

DERBYSHIRE HEALTH AND WELLBEING BOARD6th February 2020**Report of PCC Hardyal Dhindsa****Issues relating to Females in contact with the Criminal Justice System****1. Purpose of the report**

To raise for discussion issues arising from a 'Females in contact with the Criminal Justice System' event that was held in October 2019 to assess what needs to be done in Derbyshire to move towards a 'whole system approach' for female offenders in line with the national Female Offender Strategy.

2. Information and analysis

In October 2019 Derbyshire's Police and Crime Commissioner Hardyal Dhindsa funded a 'Females in contact with the Criminal Justice System' event to assess what needs to be done in Derbyshire to move towards a 'whole system approach' for female offenders in line with the national Female Offender Strategy. The Strategy aims are to ensure:

- Fewer women coming into the criminal justice system as a result of less offending, appropriate community-based support, earlier intervention, more liaison and diversion and more support for women in the community.
- Better conditions for those in custody by improving rehabilitation, improving family ties, reducing rates of self-harm and better supporting transition back into the community.
- Local partners will feel empowered to design approaches tailored for the specific needs of women resettling into Derbyshire.

A multi - agency 'Women and Girls in the CJS Strategic Group' is taking forward the recommendations from the day. However, there are a number of issues to raise with you as the Strategic Group is not empowered to resolve these.

A) DIFFICULTIES WITH THE THRESHOLD FOR MENTAL HEALTH/GENERAL HEALTH SERVICES AND WAITING LISTS

Many female Derbyshire offenders have entrenched difficulties that stem from unresolved trauma that has then developed into some form of depression, anxiety or other developmental/behaviour disorder or other mental ill health. National Probation Service and Community Rehabilitation Service staff are often advised to refer to primary care - the IAPT services initially such as Trent PTS or Talking mental health

– this service offers a 6 to 8 weeks counselling session tailored to an individual's needs. However complex cases, which can often include women, will then be told early on in their sessions that they will need more intensive long-term treatment and they will be referred to the secondary care team.

The process to access the IAPT services can take up to 4 to 6 weeks to begin, then people are told they need secondary care and this process can take up to 6 months for them to be assessed (this appears to be a city and county wide issue). During this time their needs/risk factors are not being met and their behaviour continues and this has often resulted in them being recalled back to prison or committing a further offence as their risk and treatment needs are not being met during this waiting period when they are left in limbo – therefore the risk of harm/reoffending remains. This is a vicious cycle that many offenders find themselves in as these services are not available in prison.

B) MENTAL HEALTH TREATMENT ORDERS

The limited use of MHTRs is a national issue that has been discussed locally to try and reach a resolution for at least seven years. National Community Sentence Treatment Order pilot projects that are taking place in courts throughout the country (the nearest being Birmingham). Some appear to have a degree of funding attached to them, which means they are able to benefit from a resource that is distinct to the offender cohort. Sadly, this is not available in Derbyshire. Currently the outcome of these pilots is awaited before any further guidance is forthcoming at a national level. There are meetings taking place locally to try to progress this issue but the lack of any funding for dedicated provision has impeded this. Joint work with NHS England is needed to take this further.

C) LACK OF PERSONALITY DISORDER SERVICES

Research shows that nationally 60% of prisoners have a personality disorder and yet there is no commissioned service provision. The newly formed Forensic team has limited capacity and funding to take on PD work and the joint MOJ/NHS scheme is only for screening and case formulation, not treatment.

D) CURRENT ISSUES WITH CHILDREN'S MENTAL HEALTH SERVICES (CAMHS) – LONG WAITING TIMES, STRICT PROCESS AND LACK OF FUNDING.

A service is currently out for tender regarding the services for children and young people and in particular the Emotional and Mental Health service for children in care. The new trauma informed service will be in place from April 2020 and will benefit children in the care of both Derbyshire County Council and Derby City Council. It will be a multi-level model, as requested by young people (not over-medicalised). The specification includes support for carers as well as direct support for children. The specification includes the importance of recognising that these are 'children first' who deserve the same entitlement as any other child to support to fulfil their potential. The needs of care leavers are included. Assurance that the new arrangements will provide sufficient improvement in relation to Children's Mental Health issues is desirable.

E) LACK OF FEMALE ONLY APPROVED PREMISES HOSTELS WITH SUPPORT IN THE EAST MIDLANDS.

There is only one female Approved Premises hostel with support that can be accessed by female offenders from Derbyshire and this is out of the area. There is national work ongoing to increase the number of AP beds, including for women. If health partners in the East Midlands were to indicate a willingness for a joint approach, it may be possible to secure some additional bed space with mental health support as developed elsewhere in the female estate.

F) LINKS TO THE HEALTH AND WELLBEING STRATEGY

The points raised are linked to three of the priorities in the Health and Wellbeing Strategy these being:

- Enable people in Derbyshire to live healthy lives.
- Build mental health and wellbeing across the life course.
- Support our vulnerable populations to live in well-planned and healthy homes.

RECOMMENDATIONS

The Health and Wellbeing Board is asked to:

- i) Receive the report presented by the Police and Crime Commissioner on behalf of Derbyshire Criminal Justice Board.
- ii) Comment on the issues raised by the report.

Hardyal Dhindsa, Derbyshire Police and Crime Commissioner and Chair of Derbyshire Criminal Justice Board