Criminal Justice Committee

27th Meeting, 2022 (Session 6), Wednesday 2 November 2022

Recent correspondence

Note by the clerk

Purpose of the paper

1. This paper invites Members to consider several items of correspondence received by the Committee (see **Annex**), namely:

From SPS

• Letter from SPS on the cost of the women's estate (page 3);

From the Wise Group

• Letter from the Wise Group on **medical prescriptions on liberation** (pages 4 to 5).

Action

- 2. Members are invited to consider the correspondence and any suggested follow-up and discuss what action, if any, they wish to take.
- 3. For the convenience of Members, the suggested follow-up for each of the letters is as follows:

SPS	
Letter from SPS on the cost of the women's estate	To thank SPS for the provision of this information and to take this into account as part of this year's pre-budget scrutiny process.
Wise Group	
Letter from the Wise Group on medical prescriptions on liberation	To thank the Wise Group for its response to the letter sent on by the Committee from NHS Scotland. The Committee may wish to bring this response to the attention of NHS Scotland and ask for a view.
	The Committee may also want to note the link between the issues raised and its forthcoming work on the Bail and Release Bill, particularly the issue of a throughcare service.

Clerks to the Criminal Justice Committee October 2022

Annex

Letter from SPS on the cost of the women's estate

Thank you for your correspondence, received 8 September 2022, regarding the annual operating costs of the 2 new Community Custody Units (CCUs) of Bella & Lilias Centres, as well as the delivery of the wider Women Offenders in Custody strategy.

Please accept my apologies for the slight delay in providing a response.

Our current forecasts indicate the annual operating costs for the 2 new Community Custody Units may be in the region of circa £5m, this is however an estimate and is very much dependant on the impact of the rise in costs being experienced globally for utilities, food, inflation etc as well as other committed expenditure relating to long term SPS contracts. As the CCUs are relatively new facilities, this expenditure will be continually monitored to ensure costs are accurately reflected to provide robust data and to assist in SPS's financial planning going forward.

The wider Women Offenders in Custody strategy is as yet not concluded, so I regret I am unable to provide a final cost on the delivery of the strategy. Once the Strategy is however finalised, I would be happy to return to the Committee and provide an update on the position then.

Our current forecast for operating HMP & YOI Stirling is currently £10.8m, however this is again very much dependant on the cost pressures mentioned earlier and is subject to continual review up to the opening and during the operation of the new facility. HMP & YOI Cornton Vale's allocated budget for this year is currently £7m.

I hope you find this information helpful

Yours sincerely

TERESA MEDHURST

Chief Executive, SPS

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Letter from the Wise Group on medical prescriptions on liberation

(NB. This letter was received after the Committee wrote to the Wise Group with a copy of the letter from NHS Scotland that the Committee had received)

The issue of potential problems with medical slips on liberation was initially raised during the Committee's visit to The Wise Group on 11th May 2022. Since the Committee have raised concerns about this issue, there seem to be less problems being experienced by New Routes customers.

Having discussed the matter with prison reception staff (who also facilitate liberations), we can confirm that the current procedure for prisoners being liberated and who require medication is as follows:

- Prison records provided to reception for liberations detail information on medication requirements for each individual prisoner
- Reception staff then liaise with NHS staff to advise of those prescriptions that are required and for whom
- On the morning of liberation, a Nurse Practitioner will attend at reception, verify identities in conjunction with reception staff, and provide relevant individuals with a typed prescription in a sealed envelope that can then be taken to an external pharmacy to be collected.

The above seems to now be working well in practice but we felt it would be important to ascertain whether there were difficulties outside of the prison gates.

We then consulted with mentors from different geographical delivery areas to discuss what happens next, as we were keen to explore if there are any issues in that transition from the prison to then accessing pharmacy / GP / medication within the community. They advise that by and large, customers experience the following:

- Customer is released from prison with a prescription
- Prescription provides 5 days medication to allow for an appointment with GP for consultation on ongoing prescription provision (customers advise that the initial prescription will not be issued if there is a risk or suspicion of abuse, OD, selling, etc)
- Customer must attend GP to register at which point the practice will request the individual's medical notes from the prison
- Process takes 1 to 2 weeks depending on surgery
- GP will also need to provide an appointment to see the customer for ongoing assessment
- The above points assume that the surgery has spaces to re-register. If this is not the case, the local health board will allocate a GP who has capacity, but this may not always be in the vicinity of the customer's domicile
- Some customers are advised to attend Addictions services if they are on a prescription for Methadone as Addictions services can provide this quicker

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• GP is often still required however, due to other medical issues. In addition, the GP can issue fit notes which allows for other benefits to be claimed – addiction services can't do this.

There are a few caveats that we believe the Committee need to be sighted on to help provide a little more context.

- A customer is unable to register with a GP if "sofa surfing" and has no registered address with the high probability they will be turned away
- Experience of GP practices being very busy, and customers being advised of long waiting times for appointments. This results in customers resorting to attending already over-stretched A&E departments to resolve immediate needs
- We believe that the most likely contributory factor in this issue having been raised is that where convicted prisoners are issued with prescriptions when leaving prison (as detailed above), prisoners released from court, generally those who have been on remand, are not issued with prescriptions by the prison as the prison has no prior knowledge of whether that individual will be released from court or returned to custody. This of course is an issue that could possibly be resolved if a dedicated throughcare service was established for remand prisoners as proposed in the Bail and Release from Custody (Scotland) Bill