



An Evaluation of the Care of At Risk Prisoners Project

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Background

- ❖ The Care of At Risk Prisoners Project
 - ❖ Devised by HM Prison Service/ Prison Health
 - ❖ Designed to improve the care of 'vulnerable' prisoners
 - ❖ Suicide
 - ❖ Self Harm
 - ❖ Mental Illness
 - ❖ Substance Misuse

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Background

- ❖ Areas of Work
 - ❖ Screening at Reception
 - ❖ Care Pathways
 - ❖ Care Programme Approach (CPA)
 - ❖ Assessment
 - ❖ Care Plan
 - ❖ Key Worker
 - ❖ Review
 - ❖ Documentation
 - ❖ Information Sharing
 - ❖ Training

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PH PRISON HEALTH RESEARCH NETWORK

Initiatives

<u>Before</u>	<u>After</u>
<ul style="list-style-type: none">❖ F2052SH<ul style="list-style-type: none">❖ Multi-disciplinary care❖ Initiated by any staff❖ Review and Support Plan	<ul style="list-style-type: none">❖ Assessment, Care in Custody, Teamwork (ACCT) <p>As F2052SH PLUS</p> <ul style="list-style-type: none">❖ Care Coordinator❖ Full assessment❖ Care Planning❖ Appropriate involvement of agencies❖ Meaningful interactions

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Sites

- ❖ 5 Pilot Sites ('Local' prisons)
 - ❖ HMYOI Feltham
 - ❖ HMP Holme House
 - ❖ HMP&YOI Low Newton
 - ❖ HMP Wandsworth
 - ❖ HMP Woodhill
- ❖ 'Before and After' design

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Evaluation 1

❖ **Care Pathways**

- ❖ 500 health care records
- ❖ Screening results
- ❖ Referral/Contact/Intervention in first four weeks
- ❖ Before and after implementation of initiatives

