

February 2017

**RR3**  
Reducing Reoffending  
Third Sector Advisory Group

# RR3 special interest group on effective care and support for people at risk of suicide and self-harm in prison

## Recommendations for change

### Background

In recent years, the rates of both suicide and incidents of self-harm in our prisons have risen significantly.<sup>1,2</sup> This problem is not new. The Harris Review into self-inflicted deaths in custody of 18-24 year olds, which reported in April 2015, found that 'our findings echo the criticisms and recommendations made consistently and repeatedly throughout the last fifteen years and more'.<sup>3</sup>

Yet current developments make this an ideal opportunity to influence change. Safety in prisons is a key priority for the Secretary of State for Justice. Under the prison reform agenda, governors in the reform prisons will have greater freedom and accountability for the regime and activities in their prisons.<sup>4</sup> NHS England's 2016 strategy 'Implementing the Five Year Forward View for Mental Health' includes an objective to improve mental health pathways across secure and detained settings, and to deliver an overall reduction of 10% in the number of people taking their own lives through suicide prevention work.<sup>5</sup> There are also opportunities emerging with the work of the Ministerial Council on deaths in custody and under it the Independent Advisory Panel (IAP) on Deaths in Custody.<sup>6</sup>

Effective care and support for people at risk of suicide and self-harm in prison requires a whole-prison approach, developing a culture of compassion so that every relationship becomes an opportunity to support vulnerable prisoners.

The voluntary sector can play a vital role in supporting this approach.

### About this RR3 Special Interest Group

The Reducing Reoffending Third Sector Advisory Group (RR3) exists with the purpose of building a strong and effective partnership between the voluntary sector, the Ministry of Justice (MoJ), and the National Offender Management Service (NOMS) to reduce re-offending. The chair for the group and its secretariat is provided by Clinks, the infrastructure charity for voluntary organisations working in criminal justice.

A RR3 special interest group met twice in late 2016 to discuss how to provide effective care and support for people at risk of suicide and self-harm when entering prison, in prison and on release. They did so in the context of increasing concern about escalating rates of suicide and self-harm among people in prison and wide ranging policy and service reforms impacting on life and access to

services in prisons. The group explored the role and contribution of the voluntary sector in providing care, and the challenges and barriers to effective care and support.

## Members

The group was advertised and open to any voluntary organisations whose work brings them into contact with people who may be vulnerable and at risk in prisons, whether or not they have a health or mental health remit. The final membership (see table below) included representatives from voluntary organisations providing a wide range of services and support to people in prison and their families. The wealth of perspectives and experiences provided a useful way to explore the current challenges and opportunities in tackling this very serious aspect of life for people in the criminal justice system and those working to support them.

- Linda Bryant, Together (sponsor member of RR3, Chair)
- Hazel Alcraft, Clinks (secretariat)
- Paula Atherton, Liverpool Charity and Voluntary Services (LCVS)
- Richy Cunningham, Fulfilling Lives Newcastle Gateshead
- Caroline Drummond, Nacro
- Katy Haigh, Good Vibrations
- Christina Hall, Lincolnshire Action Trust
- Andy Keen-Downs, Pact
- Robert Knibbs, Independent Monitoring Board member
- Sara Lee, Irene Taylor Trust - Music in Prisons
- Julie Lowe, Big Red Food Shed
- Jez Spencer, Fairshares
- Valeria Villa, Inside Out - Volunteer Centre Kensington & Chelsea
- Charlotte Weinberg, Safe Ground

## Discussion questions

The group explored a number of core questions:

- Whose responsibility is it to care for people who are vulnerable in prison?
- What do you do if you come across someone who is vulnerable and at risk?
- What are your experiences of doing so – good and bad? Are there common challenges or barriers you have encountered?
- What would you want to be able to do for people? What would make the difference for people in that situation?
- Who do we need to influence in order to achieve change?

## Recommendations

The Reducing Reoffending Third Sector Advisory Group (RR3) special interest group on effective care and support for people at risk of suicide and self-harm in prison makes the following recommendations to voluntary organisations, the Ministry of Justice and other relevant parties.

### 1. Resurrection not innovation

The need to care for people at risk of suicide or self-harm in prisons is not new. There are many successful initiatives which have worked well in the past to help in keeping people safe. We need to look at the evidence we already have for what works, and how to revive or scale these up – not reinvent the wheel.

