

# Independent review of services for adults with a learning disability and autistic adults in Midland's prisons

## Service Specification

### Introduction

*Meeting the healthcare needs of adults with a learning disability and autistic adults in prison* was published in September 2021 and is designed to support commissioners, healthcare providers and the Prison Service to develop appropriate pathways and provision and to establish a whole prison approach to meeting the needs of people with a learning disability and autistic people in prison. The document is centred around the following five principles:

- A rights-based approach to care
- Person-centred care
- Early identification and appropriate support
- Informed workforce
- Working in partnership

### Independent Review Requirements

NHS England and NHS Improvement (Midlands) wishes to commission an independent review of the current services and pathways for those in its adult prisons (see **Appendix 1** for the full list) against the expectations set out within *Meeting the healthcare needs of adults with a learning disability<sup>1</sup> and autistic adults in prison*

Definition for the review: Any prisoner (aged 18 years and over) with a learning disability and/or autism, as per the definitions used in *Meeting the healthcare needs of adults with a learning disability and autistic adults in prison*

The review is required to determine:

1. The observed (diagnosed, suspected, treated) versus expected prevalence of prisoners with a learning disability and / or autism, by establishment, using local Health Needs Assessment data or relevant national prevalence data. Within this analysis specific consideration also needs to be given to protected characteristics implications and differences.
2. What screening is undertaken prior to arriving within prison, for example within Police Custody, by Liaison and Diversion Services or by Young Persons Estate (see **Appendix 2** for details), and how is this information shared as they pass along the criminal justice pathway?
3. What screening is in place for learning disability and / or autism in prison?
  - If screening and assessment is undertaken what tools are used?
  - If screening and assessment is not undertaken

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<sup>1</sup> Learning Difficulty is out of scope for this project, as are other forms of neurodiversity.

- What other sources of information are or could be utilised – i.e. review of SCR
  - what models could be adopted?
  - what culturally and gender appropriate tools are used /should be used?
4. What formal assessments should be undertaken after screening?
  5. What training is in place for healthcare and prison staff regarding learning disability and autism and how are the needs of different groups (e.g. those with a protected characteristic) are considered?
  6. Do healthcare and prison staff feel confident in recognising, engaging, and supporting a prisoner who may have a learning disability and/or autism? This includes both within the prison but also when escorting / transferring to external services.
  7. What appropriate reasonable adjustments should be provided, regardless of whether the prisoner has a confirmed diagnosis?
  8. Healthcare services are expected to have specific learning disability and autism care pathways in place that cover screening, support, assessments, and referral for specialist interventions.
  9. What access is there from prison into specialist services (for example speech and language therapy and specialist mental health or other health treatment programmes)?
    - Where there are gaps or obstacles what is required and what is the most suitable delivery model (e.g. in-house provision, community in reach or external referral) by establishment?
  10. What is the current provision of prisons learning disability and or autism practitioners and where are the gaps?
    - What type of healthcare professionals / skills are needed and where?
    - What other type of professionals/ skills are needed (social work, advocacy, counsellors, Translators/ Interpreters, including BSL)
    - What is the most suitable delivery model (e.g. regional roving resource, prison specific resource)?
  11. What models of learning disability and autism healthcare champions are in place?
  12. Is medication usage for this cohort being monitored? Is there evidence of over medication of this client group and what steps could be taken to address this?
  13. Is there equitable access to physical health services (both within and externally to the prison)?
  14. Is joint care planning with other health and social care services undertaken?
  15. Is information shared along the criminal justice pathway between health, social care and criminal justice partners?

For each of the points above the review is required to identify:

- Gaps and / or obstacles
- Risks
- Areas of good practice
- Possible remedial options

### **Methodology**

1. Several national pieces of work on neurodiversity have been completed or are underway. This includes:
  - a. A recent MoJ/HMPPS Call for Evidence on adult neurodiversity in the criminal justice system which has provided a significant resource of information.
  - b. The MoJ are in talks about a universal neurodiversity screening tool for prisons and have a steering group on identification tools.
  - c. User Voice are completing a 15-prison peer led research into neurodiversity needsThe findings and outcomes of these activities should be considered in the review's methodology and information sources.
2. A mixed methodology is anticipated as being required, ranging from desk top reviews, to staff (health and custodial) and prisoner focus groups and surveys and site visits.
3. It is required that all Midlands prison healthcare providers and Prison Governors/Directors are included in the project, potentially via questionnaires or on-line surveys.
4. For in depth information collation (such as interviews, focus groups and case studies) a sample of prisons is to be agreed, for example:
  - 1 x Cat A
  - 4 x Cat B / remand
  - 4 x Cat C
  - 1 x Cat D
  - 2 x Women's

This methodology should seek to ensure that the views of those with a protected characteristic are represented.

