

Enquiry into the provision of health and social care in the adult prison estate

Response from Cwm Taf Morgannwg University Health Board (CTMUHB)

Dear Committee,

Firstly, sincere apologies for the significant delay in responding to the inquiry and a thank you for allowing the Health Board to provide an outline submission.

BACKGROUND

As you will be aware Cwm Taf Morgannwg University Health Board (CTMUHB) came into existence on 1st April 2019 as a direct result of a boundary change which saw the healthcare responsibilities for the population of Bridgend County Borough Council (BCBC) come under the auspices of CTMUHB, having been previously provided by the former AMBUHB.

This boundary change saw the former Cwm Taf University Health Board change quite considerable in size and sphere of responsibility. The new organisation CTMUHB covers three local authority areas namely Merthyr CBC, RCT and BCBC and equates to a population of some 450,000 plus.

The former CTUHB did not have a prison within its geography and as such would not have been placed to respond to the inquiry. The new organisation now has HMP Parc within its geography and as such now has some responsibilities for healthcare within the prison.

However, the direct provision of many of the services are by other organisations. As you are probably aware G4S healthcare provides primary care services to the prison including dental care, Swansea Bay UHB provides Mental Health Services (under an SLA) with CTMUHB and services such as sexual health are in fact commissioned from an alternate provider. CTMUHB does however provide secondary care level services, some of which visit the prison.

GOVERNANCE AND OVERSIGHT

As part of the boundary change transition programme, documentation was provided outlining the work of the partnership board, its remit and membership and the actions that were being tracked.

A number of initial meetings with services that had an interest with HMP Parc took place and a variety of staff from primary care, CAMHS, Mental Health and recently Public Health have visited and interacted with the prison and its healthcare arrangements.

However a formal partnership board has not been convened due to a number of other pressing issues to which the HB as needed to attend. This is in the process of being rectified and a first meeting of the HMP Parc Partnership Board will take place before the Christmas break.

A key issue for the first meeting will be to establish service levels, service relationships, the outcomes of the health needs assessments (HNA) and the desired modus operandi moving forward. This may be more complex than in other parts of the prison estate due to the variety of service providers and the associated funding sources.

Until CTMUHB is fully sighted on this it is difficult to say whether the governance and oversight arrangements are efficient and effective. They do, however, based upon documentation have the apparent ability to be so as long as funding partners can be aligned with service goals and outcomes.

SERVICE DELIVERY: Demands and Future Delivery

Primary Care

These services including dental services are provided by G4S healthcare through a contract with the Ministry of Justice. CTMUHB primary care staff have visited HMP Parc to gain knowledge of the service delivery and its potential gaps in comparison to such services delivered in the community. It is of note that the scale and potential capacity of the primary care service may well not have kept pace with increasing prisoner volumes, demand and complexity, especially in older prisoners.

Mental Health services

Mental health services are provided by an In-Reach team. There are some concerns that this team seem to do not ordinarily see anyone with dementia, severe personality disorders or ADHD. This is clearly an area where there is growing demand and will need to be addressed either through the SLA or through direct provision of such by CTMUHB in conjunction with G4S. There are some cases of inmates with quite significant dementia who were not being reviewed with limited access to dementia medication.

The delivery of care to end-stage dementia patients which were difficult to manage in a prison setting is a key issue and the general view is that these will be more appropriate for older age psychiatric services as well as the specialist dementia teams that have been established across CTM in the community.

Sexual Health services

These are privately commissioned to a sexual health consultant on a private basis who provides care to HIV positive inmates at the prison bimonthly. This private arrangement has limitations, e.g. handing over care when patients are discharge. This is an issue that needs addressing through the partnership board and will feature as part of the HNA.

BBV services

Whilst under ABMU a BBV nurse visited the prison and helped them manage their Hep B and C patients. This service is fragile and will need to be developed under the auspices of the CTMUHB team.

Substance Misuse Services

At this point the HB has little knowledge of such services. Interaction with the new APB covering the area is due to take place over the next month.

CONCLUSIONS

1. CTMUHB has only very recently assumed a responsibility and oversight role for delivery of any form of prisoner healthcare.
2. Whilst there was hand over from the former ABMUHB the Partnership Board didn't not become reconstructed and this is an urgent action for this calendar year
3. CTMUHB is cognisant of the service inputs to HMP Parc very few of which are direct provision. The complexity of the healthcare arrangements, potential for handoff and gap is considerable and needs to be addressed.
4. CTMUHB along with the HMP Parc Management Team will need in this year to review the nature of the service delivery and assess whether this is providing both quality care and value.
5. The knowledge of CTMUHB in regard to prisoner healthcare is still relatively new, however the conclusion of the responses made by other HBNs and notable Cardiff and the Vale and Swansea Bay would seem to mirror the initial assessments by key clinical personnel in CTMUHB

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