The role of the local authority in addressing health inequalities in people in contact with the criminal justice system

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Promoting Excellence in UK Offender Health Provision 2016
Health inequalities in persons in contact with the criminal justice system

- Drug and alcohol issues (*Patel Report 2010*)
- Mental health – 90% of prisoners (*Singleton et al 1998*)
- Chronic conditions (physical health) (*Wilper et al Am J Public Health 2009*)
- Infectious diseases - TB (*Fazel et al Lancet 2011*)
What happens in early life

- Poor educational attainment (52% male sentenced prisoners had no qualifications)
- History of school exclusion (almost half male sentenced prisoners)
- History in care (27% looked after children)
- Homelessness (1 in 3)
- Unemployment (67% in 4 weeks prior to imprisonment)
  
  Reducing Re-offending in ex prisoners (Social Exclusion Unit 2002)
- Bereavement
- Traumatic brain injury (Prof Williams Repairing Shattered Lives 2012)

“What you dream about?”
“Whatever it is I want ‘an don’t have. That’s why they call ‘em dreams”

Always Outnumbered, Always Outgunned © Walter Mosley 1997
Designing an efficient commissioning framework – who does what?

<table>
<thead>
<tr>
<th>Drug and alcohol services in the community</th>
<th>GP practices</th>
<th>Primary mental health (IAPT)</th>
<th>Mental health promotion</th>
<th>FMHP courts and police cells L&amp;D</th>
<th>FMHP probation</th>
<th>Secondary mental health</th>
<th>Tertiary mental health</th>
</tr>
</thead>
<tbody>
<tr>
<td>LA local authority</td>
<td>NHSE - NHS England &amp; CCG - Clinical Commissioning Groups</td>
<td>CCGs</td>
<td>LA</td>
<td>NHSE</td>
<td>CCG or LA</td>
<td>CCG</td>
<td>NHSE/CCGs</td>
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<tr>
<td>Hospital care</td>
<td>Sexual health and family planning</td>
<td>Prison healthcare</td>
<td>Police healthcare</td>
<td>Tertiary hospital care</td>
<td>HIV care</td>
<td>HIV prevention</td>
<td>Personality disorder projects</td>
</tr>
<tr>
<td>CCGs</td>
<td>LA</td>
<td>NHSE</td>
<td>Police</td>
<td>NHSE</td>
<td>NHSE</td>
<td>LA</td>
<td>National Offender Management Service</td>
</tr>
</tbody>
</table>
Key barriers to engaging with healthcare services

- Lack an address / identification (NFA/homeless)
- Communication difficulties

Office of the Chief Analyst 2010
(Healthcare for single homeless people)
- Proof of address
- Poor engagement/chaotic lifestyles
- Some will not seek assistance as other needs surpass health

“So? Just cause I don’t have no phone then I cain’t work?”

Always Outnumbered, Always Outgunned © Walter Mosley 1997
Building on existing partnerships – Local authority role and 7 pathways to reducing reoffending

<table>
<thead>
<tr>
<th>Seven pathways</th>
<th>Local authority role</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accommodation and support</td>
<td>Housing – specialist support</td>
</tr>
<tr>
<td>Education training and employment</td>
<td>Regeneration and skills agenda, employment</td>
</tr>
<tr>
<td>Health</td>
<td>Mental health FMHP, GP registration</td>
</tr>
<tr>
<td>Drugs and alcohol</td>
<td>Specialist community services</td>
</tr>
<tr>
<td>Finance, benefits, and debt</td>
<td>Credit unions, housing benefit (until universal credit)</td>
</tr>
<tr>
<td>Children and families</td>
<td>Troubled families, Early intervention, Children’s public health (public health nursing 0-19 years)</td>
</tr>
<tr>
<td>Attitudes thinking and behaviour</td>
<td>Mental health promotion, confidence</td>
</tr>
</tbody>
</table>
Providing support for people leaving the criminal justice system and entering the community – what are the risks?

- Drug and alcohol overdose (Strang et al J Urban Health 2013)
- Mental health – increased suicide risk after release (Pratt, Piper, Appleby & Shaw Lancet 2006)
- Chronic conditions (Wilper et al Am J Public Health 2009)
- Infectious disease control – higher risk of TB, blood borne viruses (Fazel et al Lancet 2011)
- Continuity of care...
Providing support for people leaving the criminal justice system and entering the community – GP registration

- Estimates vary – 50% unregistered (*Social Exclusion Unit 2002*)
- Use of emergency 24 hour services like A&E, walk in centres
- Probation, Drug intervention programme (DIP) and youth offending clients (YOT)
- Use of probation office as ‘proxy’ address
Providing support for people leaving the criminal justice system and entering the community – GP registration in London

- NHSE funded posts hosted by LBS
- **Aim:** **GP registration for offenders in all London boroughs**
- **Through the Gate pathways**
- Relevant to all vulnerable clients
- Key partners: CRC, NPS, CCGs, LMC, community safety partnerships, NOMS
Providing support for people leaving the criminal justice system and entering the community – forensic mental health practitioner

- Probation clients in community
- Estimate 78% of male remand, 64% male sentenced have a Personality Disorder (Singleton *et al* 1998)
- FMHP for community clients funded by public health in LB Sutton
- Referrals to specialist mental health services
Providing support for people leaving the criminal justice system and entering the community – women’s hub

- 9000 women enter prison each year
- Approx two thirds have children under 18 years
- Fewer than 1 in 10 women secure a job on release (*Prison Reform Trust*)
- Sutton has a small number of women under the care of probation
- **What do we want to achieve?**
  - Re-engagement with health services
  - Visits with probation officer
  - **High ambitions** – back to work
  - Self esteem and empowerment
  - Trauma informed environment
Providing support for people leaving the criminal justice system and entering the community – what needs to happen?

<table>
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<tr>
<th>Seven pathways</th>
<th>What needs to happen</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accommodation and support</td>
<td>A place to stay on day one</td>
</tr>
<tr>
<td>Education training and employment</td>
<td>Support to get back into work and/or training/education</td>
</tr>
<tr>
<td>Health</td>
<td>GP registration, continuity of care</td>
</tr>
<tr>
<td>Drugs and alcohol</td>
<td>Seamless pathway back into specialist community services from day one</td>
</tr>
<tr>
<td>Finance, benefits, and debt</td>
<td>Benefits to be switched back on to allow a successful transition to work</td>
</tr>
<tr>
<td>Children and families</td>
<td>Access to early intervention and support to families, women’s hubs</td>
</tr>
<tr>
<td>Attitudes thinking and behaviour</td>
<td>Community support e.g. HMYOI Feltham community chaplaincy model, forensic mental health practitioners</td>
</tr>
</tbody>
</table>

- **Think...health inequalities**
- **Mainstream services to include people in contact with criminal justice system**
To end

“I stopped now. I been out of prison eight years and more. I been solid. I got a job and an apartment. I got friends and there is this teenage boy I been helping. I know you married, T. I know that because you wanted it and you always did what you wanted to do.”

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Links and contact details

- **Balancing Act (Revolving Doors)**
  
  www.**revolving-doors**.org.uk/documents/balancing-act/1balancing-act.pdf

- **Addressing health inequalities among people in contact with the criminal justice system**
  A briefing for Directors of Public Health

- **Linking probation clients with mainstream health services: Experience in an outer London borough**
  - Lang et al, (Probation Journal October 2014)

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