

Date of Meeting: 17th January 2019.

Report Title: Liaison and Diversion input Cheshire (CWP)

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Introduction and Policy Context

The Ministry of Justice (2012) reported that 29% of adults that are serving community sentences have a mental health disorder, yet 90% of prisoners have a diagnosis of psychosis, anxiety, depression, personality disorder and alcohol or drug misuse. Additionally, the Prison Reform Trust (2017) reported that 7% of the prison population have a learning disability, in comparison to 2% of the general population. It has been argued that prisons are an inappropriate environment for individuals with severe mental health diagnoses and such an environment can exacerbate mental health problems, heighten vulnerability (The Bradley Report, 2009) and increase risk of self-harm and suicide (Pratt et al., 2006).

Lord Bradley's '*Review of People with Mental Health Problems or Learning Disabilities in the Criminal Justice System*' (2009) and other key documents/reviews including "*Breaking the Cycle: Effective Punishment, Rehabilitation and Sentencing of Offenders*" (2010) '*Breaking the Cycle: Government Response*', in June 2011 recommended improvement to Liaison and Diversion (L&D) services, detailing specific areas including;

- *The recommendation for a national model of L&D services*
- Early intervention
- Mental Health (MH) and Learning disability (LD) screening and assessment in custody
- A standardised assessment process
- Improved criminal justice system communication
- Active service user involvement

- Improved outcomes for children and young people
- Access to LD expertise
- Improved information sharing protocols
- Data collection to underpin service requirements and service development based need, to assist service commissioning.

Lord Bradley's review and other subsequent recommendations above, underpinned the foundations to NHSE's publication of the "Liaison and Diversion Operating Model" in 2014.

Liaison and Diversion teams have now been implemented nationally, in order to provide advice to the Criminal Justice System about care, communication and management of vulnerable individuals following arrest. This also involves organising and managing transition between the Criminal Justice Service and Mental Health Services (NHS England, 2014).

Background

Evidence would suggest that individuals entering the Criminal Justice System (CJS) require effective screening, assessment and pathway support by experienced practitioners and the delivery of a robust service model. Without adequate service provision, the increasing numbers of adults and children entering the CJS, do so without effective or measurable outcomes, in-turn applying pressure to the CJS and the interface with MH services. Many individuals with a Mental Health issue or a Learning Disability enter services by way of the Criminal Justice pathway. Such individuals often have a wide range of complex health and social care needs, characterised by vulnerability and pre-conceived ideas of offending behaviours.

Wider implications include the economic costs, as an estimated £1.9 billion is spent annually on arresting, convicting, detaining and supervising individuals with a mental health diagnosis (Revolving Doors Agency, 2007). The Bradley Report (2009) presented a comprehensive plan to reduce reoffending and improve public health by ending the revolving door to custody for individuals with a mental health or learning disability diagnosis. One of the recommendations was to establish mental health and criminal justice teams to support individuals with mental health and learning disabilities, through the criminal justice system and provide alternatives to prison (Liaison and Diversion Services).

Liaison and Diversion (L&D) services across Cheshire have been working with Criminal Justice partners for a number of years. Prior to April 2018 and NHSE commissioning support (initially 2015 developmental service provision) the Criminal Justice Liaison Team (CJLT) consisted of 3 CCG funded Registered Mental Health practitioners working for CWP, actively engaged Monday to Friday 9:00-17:00 across Cheshire custody and Court environments (East and West Cheshire). Although this service supported the needs of a number of individuals entering the CJS, such staffing levels had limited capabilities and were unable to support a whole system approach, given increasing service user (detained persons) numbers.