### 2. Effective care and support is cost effective

Reports such as the Howard League's 'Cost of prison suicide' briefing highlight the huge cost of the current levels of suicide and self-harm in our prisons.<sup>7</sup> Further analysis would be helpful to compare this with the cost of (re)introducing measures which have been shown to be effective in reducing self-harm and suicide, to demonstrate the financial value of effective care and support.

### 3. Every contact (and every relationship) counts

Every person who comes into contact with a person who may be at risk of self-harm or suicide in prison needs to know how to respond, who to tell if they have concerns, and what support is available.

### 4. Support is vital throughout a prisoner's journey

While keeping people safe is a shared responsibility, different support may be needed at different points along a prisoner's journey. It is important to be clear who is accountable for supporting people at risk at each point, and also draw on all available sources of support, for example:

- Reception and first night staff when a person arrives in prison
- Dedicated officers once a person is transferred to a standard wing
- Other prison department staff, healthcare and voluntary sector services
- Volunteers
- Peer supporters

### 5. Anyone can be 'at risk'

Risk of suicide or self-harm is dynamic, and any person in prison can become vulnerable, regardless of whether they have previously been assessed as at risk. Indeed, the shock of entering prison itself can be enough to trigger risk of suicide or self-harm.

Responses to people at risk need to be flexible enough to respond to these dynamics, and not based solely on formal assessment at reception or minimum standards of provision.

Measures introduced to care for those at risk of suicide and self-harm should also take into account the diversity of the prison population. Age, gender, ethnicity, and sexual orientation can all impact on an individual's risk, needs, and how best to support them. A one-size-fits-all approach is not sufficient.

## **6. Prison staff require better support**

The group welcomes the proposals set out in the Government's Prison Safety and Reform white paper, to provide consistent through-care by allocating a dedicated prison officer to each person in prison. Prison officers should be provided with training to equip them to take on the dedicated officer roles, which should include safeguarding, trauma-informed approaches, and how to respond to people at risk.

In addition, officers should be provided with on-going supervision to support them in managing their own health and wellbeing, and in their role in caring for vulnerable people. This will have a direct impact on service users within the prison.

## **7. Voluntary organisations are a key partner in keeping people safe**

The voluntary sector can bring professional expertise, energy, resource and creativity to bear. Voluntary sector staff can challenge prison culture when needed, and offer support to individuals which prison staff are not always able to.

To do this, they need to be seen as an integral part of the prison system, included in strategic planning processes and offered training alongside other prison services. Local systems for reviewing safety in custody should include voluntary organisations working in the prison, and reports should be shared with them.

## **8. Formal accountability is essential**

Responsibility and action to improve care for people at risk of suicide and self-harm are needed at both operational and strategic levels. In clarifying the roles and responsibilities at national and local level, the Government should include formal lines of accountability for prison safety, up to and including the Secretary of State.

## **9. Governors should be given positive incentives**

The group welcomed the intention outlined in the Government's Prison Safety and Reform white paper to measure and improve performance across the prison estate. Simply measuring the rates of self-harm and suicide at different establishments, however, would create perverse incentives.

Instead, positive measures should be used which encourage prisons to invest in those things which are known to be effective in caring for people at risk of suicide and self-harm, such as the number of peer supporters employed; number of staff receiving mental health training; or health and social care qualifications awarded.



**Clinks supports, represents and campaigns for the voluntary sector working with offenders. Clinks aims to ensure the sector and all those with whom they work, are informed and engaged in order to transform the lives of offenders.**

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### **End notes**

1. Centre for Mental Health (2016) Preventing prison suicide: Perspectives from the inside. Online: <https://www.centreformentalhealth.org.uk/preventing-prison-suicide> (last accessed 23.02.2017)
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4. Ministry of Justice (2016) Prison Safety and Reform. Online: <https://www.gov.uk/government/publications/prison-safety-and-reform> (last accessed 23.02.2017)
5. NHS England (2016) Implementing the five year forward view for mental health. Online: <https://www.england.nhs.uk/wp-content/uploads/2016/07/fyfv-mh.pdf> (last accessed 23.02.2017)
6. Find out more here: <http://iapdeathsincustody.independent.gov.uk/>
7. The Howard League for Penal Reform (2016) The Cost of Prison Suicide: Research Briefing. Online: <http://howardleague.org/publications/the-cost-of-prison-suicide/> (last accessed 23.02.2017)