

East Sussex Offender Health Needs Assessment

Executive Summary

Introduction

1. This Offender Health Needs Assessment has been completed by analysing information from a range of different sources including:
 - Desk research into national and local policy and context for offender health
 - A questionnaire completed by adult offenders
 - A questionnaire completed by young offenders and those at risk of offending
 - Stakeholder interviews

East Sussex Offender Population

2. East Sussex has a sizable offender population with more than 500 prisoners housed in HMP Lewes at any one time. Within this population there is an over representation of individuals from BME backgrounds. The prison population also includes a significant proportion of individuals who have no fixed abode. Expansion of HMP Lewes will increase then number offenders within East Sussex.
3. There are approximately 1,100 offenders in the community. There is significant prevalence of mental health problems, dyslexia, learning disability and restricted mobility amongst the population of offenders in the community. Sentencing trends are likely to increase the number of offenders in the community.
4. An aging population within the county is expected to result in an increasing number of older offenders. Similarly, an increasing number of offenders from various BME groups will result in an increase the prevalence of particular illnesses within the offender population.

Health Issues on Arrest

5. Sussex Police have a 30 year contract with Reliance Medical Services for medical services.
6. Doctors can give a referral letter to the detainee; however a direct referral cannot be made as the recommendations are based on the information given by the offenders.
7. When an individual is taken into custody medication is withheld for 24 hours. Police do not have access to NHS records; however attempts are made to try to contact the person's GP to verify medication.
8. The Drug Arrest Referral Scheme in the police station enables immediate access to drug intervention and support services.
9. Between the hours of midnight and 08:00 the Police rely on the Emergency Duty Service to provide an appropriate adult if a service is required.
10. East Sussex County Council has a contract with Catch 22, the children's charity, to provide volunteer appropriate adults for children and vulnerable adults in custody.

Physical Health

11. Offenders often engage in activities which are detrimental to their physical health including smoking, drug (including injecting drugs and the associated risk of various infections) and alcohol abuse. Poor mental health may also lead to neglect of physical wellbeing (e.g. poor diet and lack of exercise).
12. A number of conditions are linked to the activities leading up to incarceration, incarceration itself and the deprivation experienced by many offenders.
13. Access to primary health care and dentistry is often difficult for offenders.

14. A number of primary and secondary health services are available to offenders within HMP Lewes. Health promotion activity is undertaken but has been highlighted as inadequate.
15. A number of primary health services are in place within the community providing an alternative to traditional GP services, however capacity is limited.
16. Concerns were raised in consultation around access to GPs, literacy and understanding of health promotion and service access messages. Transfer of records was highlighted as an area of concern in relation to continuity of care.
17. A number of key activities could contribute to improving the physical health of offenders in East Sussex. These include improving access to, and assistance to engage with, primary health care.

Mental Health

18. 90% of inmates have at least one mental health problem. Mental health disorders are exacerbated by the prison experience and possible drug withdrawal. There is evidence to suggest that diversion of people with mental health problems away from the prison service may have benefits, both for the individual and for efficiency savings.
19. For many offenders mental health problems are combined with substance abuse issues. There is evidence to suggest that both problems need to be tackled at the same time.
20. A number of services are in place in East Sussex to address the mental health needs of offenders:
 - A mental health in-reach service is provided in HMP Lewes by the Sussex Partnership NHS Trust.
 - The Court Assessment & Diversion Scheme.
 - Early Intervention in Psychosis Team.
 - Crisis Response & Home Treatment, Assertive Outreach Teams.
21. Depression, ADHD, psychosis and bipolar disorder are the main presenting mental health issues to these services.
22. Forensic and secure facilities are managed by the Trust. There is a medium secure unit, a low secure unit, a women's medium secure unit and an open residential facility for women.
23. Consultation with professional stakeholders and offenders has identified a number of perceived gaps in service that they felt could be filled. A number of recommendations have resulted from the work undertaken, including revision of protocols, co-location and closer working between professionals.

Substance Misuse

24. Offenders tend to have much higher rates of drug use than the general population. Substance misuse is often co-concurrent with mental disorder. In addition, many substance misusers suffer from multiple addictions, such as a drug addiction with secondary alcohol addiction which makes treatment more complex.
25. There are many programmes and initiatives available that provide support to offenders to help them reduce their drug use. These include a range of substance misuse services provided within HMP Lewes; however detoxification in prison without adequate follow-up support increases the risk of relapse. There are a number of drug services for offenders within the community.
26. There are a number of identified gaps in relation to the provision of service to support those with alcohol problems.
27. Key areas for improvements include improving access to alcohol services and ensuring continuity of treatment for those leaving prison and entering the community.