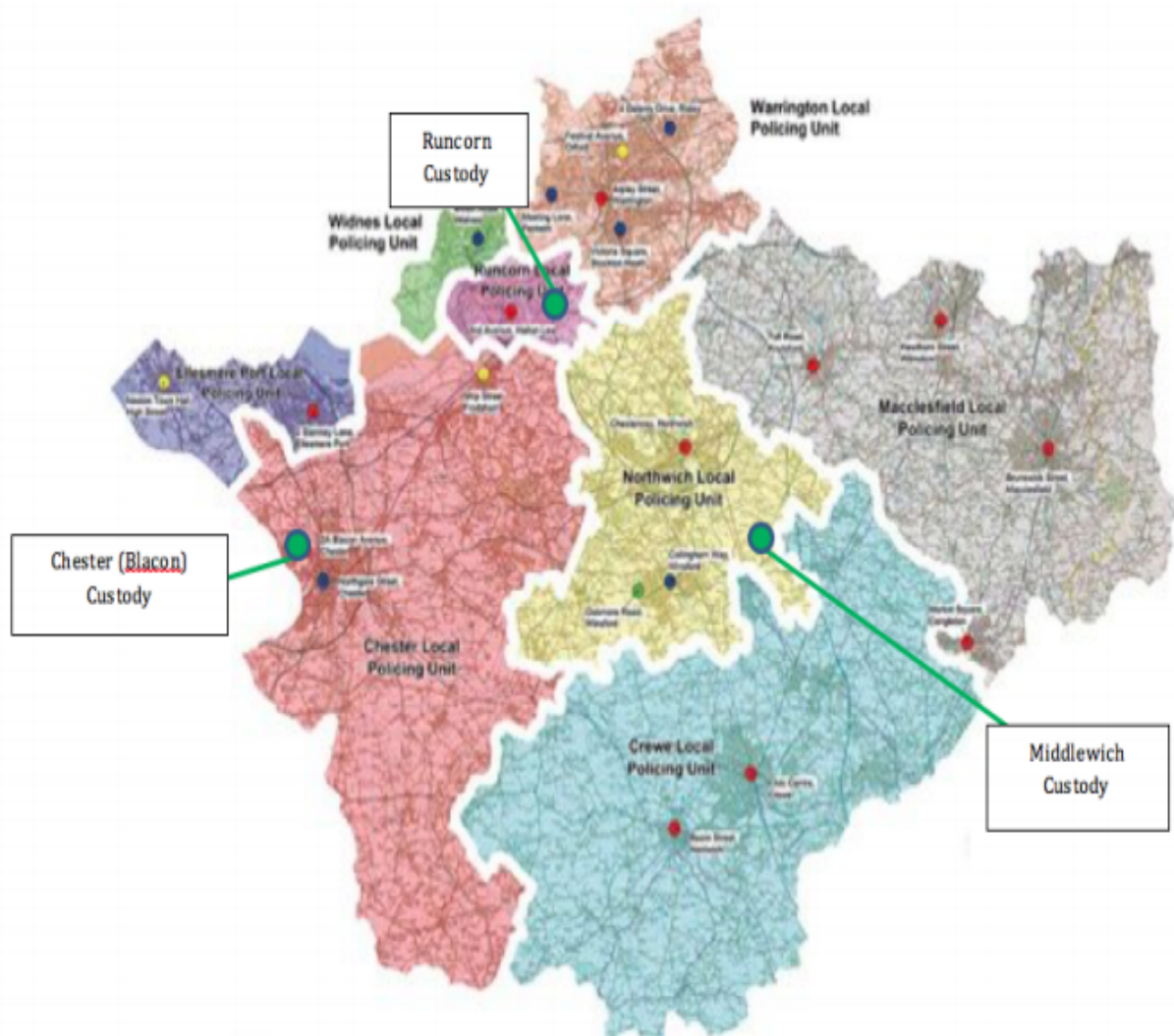
Current service delivery model



Integrated Custody Healthcare and Liaison & Diversion service for Cheshire Police Custody and Court environments commencement on the 1st May 2018.

Three service providers joined up in partnership, to implement a fully commissioned service in line with the National model, supporting the physical and mental health/wider vulnerabilities of individual entering the criminal justice system across Cheshire.

- Mitie Care in Custody (Lead provider, physical health across Cheshire)
- Cheshire and Wirral Partnership NHS Foundation Trust (L&D service across Cheshire East, South, Vale and West Cheshire)
- North West Boroughs Health Care NHS Foundation Trust (L&D service North Cheshire).



The service is jointly commissioned by NHSE and Cheshire Police, the lead provider is Mitie Care in Custody with CWP and NWB acting as sub-contractors to implement the L&D service delivery model across respective Cheshire localities. Although a

“lead provider” models is evident, mobilisation and service delivery has been in full partnership, supporting individuals appropriately through effective communication and a shared service ethos.