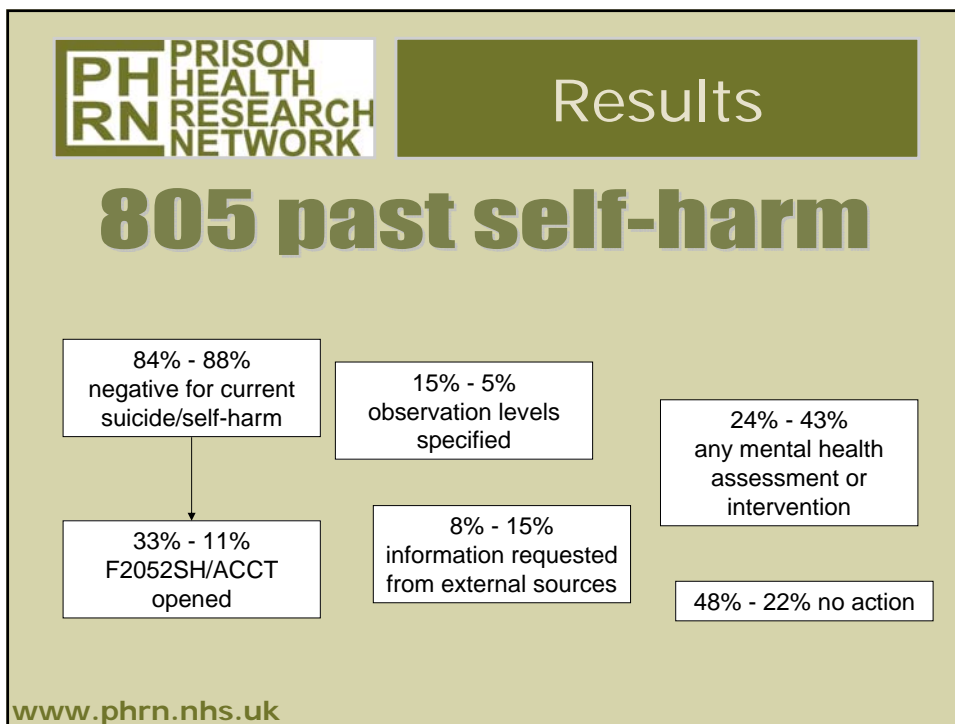
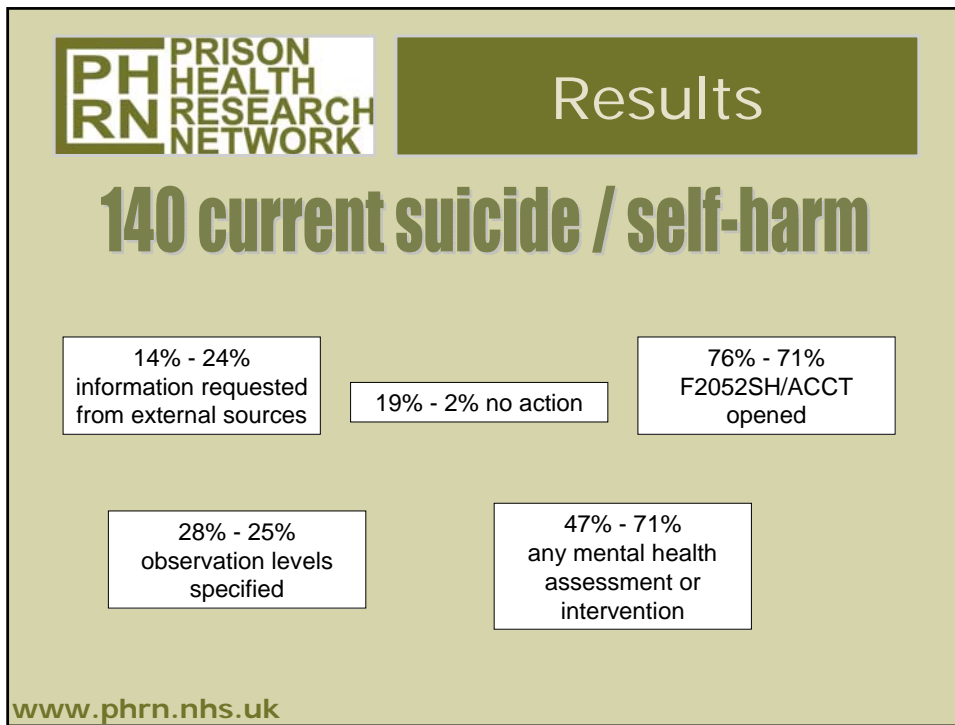
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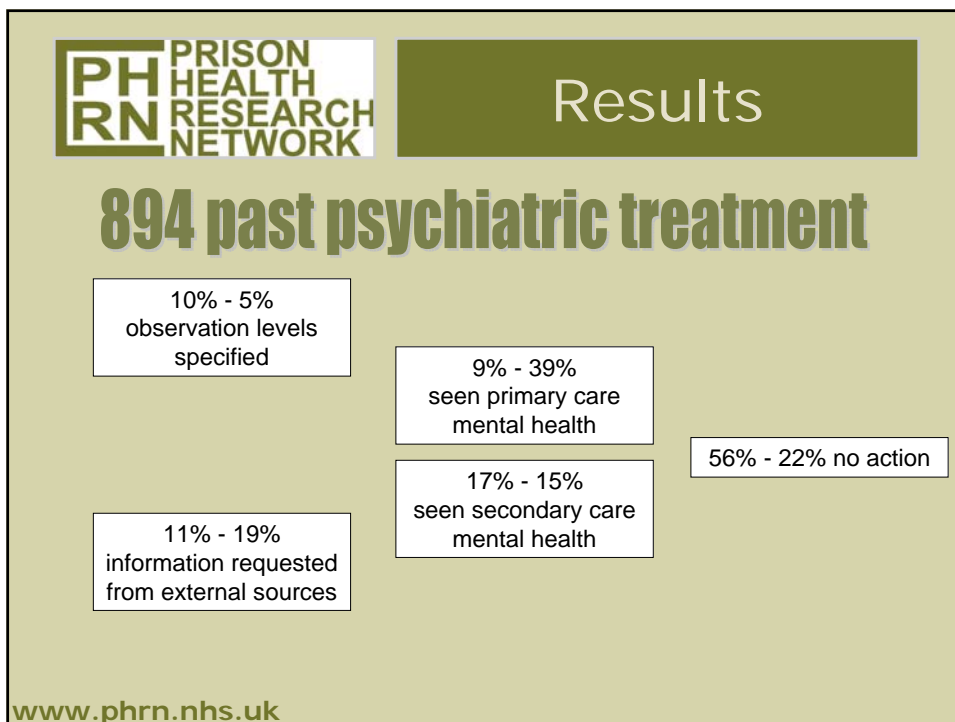
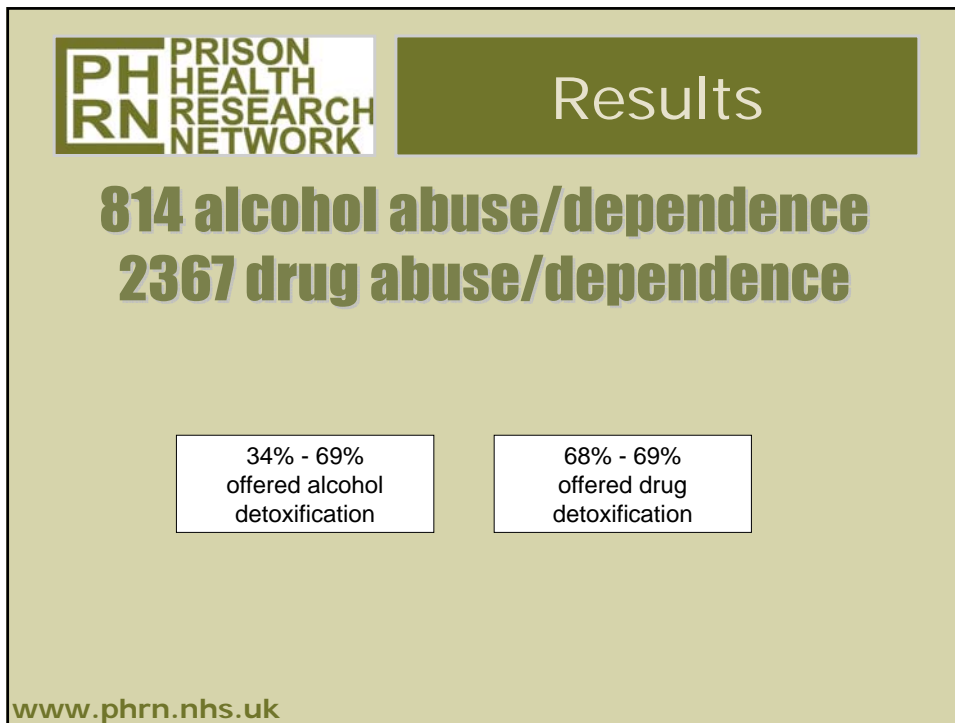
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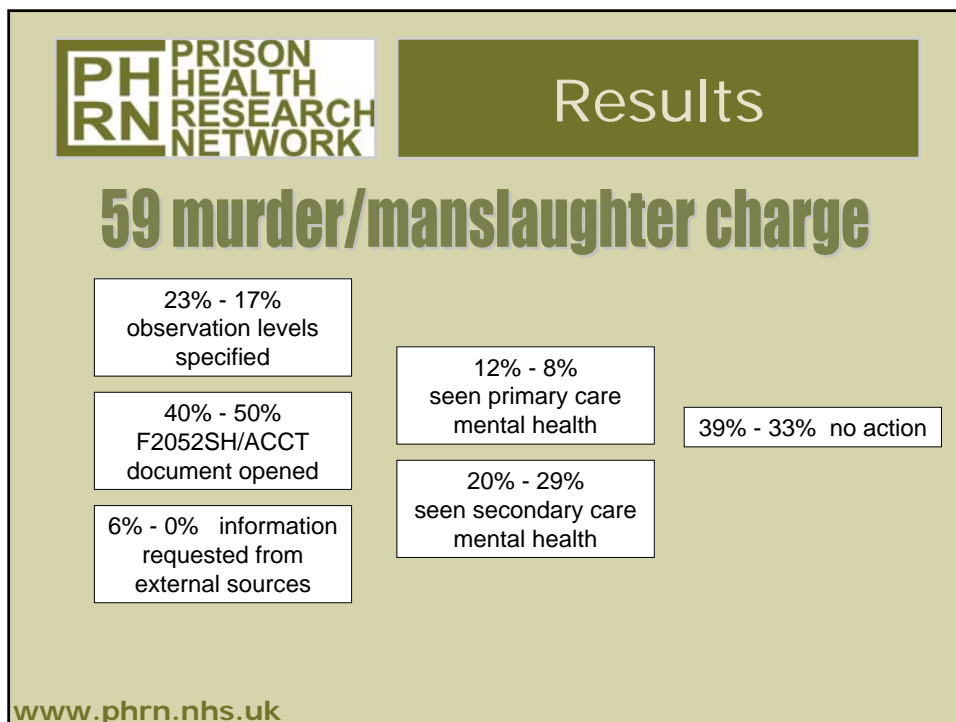
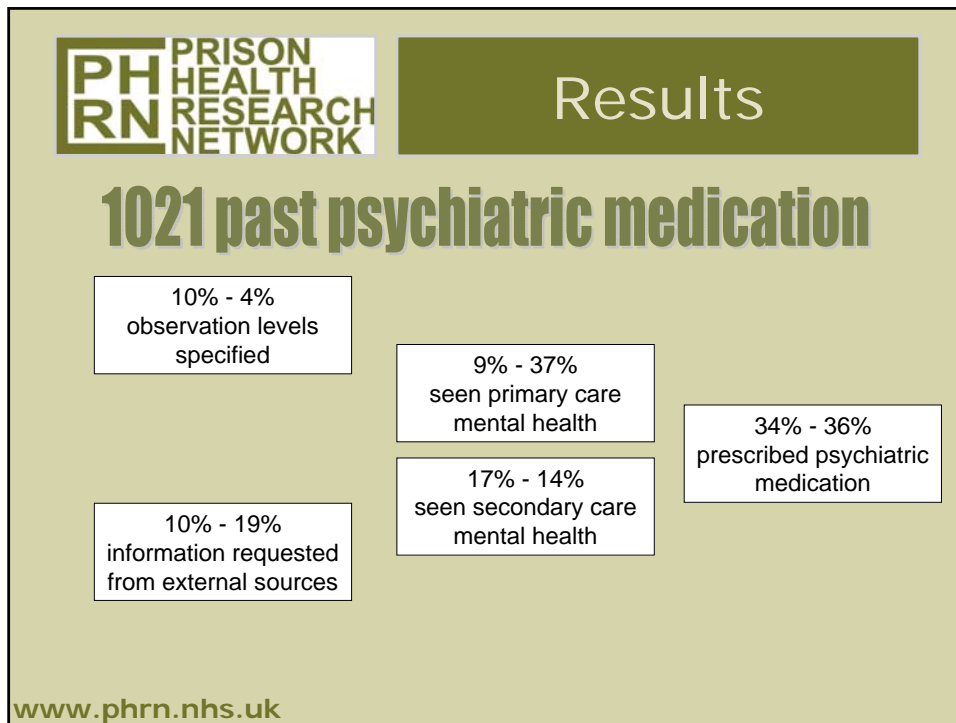
Results

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graph TD; A[4664 notes audited] --> B[3% current suicide/self-harm]; A --> C[17% past self-harm]; A --> D[20% - 18% psychiatric treatment]; A --> E[23% - 21% psychiatric medication]; A --> F[20% - 14% alcohol]; A --> G[51% drugs]; H[1% murder/manslaughter];
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Summary

❖ Reception Tracking

- ❖ More appropriate identification of suicide risk
- ❖ Much greater use of primary care
- ❖ More contact with outside services
(but not enough)
- ❖ More alcohol detoxification

- ❖ Problem of no screen for **current** mental illness

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Recommendations

- ❖ Referral pathways to mental health services needs improvement
- ❖ All high-risk cases should be assessed and managed
- ❖ All those with current suicidal ideation should have open ACCT
- ❖ Information gathering needs improvement
- ❖ Include screen for mental state

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Future Directions

- ❖ Senior PhD Configuration of Mental Health Services
- ❖ Effect of Environment
- ❖ Pathways
- ❖ In-reach Evaluation
- ❖ Critical Time Intervention
- ❖ Adolescent Care Pathways
- ❖ MHA Transfers

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