

Report of the Director of Public Health

# Health of Offenders Residing in the Community

### SUMMARY

- 1.1 The Reducing Offending, Re-offending and Health Board is a County-wide partnership Board chaired by the Derbyshire Leicestershire Nottinghamshire and Rutland Community Rehabilitation Company. A Health Needs Assessment (HNA) of Community Offenders was commissioned by the Board and this report provides a summary to Derby City Health and Wellbeing Board for its information.
- 1.2 In Derby City, there are 1,664 offenders residing in the community. This cohort has higher rates of both mental and physical illness, than the general population. There is a complex relationship between health and social influences on offending and re-offending behaviour. This HNA provides an understanding of the actions which can be taken to reduce inequalities and improve the health and wellbeing of the local population.
- 1.3 Among these offenders, smoking, alcohol consumption, and illicit drug use were far higher than among the general population. This HNA found that respondents may be willing to adopt a healthier lifestyle, with over half of the smokers reported recent attempts to quit, and one-third of drug users reporting that they had sought help to stop using drugs.
- 1.4 No specialised health services are commissioned for community offenders, who are expected to access the same services as the general population. Many community offenders are not registered with primary care services, resulting in overuse of crisis care.
- 1.5 The health of community offenders is influenced by wider factors such as issues with housing or finance.

# RECOMMENDATION

- 2.1 To note the findings of this HNA and the poor health outcomes experienced by offenders residing in the community.
- 2.2 To note the role taken by the Reducing Offending, Re-offending and Health Board to improve the health of offenders residing in the community

2.3 To support the recommendations of the HNA.

### **REASONS FOR RECOMMENDATION**

- 3.1 The recommendations align with the responsibility of Derby City Council's Health and Wellbeing Board to lead on work to improve the health and wellbeing of the population of Derby and specifically to reduce health inequalities.
- 3.2 This piece of work supports the building of social capital and also creating healthy communities.

### SUPPORTING INFORMATION

- 4.1 There are approximately twice as many offenders supervised in the community than in prison, and these are individuals who are serving solely community sentences, those on suspended sentences and those who have been released on licence. There is a complex relationship between health and social influences on offending and re-offending behaviour. Offenders are known to disproportionately experience poorer mental and physical health and commonly engage in unhealthy and high-risk behaviours. There are no health services commissioned specifically for offenders residing in the community, with individuals expected to access general community health services.
- 4.2 In August 2017, there were 1,664 offenders residing in the community in Derby City. Compared to the general population, the general health of offenders who reside in the community was worse. Offenders reported high rates of illness, in particular mental illness, musculoskeletal problems and respiratory conditions. One in four reported co-morbidities, and given the young age profile of this population group highlights the complexities of their health needs. Smoking among offenders in community was high (64% compared to 15% in the general population). Offenders also reported higher levels of alcohol consumption, illicit drug use and lower levels of physical activity compared to the general population. However, there was evidence that respondents were willing to adopt a healthier lifestyle, with over half of the smokers reported recent attempts to quit, and one third of drug users reporting that they had sought help to stop using drugs.

- 4.3 The Reducing Offending, Re-offending and Health Board requested that a Health Needs Assessment be completed to review the health needs and experiences of offenders residing in Derby, to inform the future commissioning and provision of local services and to improve the health and wellbeing of this population group. The HNA was undertaken by Public Health at Derbyshire County Council, and the scope included adult and youth offenders, and covered the geographic areas of Derbyshire County and Derby City. Information was collected through interviews held with offenders, and surveys completed by offenders, health professionals and staff working in adult probation services and youth offending teams.
- 4.4 Housing and financial issues, along with lifestyle choices and difficulties in accessing non-urgent healthcare services were determined to be key factors in determining the health outcomes of offenders residing in the community
- 4.5 Less than 10% of respondents were not registered with a GP, and 40% were not registered with a dentist. However, difficulty accessing health services was a recurring theme through the engagement, and this was felt to be due to inflexibilities in making or attending appointments, long waiting lists for specialist services, and primary care services being the gatekeepers for onward referral to other specialist services. Combined, these result in an overreliance on urgent health services by offenders residing in the community.
- 4.6 The Reducing Offending, Re-offending and Health Board has taken ownership for the recommendations made as part of the HNA, relating to:
  - Establishing a strategic direction for improving the health of offenders residing in the community.
  - Undertaking further engagement and consultation to explore specific issues in more detail.
  - Reviewing pathways into specialist services.
  - Support access to primary care services, in particular general practice and dental services.
  - Reviewing the pathway on release from prison to improve the links between prison health services and community services.
  - Reviewing the provision of information to health and probation staff to support access to services, and work with offenders to improve health literacy levels.
  - Improve access to healthy lifestyle services.

### OTHER OPTIONS CONSIDERED

5.1 No other options considered

This report has been approved by the following officers:

Legal officer Financial officer Human Resources officer Estates/Property officer Service Director(s) Other(s)	Dr Robyn Dewis (Consultant in Public Health Medicine)
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List of appendices:	None

Appendix 1 – Implications

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# IMPLICATIONS

#### **Financial and Value for Money**

1.1 None identified

#### Legal

2.1 None identified

#### Personnel

3.1 None identified

#### IT

4.1 None identified

#### **Equalities Impact**

5.1 No specific impact on protected characteristics. Offenders in the community are identified as having poorer access to health care and poorer health outcomes than the general population. Action to improve this will reduce health inequalities.

#### **Health and Safety**

6.1 None identified

#### **Environmental Sustainability**

7.1 None identified

#### **Property and Asset Management**

8.1 None identified

#### **Risk Management and Safeguarding**

9.1 None identified

#### Corporate objectives and priorities for change

10.1 Action to improve outcomes for this group will contribute to the Boards priority to reduce health inequalities.