Service Delivery Model

The service actively delivers a 24/7, all age custody health care and L&D service across Cheshire and includes -

- A joined up approach and communication for detained individuals
- An Integrated single screening / assessment process
- Clinical safety
- Safeguarding
- Compassionate expertise
- Providing opportunities to inform choice to step out of the cycle of offending
- Working with decision makers to inform outcomes
- Supporting community engagement

The service has implemented a new and innovative electronic referral system (SUMs), and a clinical assessment system (System one), that enables all individuals entering the custody environment to gain access to and screening by health professionals covering a wide range of vulnerabilities including –

- Mental Health Screening and associated assessment (including suicidal thoughts and self-harm)
- Learning disability (neurodevelopmental conditions)
- Autism
- Substance use and Alcohol
- Communication difficulties (speech and language)

- Physical Health screening
- Problematic gambling
- Financial difficulties
- Housing issues
- Military Veteran screening
- Domestic violence/victim screening

The service is also embedded within the court environments across Cheshire (08:30 - 16:30 Mon-Fri) screening, assessing and supporting individuals as documented above. Relevant vulnerability information is passed onto magistrates and other court staff, to support the most effective court disposal route or diversion away from the CJS. Personal information is shared appropriately, following agreement and consent by the individual receiving support from the L&D service practitioners.

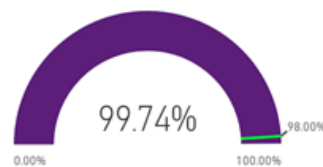
Service key performance indicators include

- Response times in Police Custody (Healthcare)
- Number of screens and assessments conducted
- 100% of adults screened in Police Custody by year 3
- 100% of juveniles screened in Police Custody and Court
- Number and type of referrals into mainstream services according to identified need
- Number and type of referrals into voluntary and other support services according to identified needs
- Engagement of Service Users with relevant community services
- Completion of Court Reports
- Service User Feedback

Briefing information/ service outcomes to-date

Performance Summary: May 2018 – October 2018

Service Requests Responded to On Time



Service Requests Responded to On Time: by Month



Over the first 6 months of the contract, on average, 99.7% of service requests have been responded to on time

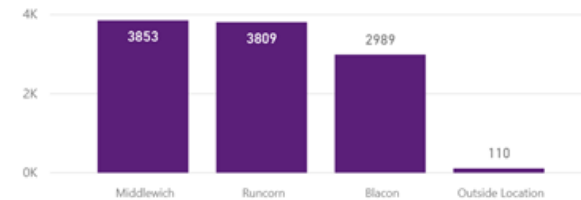
Calls Completed

10760

Calls Completed: by Month



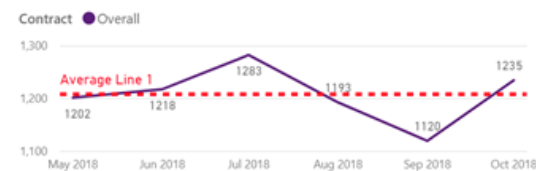
Calls Completed: by Contract



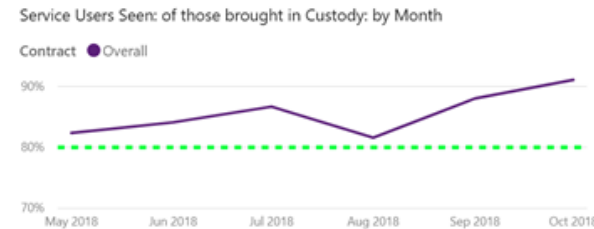
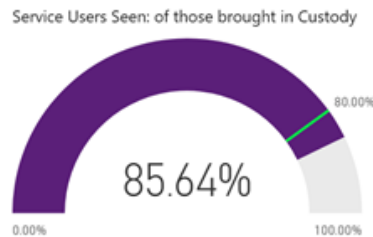
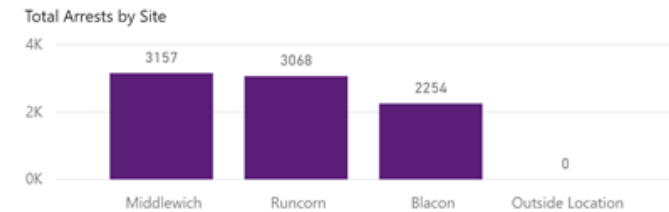
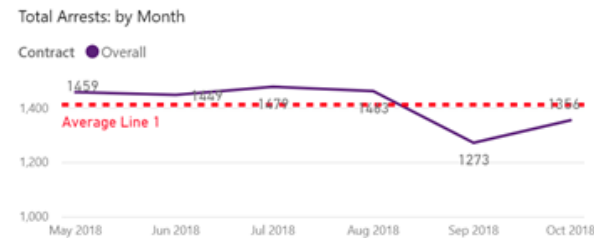
Total No of Service Users Seen

