

Prison Reform Trust response to the Communities and Local Government Committee inquiry into adult social care—August 2016

The Prison Reform Trust (PRT) is an independent UK charity working to create a just, humane and effective penal system. We do this by inquiring into the workings of the system; informing prisoners, staff and the wider public; and by influencing Parliament, government and officials towards reform. The Prison Reform Trust provides the secretariat to the All Party Parliamentary Penal Affairs Group.

The Prison Reform Trust's main objectives are:

- reducing unnecessary imprisonment and promoting community solutions to crime
- improving treatment and conditions for prisoners and their families.

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Is the funding available for adult social care sufficient?

1. We welcome the opportunity to make a submission to the committee on this subject. We would particularly like to highlight the need for continued development of social care provision to identify and support people with social care needs in prison and approved premises, as required by the Care Act 2014, and the importance of this being taken into consideration for funding purposes. Whilst there is little comprehensive information about the scale of this need, the information we do have about the population in custody suggest it is likely to be extensive. 36% of prisoners are estimated to have a physical or mental disability—compared with 19% of the general population.¹ Six out of 10 older prisoners (59%) report having a longstanding illness or disability.² 20–30% of people in prison are estimated to have learning disabilities or difficulties that interfere with their ability to cope with the criminal justice system.³
2. Our Advice and Information service regularly hears from people with physical or mental health problems who are not receiving the support they feel they need, and who have little idea how to access it. It is not uncommon to speak

¹ Ministry of Justice (2012) Estimating the prevalence of disability amongst prisoners: results from the Surveying Prisoner Crime Reduction (SPCR) survey, London: Ministry of Justice

² Omolade, S. (2014) The needs and characteristics of older prisoners: Results from the Surveying Prisoner Crime Reduction (SPCR) survey, London: Ministry of Justice

³ Loucks, N. (2007) No One Knows: Offenders with Learning Difficulties and Learning Disabilities. Review of prevalence and associated needs, London: Prison Reform Trust

to individuals who believe they have social care needs, but have not received a social care assessment and are unclear about referral mechanisms including how to refer themselves.

3. The Care Act 2014 created new responsibilities for local authorities to respond to the social care needs of people living in prison and approved premises in their area. It applies to adult prisoners and young adults aged 18 and over and came into force in April 2015. This was very welcome given that social care provision had been patchy and inconsistent, with unclear referral processes and responsibilities.
4. Following the Care Act, local authorities with a prison in their area received additional non-ring fenced funding to implement and maintain social care provision. The amount was based on the number of prisons in their area, the likely turnover of prisoners within those prisons, and the age profile within them—for example, prisons with a high age profile received more money on the basis that older prisoners are likely to have a higher degree of social care needs. Given the lack of social care provision, there was little information on which accurately to assess social care need and subsequent cost of provision—both locally and to determine how much national funding should be allocated.
5. Since the responsibilities came into force ADASS have produced reports based on surveys of local authorities after 3 months⁴ and 6 months⁵. They found that there was wide variation between the number of referrals being received from prisons and in how established the systems were for identifying and responding to need. Some local authorities had received surprisingly few referrals in comparison to others, which may indicate that effective joint working, clear referral routes and accessible information are yet to be achieved in some areas.
6. A recent report, *Social care or systematic neglect?* published by Prison Reform Trust and Restore Support Network, found that older people released from prison are still being set up to fail by a lack of adequate provision to meet their health and social care needs.⁶ Nearly two-thirds (64%) of older prisoners reported a mental health problem(s) and eight in 10 reported a serious illness or disability. Local authority responsibilities under the Care Act 2014 include ensuring there is continuity of care for prisoners when they are released into the community. The findings of this report further suggest that changes brought in by the Act are not yet bedded in.
7. More work needs to be done to identify and meet social needs for people in prison, particularly in building the relationships and systems between local authorities and prisons and in training staff involved to identify needs and

⁴ ADASS (2015) An analysis of social care activity in prisons and approved premises, London: ADASS

⁵ ADASS (2016) Publication of a report on the findings of Stocktake 5 in respect of activity in prisons, London: ADASS

⁶ Prison Reform Trust and Restore Support Network (2016) *Social Care or Systematic Neglect?*, London: Prison Reform Trust

make appropriate referrals. There is a need to improve prison staff awareness and understanding of the particular social care needs of prisoners with conditions such as learning disabilities and autism. At this stage it is difficult to ascertain whether the funding has been sufficient and whether it will continue to be so. However, as systems improve and referrals increase it is likely that expenditure will increase. Judging the cost of this provision on the first 12 months alone is therefore likely to be misleading.

8. It is worth mentioning that arrangements are in place in many prisons for prisoners to provide assistance to other prisoners who may have care and support needs. Prison Service Instruction 17/2015 sets out guidelines in this area.⁷ Although there are limitations to what is appropriate, and it is clear that prisoners must not be relied upon to provide assistance that is the statutory responsibility of health or social care services, it is nonetheless a valuable resource and would be worth investing in training and support for these schemes.
9. Changes in prison population need also be taken into account. The prison population is ageing. People aged 60 and over are the fastest growing age group in the prison estate.⁸ With this often come the social care needs associated with deteriorating physical and mental health conditions of this age group, such as frailty and dementia, and a likelihood of increased support needed in environments that were not designed with this in mind.
10. In summary, there is insufficient understanding of the cost implication of effective and equal provision of social care services for people in prison, and in particular how these might increase over the next few years as the legislation fully beds in. The initial grant allocation was not based on fact, as data did not exist to do so. We do not know how well social care needs are being identified and met and therefore how much the costs are. We believe that rigorous research and evaluation is needed to answer some of these important questions. We do, however, know that there is an ageing prison population and a high incidence of prisoners with mental health problems and learning disabilities compared with the general population. This suggests that eligible social care needs are also likely to be correspondingly high. We also know that prisons, being closed communities, are frequently forgotten. So it is crucial that funding for adult social care of prisoners remains under review.
11. Finally, it is well known that conditions in many prisons are currently poor. Reductions in staffing in particular mean that prisoners now spend less time in purposeful or social activity. Prison is always likely to be a harmful environment, and particularly so for people with social care needs. Under-investment in a decent prison system will generate additional social care costs—by contrast, a purposeful and decent prison regime promotes good health and may have the effect of reducing the need for specialist support.

⁷ HM Prison Service (2015) PSI 17/2015 Prisoners Assisting Other Prisoners, London: Ministry of Justice

⁸ Table A1.6, Ministry of Justice (2015) Offender management statistics prison population 2015, London: Ministry of Justice and Table 1.3, Ministry of Justice (2016) Offender management statistics quarterly: October to December 2015, London: Ministry of Justice