



Consultation on preventing suicide in England: a cross-government outcomes strategy to save lives

Revolving Doors Agency response October 2011

Introduction

Revolving Doors is a charity working across England to change systems and improve services for people with multiple problems, including poor mental health, who are in repeat contact with the criminal justice system.

Men and women in this 'revolving doors group' are among the most excluded in our society, experiencing a downward spiral that can lead to homelessness, substance misuse, family breakdown and poverty.

Poor mental health is often a root cause of the problems faced by individuals in this group but the combination of their needs and the resulting chaos in their lives means that they fail to get the help they need and fall in the gaps between existing policies and systems. Furthermore, because they are usually considered to have low level mental health problems or personality disorder rather than a severe and enduring mental health condition their underlying mental health issues remain untreated. The result is social exclusion, deteriorating health and repeat offending.

Our consultation response

Revolving Doors welcomes the development of a new national all-age suicide prevention strategy for England. Many of the groups identified as high-risk or in need of tailored approaches overlap with the revolving doors group including:

- People in contact with the criminal justice system
- Survivors of abuse or violence in childhood, including sexual abuse
- People with untreated depression
- People who are especially vulnerable due to social and economic circumstances; and
- People who misuse drugs or alcohol.

In your view, are there any other specific groups that should be included?

People facing multiple needs and exclusions should be included as a group in particular need of a tailored approach.

Revolving Doors welcomes the acknowledgement of the overlap between different at risk groups, for example the high levels of mental ill health and substance amongst prisoners and homeless people. However, we urge the government to go one step further and add "**people facing multiple needs and exclusions**" to be included as a group in particular need of a tailored approach. This group can be defined by three characteristics:

- 1) **They experience several problems at the same time**, such as mental ill health, homelessness, drug and alcohol misuse, offending and family breakdown. They may have one main need complicated by others, or a combination of lower level issues which together are a cause for concern. These problems often develop after traumatic experiences such as abuse or bereavement. They live in poverty and experience stigma and discrimination.
- 2) **They have ineffective contact with services**. People with multiple needs usually look for help, but most public services are designed to deal with one problem at a time and to support people with single, severe conditions. As a result professionals often see people with multiple needs (some of which may fall below service thresholds) as “hard to reach” or “not my problem”.
- 3) **And they are living chaotic lives**. Facing multiple problems that exacerbate each other, and lacking effective support from services, people easily end up in a downward spiral of mental ill health, drug and alcohol problems, crime and homelessness. They become trapped, living chaotic lives where escape seems impossible, with no one offering a way out.

We estimate there to be approximately 60,000 adults in this situation at any one time in England, with more people constantly moving in and out of the group.

This group of individuals have often developed poor relationships with professionals and support services after many failed attempts to engage and feelings of being constantly excluded. This is likely to exacerbate mental health problems, increasing the likelihood of suicide.

When developing tailored responses to the group identified in the consultation document, specific consideration should be given to those within each group which experience multiple problems and who may be excluded from efforts to meet the needs of the wider group.

Additional measures or approaches that could be considered

One model of effectively supporting people facing multiple needs and exclusions can be effectively supported is through small teams which provide one-to-one support to individuals, helping them access the range of services they need to address the multiple problems in their lives. These teams are supported by flexible responses and strategic commitment from all relevant local agencies, ensuring that they all ‘go the extra mile’ for this group.

In order to achieve this, all local services have a role to play. In every local area council leaders and senior officials must ensure that:

- People experiencing multiple needs and exclusions are identified and support is targeted for them
- There is a coordinated response from local services, led by a lead individual or team
- All mainstream services provide flexible responses, backed by strong strategic commitment
- Opportunities to intervene early are not missed.

The services involved must:

- Take a personalised and assertive approach to engagement
- Provide a consistent and trusted source of support
- Involve service users in developing, delivering and improving services
- Develop the skills and expertise of their workforce to effectively meet individuals’ needs.

The case study below provides an example of how this support can be provided.

