great individuals.
- Where there is good leadership in the prison young people are trained and developed, they are more productive and successful and can be encouraged to take on leadership roles themselves. Good leadership can be transformative.
- There is a lot of good practice in the prison estate but staff don't stay around long enough in one place to keep it going. Example of HMP Leeds ways of working before benchmarking: governor decided to have association and prisoners out of cell as the default. This led to improved relationships with officers and their family as well as reduced violence.
- Relationships between staff and prisoners in the segregation unit are often good as there are more staff around and they have time to talk.
- Gang membership should not be dealt with by just keeping them apart.
- Gang affiliations are not understood by staff. They are containing the risk by segregating prisoners but a youth work approach would be to encourage mediation and breaking down barriers. The fear of violence may increase with segregation.

6. The role of families in maintaining the mental health and wellbeing of young adults in custody

- There are examples of good practice. The 'Story Book Dads' scheme in which a prisoner reads a story on to tape for their child is a good VCS intervention. At HMP Parc (which is a private prison) they use Skype for visits. Family Man intervention by Safeground (see: <http://www.safeground.org.uk/>) is impacted on by distance from home. [Note: email from PACT offering to provide information about their services in working with families of prisoners, in follow up to suggestion made by attendee from Criminal Justice Alliance.]

- Positive and effective projects for working with families are not supported at a national level in terms of policy and commissioning. [Note: ask NOMS about their position on commissioning family based interventions and policy on encouraging family contact?]
- Previous good practice at prisons holding family forums which were an opportunity for prisoners and their close family to attend a meeting with the governor to discuss key points.
- Families find it difficult to get information about the wellbeing of prisoners and are not asked for information that could help keep them well and safe. Families cannot speak to clinicians.
- A family contact worker/family liaison role was previously in operation in a number of prisons. [Note: this was never a requirement in national policy but prisons had local funding arrangements for VCS workers to deliver projects in prisons to encourage family contact. This has fallen away.]
- Engaging young people and their families has particular benefits as well as requirements – e.g. younger siblings and being young parents.
- Membership of gangs may have an impact on safe guarding and this can have an effect on families and family contact.
- Discussion about the difficulties of visiting prisons – not conducive to building positive parent-child relationships as static tables and chairs and no resources for playing with children except at specialist days (which are often linked to IEP status).
- Additional problems at visits such as cultural insensitivity. Attendee mentioned example of Spain where social visitors are not searched and all security activity focused on prisoners leaving the visits area. This helps preserve dignity for families.
- Resettlement needs to take place near to where the prisoner's family lives.

6. Other points made

- Howard League said there were issues about sexual behaviour in prisons can be problematic, prisoners may not want to talk and there is reluctance to call in the police when there has been a sexual assault. Sexual violence is used as a tool of power and control exacerbated by the macho environment in prisons. There is a perception that young black people are homophobic and this can affect who they share a cell with.
- The importance of intimacy is not acknowledged in prisons and concerns prisoner/prisoner and staff/prisoner relationships and is not just about sexual contact.
- Young men in the community are reluctant to get the help and support they need for care, the same template for care is used if you are a 60 year old or an 18 year old.

- Why does CCTV never work!

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