

Cross-Party Group on Women, Families and Justice

Tuesday 5th December 2023 6-7.30pm, The Scottish Parliament

Minute

Chair: Rona Mackay MSP

Attended

MSPs

Rona Mackay MSP
Collette Stevenson MSP

Invited guests

Jenni Minto Minister for Public Health and Women's Health
Gill Imery External Chair, Deaths in Prison Custody Action Group

Non-MSP Group Members and Other Attendees

Anne Pinkman	Co-secretariat CPG on Women, Families & Justice
Dinah Aitken	Salvesen Mindroom Centre
Elaine Stalker	Families Outside
Faye Keogh	Turning Point Scotland
Heather Manclark	Families Outside
Karen Armstong	Families Outside
Kerry Knox	Families Outside
Kerry McGhee	Pheonix Futures
Louise Adams	Families Outside
Mike Nellis	University of Strathclyde
Nancy Loucks	Families Outside
Sam Jelf	Families Outside
Sarah Rogers	Families Outside
Sheila Gordon	CrossReach
Shumela Ahmed	Resilience Learning Partnership
Stephen Sandham	HMIPS
Steven Millar	Families Outside
Sue Brookes	SPS

Agenda Item 1

Apologies	
Adele Hill	CJVSF Representative
Alison Bavidge	SASW
Alison Hendry	Angus Council
Audrey Mitchell	Fife College

Becky Reid	Glen Isla Project
Gareth Rose	SPS
Georgina Lyttle	Circle
Gill McIvor	Stirling University
Helen Reilly	QNS
Janine Bonner	Families Outside
Jonathan Sher	
Kate Philbrick	
Linda Bendle	
Mags Higgins	Justice for Women
Margaret Malloch	SCCJR
Rose Gibson	
Scott McLellan	SPS
Toni Groundwater	Families Outside
Tracey McFall	Stirling Community Enterprise
Wendy Sinclair-Gieben	HMIPS

Agenda item 2

Minutes of previous meeting of CPG Women, Families & Justice September 2023

- Approval of minutes – proposed by Kerry Knox and seconded by Collette Stevenson, MSP.
- Actions – no questions from attendees raised in relation to actions

Agenda item 3

Jenni Minto, Minister for Public Health and Women's Health

The Minister thanked the group for the opportunity to provide an update on what the Scottish Government has been doing to improve health outcomes of women in custody. The Minister noted that we know many of those women are amongst the most vulnerable in society highlighting that they will typically have a relatively higher rate of both mental and physical health difficulties compared to the general population, and that these conditions are often exacerbated by using substances, and by mental and physical adversities experienced in both childhood and adulthood. The Minister further noted that many of these women are victims of crime themselves.

The Minister noted that in 2021 the Scottish Government funded research carried out by the University of Glasgow which reported that 78% of women prisoners in Scotland have a history of significant head injury, most of which occurred in the context of domestic abuse. Of those reporting a significant head injury, 69% reported the first head injury as occurring before the age of 15.

The Scottish Government also commissioned a comprehensive health needs assessment of Scotland's prison population in relation to social care, substance misuse, mental and physical health, published in September 2022. A Short Life Strategic Leadership Group was established in response to the needs assessment with leaders from across the health and justice system. The group has been working to remove systematic barriers that impact the delivery of healthcare for people in prison and identified three key areas of improvement. Corresponding task and finish groups were established and have identified a number of service change ideas which

will improve outcomes for people in prison. These ideas include NHS Boards having a non-executive director on the board who champions prison healthcare, and the introduction of a second mental health screening as part of the prison admissions process. At Ministerial level, a cross-portfolio group for prison health and social care has been established consisting of the Minister along with the Cabinet Secretary for Justice and Home Affairs, the Minister for Drugs and Alcohol Policy, and the Minister for Social Care, Mental Wellbeing and Sport to ensure an integrated approach to the health of people in prison.

Additionally, the Minister noted that the Scottish Government is investing £5.3 million over the next five years to improve clinical IT across the prison healthcare estate which will reduce clinical risk and improve healthcare for people in prison. The Minister expressed concern at the current lack of integration in healthcare and the information that people in prison bring with them.

The Scottish Government are also funding Public Health Scotland to improve the availability of clinical data to work with the SPS and NHS Boards to gather data to help better understand and monitor the health and social care needs and outcomes of the prison population.