HMP Lewes to Brighton project

Background

Revolving Doors was approached by HMP Lewes to consider ways in which a group of prisoners repeatedly returning to the prison on short custodial sentences could be better supported to stop reoffending. The resulting project is being delivered by Brighton Housing Trust. Using a coordinated lead professional model involving statutory and voluntary services at the prison and within the community, the project targets short term prisoners with multiple problems returning to Brighton and Hove.

The target group for this pilot includes some of the people most at risk of suicide in the Brighton. A Home Office study has found that the risk of death for men released from prison is 40 times higher in the first week of release than for the general population, equivalent to suicide risk in the first week of discharge from hospital for psychiatric patients. This is largely attributed to drug-related deaths.¹ Within a year of release, men are eight times more likely than the general population to commit suicide.²

In 2008 at the project's inception the suicide rate in Brighton and Hove was about 1.7 times the national average for England and Wales. Data from 2003/4 shows that each year around 38 people (27 males, 11 females) take their own life in the area.³ Although this rate is well above the national average, recently released prisoners are considerably more likely than the general population of Brighton and Hove to commit suicide. Reducing suicide is a key priority for Brighton and Hove, and the high risk nature of the project's target group was a key factor in its establishment.

Service model

A Project Coordinator based in the prison receives referrals and works with the prisoner and local agencies to identify a lead agency/worker who will coordinate the support required on discharge from prison. The project use a coordinated lead professional model, involving statutory and voluntary services at the prison and within the community, to co-ordinate the support required for each individual on discharge from prison. The project is managed by Brighton Housing Trust (BHT), in partnership with HMP Lewes and Revolving Doors Agency (RDA) and works with an average of 40 clients per year.

The target group of the project is those who meet all of the following criteria:

- Prisoners at HMP Lewes who are either serving a sentence of less than 12 months or are on remand and likely to receive a sentence of less than 12 months
- Returning to the City of Brighton and Hove
- Have either a personality disorder or a mental health problem in combination with one or more of the following needs: substance misuse (alcohol and/or drugs), housing problems or homelessness, literacy problems, debt, behavioural problems, history of rejecting service interventions/ problematic engagement with services.

¹ *Drug-related mortality among newly released offenders 1998 to 2000*, Home Office online report 40/05

² Pratt, D. Piper, M, Appleby, L. Webb, R. Shaw, J. *Suicide in recently released prisoners: a population-based cohort study*, The Lancet - Vol. 368, Issue 9530, 08 July 2006, pages 119-123

³ Bernadette Alves (2007) *Mental Health Needs Assessment for working age adults on Brighton and Hove*, Brighton and Hove PCT

The project aims to engage with those who have ‘fallen through the gaps between services’. It therefore does not target groups who are entitled to support from other services.

Outcomes

Achieved during one year pilot* (data collected between July 2009 & Aug 2010)

Target	Result
†90% of group to reduce re-offending	88% of clients saw an increased gap between custodial sentences
40% reduction in offending for each person	80% saw the gap between custodial sentences increase by 40%
60% referred into appropriate mental health service	Half of clients needed a mental health referral – of these 93% of clients were referred
60% increase in tenancy sustainment	75% of clients saw an increase in tenancy sustainment, of these 82% saw an increase in tenancy length of 60% or more
85% accommodated on release	94% of clients would have been homeless in Brighton on release without advice and support. 91% of clients had accommodation planned on release, 78% had accommodation on the day of release, and 13% had to stay with friends/family whilst waiting for their planned hostel space to become available.
60% engaged with identified lead agency on release	91% of clients were engaging with a lead agency on release

*Figures include clients where the data is available and applicable only – in some cases it was too early, at the time of evaluation, to make a judgement about a client’s improvement against baseline data.

†BHT is currently seeking access to police data for information relating to the reducing reoffending outcome. In the interim the project is monitoring whether clients have seen an increased gap between custodial sentences.

For more information please contact:

Anna Page
 Senior Policy Officer, Revolving Doors Agency
anna.page@revolving-doors.org.uk 020 7253 4038