5. To understand the full pathway, an agreed number of case studies are required to be undertaken. NHS E/I (Midlands) will facilitate engagement and access to providers across the pathway (health and criminal justice). These could focus on prisoners who reach the threshold for inpatient beds to understand their journey into prison and if/ how they have been engaged and supported by services up to that point.
6. The review must include people with Lived Experience as an active partner in this review. This will include, the undertaking of the information gathering element of the project and in testing out recommendations being made in the main report.
7. Experience. The organisation and individuals undertaking the project must have

- a. An understanding of learning disability and autism policy and good practice
- b. Experience of undertaking clinical service reviews
- c. Up to date DBS checks
- d. Appropriate safeguarding training and will always comply with Safeguarding requirements.

### **Final Report Requirements**

To facilitate discussions and engagement with new Integrated Care Systems (listed in **Appendix 3**) two reports are required 1. East Midlands and 2. West Midland. Each report is required to have clear and evidenced:

- Generic findings and SMART recommendations, e.g. those common across all/ several sites
- Specific findings and SMART recommendations broken down by establishment and ICS area (See Appendix 2) where these have been identified
- Specific findings and SMART recommendations for those with one or more protected characteristics.

### **Contracting**

The NHS Standard Contract (short form) will be used to commission this service and raise a Purchase Order

[NHS England » Shorter-form NHS Standard Contract 2021/22 \(Particulars, Service Conditions, General Conditions\)](#)

### **Timescales and Cost**

Providers are asked to provide an outline timetable to complete this review along with the costs, as part of the bid (see bid template).

Costs will be broken into ¼ and paid at the beginning, at two agreed review mid points and upon receipt of the agreed final report.

## **Appendix 1 – List of Adult Prison Sites**

<b>Prisons</b>	<b>Lead Provider</b>
<b><u>West Midlands</u></b>	
HMP Birmingham	Birmingham and Solihull Mental Health Trust
HMP YOI Brinsford	Practice Plus Group
HMP Dovegate	Practice Plus Group
HMP Drake Hall	Practice Plus Group
HMP Featherstone	Practice Plus Group
HMP Hewell	Practice Plus Group
HMP Long Lartin	Practice Plus Group
HMP Oakwood	Practice Plus Group
HMP Stafford	Practice Plus Group
HMP Stoke Heath	Shropshire Community Healthcare NHS Trust
HMP YOI Swinfen Hall	Practice Plus Group
<b><u>East Midlands</u></b>	
HMP YOI Foston Hall	Practice Plus Group
HMP Gartree	Nottinghamshire Healthcare NHS Foundation Trust
HMP Leicester	Nottinghamshire Healthcare NHS Foundation Trust
HMP YOI Lincoln	Nottinghamshire Healthcare NHS Foundation Trust
HMP Lowdham Grange	Nottinghamshire Healthcare NHS Foundation Trust
HMP Morton Hall	Nottinghamshire Healthcare NHS Foundation Trust
HMP North Sea Camp	Nottinghamshire Healthcare NHS Foundation Trust
HMP YOI Nottingham	Nottinghamshire Healthcare NHS Foundation Trust
HMP Onley	Northamptonshire Healthcare NHS Foundation Trust
HMP Ranby	Nottinghamshire Healthcare NHS Foundation Trust
HMP Rye Hill	G4S
HMP Sudbury	Practice Plus Group
HMP Stocken	Practice Plus Group
HMP Whatton	Practice Plus Group

## **Appendix 2: Liaison and Diversion and Police Forces**

<b>Area</b>	<b>Provider</b>
Staffordshire	Midlands Partnership NHS Foundation Trust
	North Staffordshire Combined Healthcare NHS Trust
Coventry and Warwickshire	Coventry and Warwickshire Partnership NHS Trust
Black Country	Black Country Healthcare NHS Foundation Trust
Birmingham and Solihull	Birmingham and Solihull Mental Health NHS Foundation Trust
Worcestershire	Black Country Healthcare NHS Foundation Trust
Herefordshire	Worcestershire Health and Care NHS Trust
Shropshire and Telford	Midlands Partnership NHS Foundation Trust
Lincolnshire	Lincolnshire Partnership NHS Foundation Trust

Derbyshire	Derbyshire Healthcare NHS Foundation Trust
Nottinghamshire	Nottinghamshire Healthcare NHS Foundation Trust
Leicestershire	Leicestershire Partnership NHS Trust
Northamptonshire	Northamptonshire Healthcare NHS Foundation Trust

West Midlands	East Midlands
<b>Police Forces</b>	<b>Police Forces</b>
Warwickshire	Derbyshire
West Mercia	Nottinghamshire
West Midlands	Lincolnshire
Staffordshire	Leicestershire
	Northamptonshire

### **Appendix 3: Integrated Care Systems**

West Midlands	East Midlands
Birmingham and Solihull	Derbyshire
Black Country	Leicester, Leicestershire and Rutland
Coventry and Warwickshire	Lincolnshire
Herefordshire and Worcestershire	Northamptonshire
Shropshire, Telford and Wrekin	Nottingham and Nottinghamshire
Staffordshire and Stoke on Trent	