The Minister noted that the Scottish Government recognises that health inequalities are high among the prison population and that this is particularly true for women in custody. In recognition of this, the new national facility for women HMP Stirling was opened this year. It will accommodate the highest risk and highest need women and provide them with trauma informed care to address their specific needs. The Scottish Government has also recognised that NHS Forth Valley needs investment to support the women that are in HMP Stirling so an additional £1.3 million has been allocated to build the trauma informed workforce. The Minister highlighted the mother and baby unit at HMP Stirling, noting that whilst it is not currently being used it is important that pregnant women can be accommodated, and further highlighted that during time in custody, pregnant women will continue to receive antenatal care including dedicated support from a prisoner mother and baby nurse and from the community midwife.

The Minister highlighted the work of Police Scotland noting robust processes are in place to support women in custody. Upon entering police custody a vulnerability assessment is used to identify individual health and wellbeing needs and to determine what care is needed whilst in custody. Healthcare in custody teams also provide information about / referrals to further healthcare or wellbeing support services.

The Minister expressed her hope that women can avoid entering custody by being supported in their communities. However when this is not possible, the Scottish Government is endeavouring to ensure that they receive high quality, trauma-informed care.

Following the update, the Minister responded to a range of questions.

Rona Mackay thanked the Minister for her update and raised the issue of Foetal Alcohol Spectrum Disorder and asked if the Minister and her team could have a look at this.

The Minister noted that this issue falls out with her portfolio but the Minister for Social Care, Mental Wellbeing and Sport, Maree Todd, will speak to this at the next meeting of the CPG.

Sheila Gordon noted that CrossReach are responsible for two Prison Visitor Centres at HMP Perth and HMP Polmont. In relation to HMP Polmont, she raised the issue of the lack of visits that young women get, with many not receiving any visits at all. Sheila highlighted how connection underpins a lot of physical health and mental health and so if connection is not right the rest won't follow. There is a need to tackle the issue of women not having the same connection as men and there is more that we can be doing around this to improve things.

The Minister agreed that more needed to be done on this issue and expressed an interest in what CrossReach are doing around this.

Sheila noted that they had held a focus group with young women in Polmont who had spoken about some of the systems problems that happen within the booking of visits and also the worry of visitors not turning up for visits. Sheila explained that young women would rather not have someone coming to visit them than risk having someone not turn up. CrossReach are trying to work on this issue with young women by identifying who are their networks, who have they got that could visit? Often the young women can feel too ashamed to connect with these networks. Sheila noted that there is work that needs done around this but it lies a bit out with the work of the Visitor Centre and the prison. Sheila raised the additional point that it is often family that remind prison staff about medication and that people in prison often don't bother to make a fuss about medication when they enter prison.

The Minister noted that medication is a really important issue and ties in with the earlier point about IT and making sure you have the right data so you can know what medication prisoners are on. The Minister also noted that the stigma of being in prison and how do to reach out to the right people to visit is an issue for the Cross-Ministerial Group to think about.

Collette Stevenson, MSP stated that it was positive to hear about health integrated IT developments. She noted that she was aware of issues around this whilst an Independent Prison Monitor at HMP Shotts and is aware that the same issues also arise within the women estate. She noted that more often than not women going to HMP Stirling are from out with their NHS locality and they could be on a list of medications and NHS Boards are not talking to each other and asked how is the health integrated IT going to look and when will it be implemented?

The Minister noted that work on this has started and will take place over the next 3 or 4 years. The work will make sure data is secure as well as shareable.

Shumela Ahmed highlighted that IT issues don't just affect NHS services, they affect multiple statutory services in terms of the ability to be able to share information. For example, in relation to criminal justice social work, it would be very beneficial if women did not have to continuously repeat their stories if they're repeatedly up for various offences, noting it is trauma inducing for people to have to do so.

Collette Stevenson stated that the NHS should be national but it operates regionally and the sharing of information isn't there. Services should be about being person-centred particularly for women who are dealing with addiction problems as well as mental health and trauma.

Faye Keogh noted that in terms of information sharing, involving third sector organisations adds an extra layer of challenge. Turning Point Scotland has data from overdoes response team pilots that explored this issue that they would be happy to share.

The Minister agreed about the importance of partnership working between government, agencies and the third sector and academics.

Anne Pinkman noted it might be worth looking back at the work was done around information sharing when the NHS assumed responsibility for prisoners in their health board areas. Anne also raised a point on behalf of Juliet Brock (Mental Welfare Commission) noting that at the May meeting of the CPG Juliet and Wendy Sinclair-Gieben raised concerns about the increasing number of men and women who are in prison awaiting transfer to mental health facilities. Mention had been made that there was a stakeholder meeting being held in May and that a report was to be completed from that meeting but nothing has yet been produced yet. Anne stated that prison should not be used as a place of safety for women and it is still being used as that. Noting that this issue cuts across agendas Anne said it would be much appreciated if it could be taken to the Cross-Ministerial Group.