7251

Total No of Service Users Seen: by Month



A total of 7,251 individual service users have been seen by the service, which represents 1,209 per month



Against a target of screening 80% of adults, performance has remained consistently above target, achieving over 90% in October. The average across the first 6 months of the year is 85.6%



A total of 348 service users have been seen in Court

The 6 month service review has indicated that the contract is fully mobilised and is operating under business as usual protocols. Following a recent HMIC/CQC visit, the service received excellent feedback by the national inspection team and Senior Police colleagues,

“The service was probably one of the best I have seen located within custody”
Kathleen Byrne (CQC Assessor)

“The embedded Criminal Justice Liaison & Diversion (CJLD) practitioners were an invaluable asset.”

Police officers and senior members of the Cheshire Constabulary

Against the target of custody screening (80% of adults in the first year), performance has remained consistently above target, achieving over 90% in October 2018. The average across the first 6 months of 2018 was 85.6%.

The L&D service has also seen a total of 348 service users in Court, over the first 6 months of service mobilisation. Providing individual screening, assessments, and appropriate feedback to court staff and enabling improved court disposal decisions.

Partners have worked hard to identify areas of improvement based on comprehensive data collection and analysis, with plans in place to support service developments in 2019.

A service user feedback tool was implemented in December 2018, to support service improvements through lived experience and individual contacts with the service. Such feedback is also required and presented to commissioners by the contract director. Only limited feedback has been received to date, however individuals appear to be giving positive feedback following contact with the service. Increasing data collection in this area will act to support service improvements, staff training and service user outcomes.

As part of the service delivery model, a specific “Lived experienced” worker was employed to support service user groups, feedback, and community support to fundamentally support service delivery based on integration with our service users. The role was developed specifically for a person who has lived experience of mental vulnerability within the criminal justice system, and provides invaluable guidance, consultation, advice and opportunities for reflection to the Liaison and Diversion Service and wider partners.

These initiatives support a culture and service delivery model, where the voice of the service user is heard, integrated and is at the forefront of service developments.

Next steps and challenges

- **Recruitment and retention.** There are national and local issues regarding recruitment into this type of professional role, due to Police vetting issues (Level 3). Staff retention plays an active role within the management team, supporting, listening and engaging the staff team, to encourage staff retention. Partnership meetings, individual staff supervision sessions and specific team forums, all support this important service area.
- **Engagement of police staff to refer into the integrated service (100% target in year 3 of the contract).** Referrals to the service (Custody) are received by Police staff and without a common interface/understanding; the service target of 100% contact in year 3 could be compromised at this level. The service leads and practitioners within the custody environment are working hard to promote the referral pathways and interface with senior police staff at every opportunity.

- **One medical room only per suite/increase service space with partners.** Options are now being explored with commissioner and Police partners, to increase the assessment room space.
- **Improve court data through effective relationship building and improved IT structure.** The National team are working to improve the data flow from court to practitioners in the court environment; however this has been a challenge locally due to GDPR regulation and access to personal information. We have now gained access to the weekly/daily court listings, through a joint Information sharing agreement and contractual understanding. Improvements to the national court IT systems and locally devised strategies (visible service information), will hopefully support full integration and improved service user outcomes in the court environments.
- **Progress the Voluntary Attendee (VA) pathway (May 2019).** New pathways are now being developed by Cheshire Police including an improved IT referral system. The new system will enable police officers (outside custody) to refer directly into L&D practitioners, for support and VA screening/assessment.
- **Introduction of a Call-back Service to support individuals released prior to service contact.** This will support individuals that are not seen during their time in Police custody (Released prior to vulnerability screening). Information is passed on to the individuals (easy read leaflets) prior to leaving custody, with service information and call-back details. This will enable practitioners to support individuals outside the custody environment following release, yet prior to vulnerability screening (limited numbers).

- **Commercial Management: Introduction of leaflets / posters and engagement with key players.** To further promote the service in the court environment, posters, staff pictures and leaflets will be visible within service users and staffing areas. Key stake holder training is also planned to increase service understanding, location/office base, referral routes and practitioner identification within court environments across the Cheshire locality.
- **Closer working relationships with local voluntary organisations to support vulnerability in the community.** The service partners recognize that voluntary organizations play an important role to local service users, through integration, social mobilization and visible community resources. We are currently doing a wider mapping exercise, supported by our lived experience worker, which will enable a better understanding and local pathway knowledge in this area.

Ends.