Facilities

1. What prison healthcare facilities are you responsible for?

None. Falkirk IJB is not responsible for prisons. Criminal Justice, and therefore services to Polmont, remain in Falkirk Council as part of Children’s Social Work service.

NHS Forth Valley retains responsibility for health care delivery in Polmont, Glenochil and Corntonvale. The Glenochil and Corntonvale prisons are within the Clackmannanshire and Stirling IJB.

For questions (2 to 10) please provide information broken down by prison.

Budget and costs

2. What is the budget for a) health £139m and b) social care for 2016/17 £61m

Prison Social Work is delivered via a contract by the Scottish Prison Service. It relates entirely to the SPS view of the Social Work role within custody. The cost to the SPS for Polmont YOI is £377,000 for 2017/2018.

3. What is the average cost of a) health care and b) social care per prisoner?

If the average number of persons held within Polmont is circa 500 that would equate to a spend per head against the Social Work contract of circa £754 per head. However, the Social Work tasks are all related to those specified by the SPS in relation to the Criminal Justice system. Another caveat is that, while the average population may be 500, this masks a considerable daily turnover.

Staffing

4. Please provide a breakdown of the number of staff, by roles, which provide health and social care.

The prison Social Work team has 1 Senior Worker, 5.5 Social Workers and 2 admin staff.

5. Please provide information on posts that have been vacant for 3 months or longer.

All posts are currently occupied.

Demand
6. **How many prisoners have mental health needs?**

   There are unlikely to be many young men in Polmont with diagnosed serious and enduring mental health conditions. However, there may be a different proportion of women in Polmont with a serious condition.

   Regardless of whether a diagnosis exists, it is very likely that there will be a higher than average numbers with experience of trauma and loss, self-harm, substance misuse, pre-personality disorder behaviours, etc. Alleviating mental health needs at this early stage and providing talking therapies may alleviate further mental health problems developing in the future.

7. **How many prisoners have long-term conditions?**

   Many young people will develop the behaviours which lead to long term conditions. There may also be an under reporting of learning disability.

8. **How many prisoners have high care needs?**

   There are unlikely to be many young men in Polmont with high care needs.

9. **How many prisoners have palliative care needs and what arrangements are in place to provide this?**

   We are not aware of any persons in Polmont with palliative care needs.

**Performance**

10. **How many complaints in relation to a) health and b) social care in prison have your received over the past 5 years by subject of complaint, broken down by year?**

   We are not aware of any complaints against the Prison Social Work Unit.

11. **What performance indicators do you currently use?**

   Performance indicators are set by the SPS via the Contract with Prison Social Work Unit.

**Service development**

12. **Since the transfer of responsibility for prison healthcare in 2011 care have you or do you intend to redesign services?**

   There is no current intention to redesign Prison Social Work Unit.

13. **Please could you give examples of innovations in service delivery?**
Health inequalities and prevention

14. **What public health measures do you currently provide and how are these accessed?**

*The Prison Social Work Team does not provide any Public Health measures.*

15. **What access do people have to drug treatment programmes such as methadone therapy?**

*Drug Treatment programmes would be provided by Health Services*

16. **What factors would help you address health inequalities in the prison population?**

*Greater integration of Prison Social Work Services with Health and Social Care and a review of the Social work skills available already within Polmont, the restrictions of the Prison Contract and what resources might be required to better address health inequalities.*

17. **What steps do you take to ensure continuity of care on release?**

*The Prison Social Work Contract allows for Social Work to work closely with community services for long term prisoners. However, it largely excludes Social Work from improving continuity of care for short sentence prisoners. The SPS has set up separate systems of through care support officers and public/private partnerships for this group.*