The Minister acknowledged the previous work that has taken place in terms of information sharing noting the investment in this area is to improve existing processes. In terms of the mental welfare issue, the Minister noted she will suggest this as a future agenda item for the Cross-Portfolio Ministerial Group.

Agenda item 4

Gill Imery, Chair, Deaths in Prison Custody Action Group – update on implementation of recommendations of the Independent Review of the Response to Deaths in Prison Custody plus Q&A

Gill thanked the group for the invitation to provide an update and noted it was encouraging to see the level of interest and support for the work. Gill gave an overview of the review timeline highlighting that the review, published in November 2021, provided one key recommendation, 19 recommendations and 6 advisory points, all of which were accepted in principle by the Scottish Government. Following publication of the report, work started on the key recommendation – there should be an entirely independent investigation of every death in prison and the investigation should be carried out by a completely new independent body. Part of the discussion of how to advance that key recommendation led to a decision to bring someone in who hadn't been involved in any of the work as an external chair to oversee implementation. Gill began this role in April 2022 and from the outset prioritised engagement with families through a Family Reference Group. Gill explained that some of the families who came to the group were involved in the review and some were new and that the group has grown over time as more families have been

bereaved. Some members have stepped back as they've found it frustrating not seeing the progress and feeling as though they are continually saying the same thing at meetings and nothing is happening, whilst others find it too painful. Gill highlighted that trust is a massive issue for families. Families are keen to participate in all aspects of the work which some colleagues found difficult as they felt it inhibited discussions at meetings if families were present. Gill noted we need to think about why this is the case. Gill commented that families have been remarkably resilient taking about potentially triggering issues. People coped very well with these discussions and would much rather be in the room than feel something was being concealed from them. Gill highlighted that the Family Reference Group is not representative, noting that she is aware that the members of the group were motivated to take part due to a negative experience and recognises that there are families who haven't had that experience and who have felt that people have tried their very best in difficult circumstances. However, she also noted that are likely many others who have had negative experiences who don't feel able to participate in this type of group, noting that sometimes people who most need engagement and support are least able to make use of it.

Gill explained that in December 2022, one year after the review was published, she published a progress report. When the draft report was circulated, none of the recommendations had been completed. This was very disappointing for families. However the draft reported prompted quick action from SPS resulting in two recommendations being implemented immediately. By the time the report was published, three and a bit of the recommendations had been addressed.

Providing more detail about the Family Reference Group, Gill explained that the meetings worked best when someone was invited to come and share the work they were doing with the group. SPS has sent various representatives and Gill cited the family support booklet published in June 2023 as a good example where families were able to engage with SPS. Gill noted that there were unfortunately less positive experiences for the group, with an example given of health and social care colleagues speaking to the group about the provision of health care in prisons with the perception that issues around health care have all been sorted which was not the experience of the families.

Gill highlighted that she gave evidence to the Criminal Justice Committee in September 2023 and at that time five recommendations had been implemented. By the time the second progress report is published, it looks as though eight recommendations will be completed and an advisory point also achieved. Once the second progress report has been published, Gill noted that there is a need to ensure someone is checking that the work is still going on and is having the intended impact and actually improving families' experiences and preventing future deaths.

Rona Mackay thanked Gill for the update and asked if there is a timescale for the rest of the recommendations to be implemented?

Gill explained there were no timescales put on the recommendations. She has pushed for stakeholders to identify milestones but noted it can be difficult to get

people to be precise. Gill stated that two years from the review, it's not unreasonable for families to expect that they will all be complete

Mike Nellis asked about progress relating to the key recommendation and the work relating to international comparisons.

Gill noted Scottish Government has been working on the key recommendation since the report was published and that there has been a pilot commenced recently in relation to this recommendation although it has been delayed a little. Gill expressed her own view that because the Fatal Accident Inquiry process was excluded from the terms of reference for the review and from her remit either it feels as though the key recommendation was arrived at to treat symptoms of problems in the FAI process. Gill stated that it is unavoidable to comment on the FAI process and highlighted shortcomings in terms of the time taken and the quality of communication with families. Gill explained that she understands and respects the view that others have about the need for a wholly new body and investigative process but highlighted that there are already numerous processes in existence - SPS, NHS, FAI - a new one would be adding another process.

Mike commented that as the new process wouldn't be a replacement for the current processes but would be another layer it doesn't sound like a good idea. If the complaint of families is that the investigation takes too long, frustration from that the time taken to improve the process is understandable. Mike commented that concerns about FAIs taking too long is a serious and ongoing problem which the review process in and of itself has not managed to solve.