Learning Disability & Learning Difficulties

28. People with learning disabilities or learning difficulties often have trouble complying with community-based orders, often through lack of understanding. Up to 30% of the prison population may have learning difficulties, although there is no robust system in place for gaining insight into exact figures.
29. People with learning disabilities are at particularly high risk from a number of health conditions.
30. People with learning disabilities are at risk of continued offending because of unidentified needs and consequent lack of support and services. They are unlikely to benefit from conventional programmes designed to address offending behaviour.
31. Consultation with professional stakeholders confirms that there are areas of service provision for people with learning disabilities that need addressing in East Sussex. These gaps need addressing through better identification of offenders with learning disabilities and learning difficulties, and provision of tools to direct them to appropriate support.

Women Offenders

32. Women make up 6% of the prison population. Just over 10% of sentenced women received a community sentence compared to 15% of sentenced men. The health status of these women was much poorer than the general population; behaviours such as smoking, drug use and participation in the sex industry contribute to this ill health.
33. Research suggests that diversion of vulnerable women who are not serious or dangerous offenders from custody is preferable.
34. Further work is required in East Sussex to better meet the needs of women offenders.

Older People

35. There are growing numbers of older prisoners as a result of an ageing population, trends in sentencing and improvements in methods of crime detection. There is therefore an increasing issue around the provision of services for offenders with health problems associated with advancing age.
36. Strong partnership working between all sections of the criminal justice system, health, social care and welfare providers is required. It is the recommendation of this report that The Department of Health tool kit for older prisoners should be implemented in East Sussex.

Black and Minority Ethnic groups (BME)

37. 4.7% of East Sussex residents are from a BME group, compared to 16% of the population in HMP Lewes.
38. The proportion of BME groups in East Sussex is also expected to grow. Ethnicity can be an important factor for planning, for instance certain BME groups are more likely to suffer from particular conditions.
39. Nationally, PCTs need to do more to ensure equal access to healthcare and to identify the needs of BME groups more effectively.

Young Offenders

40. Young offenders often suffer from similar health problems as their adult counterparts and are a particularly vulnerable group. Their needs span a range of physical, emotional and mental health areas and substance misuse problems.
41. One quarter of the young people on crime-prevention schemes, community orders or custodial sentences had some form of disability.
42. Research suggests that a multi agency approach is necessary to address the health needs of young offenders. The risk of becoming an offender starts early in life, and issues such as learning difficulties, behaviour disorders, abuse, chaotic family lives, school exclusion and anti-social behaviour can lead to offending.

43. Services for, or accessible by, young offenders in East Sussex include:
 - YOT – including provision of a YOT nurse
 - Mentoring services
 - Substance Misuse services
 - Community Adolescent Mental Health service
 - Sexual Health services
 - Family Support Services
44. Consultation with professional staff and young offenders identify engagement of young offenders in a number of activities that are detrimental to health, including smoking, drug taking, poor diet and exercise.
45. A number of barriers to engagement were highlighted by professionals, including previous poor experience of services as well as more practical issues such as the costs of visiting or purchasing services.

Housing

46. Housing is acknowledged as a critical issue for offenders. This is both in terms of the risk of reoffending and risk to health. There are significant unmet housing needs amongst the offender population.
47. Staff reported difficulties in registering homeless people with GPs.
48. There is a concern about the use of inappropriate B&B accommodation for young people; that it is of poor standard, is too far from a young person's support network and that they are extremely vulnerable to pressures from others living in the accommodation, who may for example, be drug dealers/users or paedophiles.
49. According to research, a range of accommodation and support is needed, from 24 hour supported accommodation through to general needs housing with floating support.
50. There is a YMCA and Foyer in Eastbourne offering accommodation for young people age 16 – 30, and CRI provide a Youth Accommodation Support Service.
51. The PCT Homeless Health Team in Eastbourne supports both young people and adults. The team of two nurses and two health visitors work with street homeless, people in temporary accommodation (including B&B) and people in multiple occupation.
52. A number of services are provided to attempt to meet the health needs of those who are homeless.

Cross Cutting Issues

53. There are a number of cross cutting issues that apply across each of the major areas. These are:
 - The need for flexible services to meet the needs of offender's chaotic lifestyle
 - The need for good partnership working
 - The need to take account of the poor literacy levels amongst some offenders
 - The requirement to consider the needs of offenders within the context of work being undertaken around deprived communities
 - The requirement to address the needs of those who are sentenced to less than twelve months