Gill noted that the response is doing the best it can within the remit. As the terms of reference specifically excluded FAIs, the key recommendation tries to address the main shortcomings of that process which are delay and communication with families. Gill raised the question of whether a new process is needed or whether we need to fix the one we've got.

Sue Brookes expressed agreement with Gill noting that the FAI process is unhelpful in lots of ways. The FAI process is adversarial, doesn't support learning, takes too long and is retraumatising for all involved. Sue highlighted that parts of DIPLAR and NHS processes are primarily learning processes not investigatory processes whereas FAI is an investigatory body.

Stephen Sandham expressed sympathy with Gill's views of whether or not the key recommendation was the right recommendation but noted that the review was of the view that there was merit in having a new body and a new process and highlighted that the key recommendation was not just about conducting investigations of individual deaths but also about wider data collection and analysis so that key themes could be identified and Scottish Government, SPS, and health services could address those issues.

Sue highlighted that the FAI process from the prison perspective focuses on the 24-48 hours before a death and a short period of time afterwards and there would be more learning out of a process that is more like the significant case review that is undertaken in social work. It would look at the life history of the individual and learn

more about how the individual arrived in custody in the first place. Sue noted that if we really want to gather data and analysis about how to prevent deaths in custody, we have to look at the journey that the individual has taken before they came into custody because the accumulative nature of their health and their vulnerability and underpinning traumas that have brought them there are the issues we should be looking at, as well as SPS involvement and care of individuals when they are in custody.

Rona commented that the issue around poor communication with families doesn't seem like an expensive fix to say first and foremost we have to keep families informed. She noted that this issue runs right through the justice system and commented that it would make such a difference, setting aside the complex nature of FAIs and deaths in custody, to treat families with respect and questioned why does this not happen?

Nancy Loucks highlighted that the main issues behind the key recommendation were about having some answers sooner, more rapid information and investigation about what happened, but also about involving the families directly, not just keeping them informed, because there is no other opportunity for them to do that. Nancy agreed that Sue's point about prevention is also key and this was a separate recommendation that also hasn't been actioned. Nancy further agreed that Stephen's point about a process like this having a responsibility to collate recommendations or findings on an annual basis to learn from all of the deaths is really important too. Nancy noted that another part of the key recommendation is about provision of legal aid for families to have legal support for any kind of investigation of deaths, highlighting that SPS has legal support, health services have legal support, but the families don't unless they pay for it themselves. Commenting on Mike's point about the comparative aspect, Nancy noted that the review co-chairs have been involved in visits to Northern Ireland, the Republic of Ireland and England to learn about their processes and practices. The second round of test runs of investigations of deaths here has been postponed but is due to happen early in the new year.

Kerry Knox highlighted in relation to the prevention of deaths, that families have so much information to share and that there needs to be avenues for families to be able to feed that information in. She noted this is something we can work together to change that doesn't take money but is about opening up the processes that exist.

Rona expressed agreement with this and raised the question of where are the blocks preventing this from happening? It doesn't take a lot of resource and is something that could and should be done.

Nancy commented that this issue is related to the earlier point about the need for health services to be speaking to each other. Nancy noted that waivers for people to sign when they enter prison can be used to give permission to talk to their families if the person is unable to. At present there are currently different waiver forms for each prison and even where they are in place they are not always implemented. It can also be challenging to keep next of kin information up to date.

Agenda item 5

Current and forthcoming Bills with impacts for children's rights - Due to being short on time, the group agreed not to discuss this item and to contact the secretariat directly if they wished to raise any points in relation to this before the next meeting.

Agenda item 6

Agency updates

Kerry Knox updated that Families Outside has provided input into the evaluation of community custody units.

Sue Brookes updated that SPS have published their transgender policy which is available on the website. She also highlighted that work has been ongoing developing the alcohol and drugs strategy and the health strategy. Sue also voiced concerns about the rising prison population and noted that whilst women have been moved to HMP Stirling since the last CPG meeting, there are still women in other establishments.

Stephen Sandam updated that HMIPS is due to publish the inspection report on HMP Polmont and the inspection programme for 2024-25 which includes inspections of HMP Stirling and the CCUs in February.

Faye Keogh that Turning Point Scotland has prepared a briefing paper (circulated to CPG members) around potential closure of the 218 service. There was some discussion about what the group might be able to do around this issue. Faye will keep the group updated around this. Mike Nellis also spoke on this issue highlighting the incredible expertise of the 218 service and commenting there are questions around the evidence base for the potential decision to close the service and the process taken to arrive at this decision.

Agenda item 7

AOB - It was noted that the next meeting of the CPG will be held online on 5th March.