

IAP Keeping Safe Conference: Robert Buckland speech

Thank you, Juliet, who is someone I have known for many years and has a deep commitment to her position.

From my understanding this conference is unprecedented – bringing together colleagues, practitioners, families, and ministers – not just to speak but to hear from you. I wish I could say that deaths in custody are isolated events but I can't do that and I've come to see what we can do about it.

I want to express my thanks to the Independent Advisory Panel on Deaths in Custody – and all those involved – for organising today's event.

The Panel's work giving independent and challenging advice to me and my colleagues shapes the government's approach to safety. I have no doubt that harnessing not just the panel's expertise but its ability to engage with a wide range of stakeholders makes people in custody safer.

The theme of this conference – togetherness – is a demonstration of that engagement and the ethos of the Panel.

The idea of togetherness is important. Not because it sounds good. But because, like most things, there is no magic wand when it comes to improving safety in custody. We will only take positive steps forward on this if we work together. There is a lot going on around safety right now – there are several initiatives and workstreams that I will reference later in my speech.

But I would like to start with the reason we are all really here and that, I think, is our shared humanity.

Over the course of my quarter century career as a criminal barrister and a Crown Court recorder, naturally I came across and got to know hundreds, probably thousands, of people who had experienced being in custody. The thing that always struck me is that when a person loses their liberty, they do not suddenly stop being human. Their humanity does not disappear from them. They are still people. Like you and me. And every person deserves dignity, even if they are suspected – or convicted – of a crime. It was Dostoevsky who wrote that 'a society should be judged not by how it treats its most outstanding citizens, but by how it treats its criminals.'

So, everyone deserves to feel safe, even from themselves. Now as the Justice Secretary and on my regular visits to prisons, I am able to gain some very direct insight into what life is like for people in custody – building on those years of past knowledge; as the minister responsible for their safety, I feel a very personal sense of duty to them.

Any death in custody isn't a statistic, it is a tragedy. I have asked the Ministry of Justice to inform me personally of each instance and the circumstances surrounding it. I was particularly saddened to hear of those

deaths that happened recently over the Christmas period – what a time to juxtapose the joy of Christmas and the situations where people are driven to take their own lives.

I think it is really important that we learn from each death – so that we can understand what went wrong and how we could have done things differently. For every tragedy there will of course be countless instances where something made a difference and a life was saved. It is important we learn from that too so we can share and amplify what works to keep people safe.

That is something we can only get right by working together.

The picture in prisons today

Sadly now, we know the alarming level of the problem.

In the 12 months up to December 2019 there were 84 self-inflicted deaths in custody, that is slightly down from 92 deaths in the previous year but there is no acceptable level. One self-inflicted death in custody is one too many.

Levels of self-harm are rising. There were more than 60,000 incidents in the 12 months up to September 2019. That is up 16% from the previous year and I am sad to say at a record high.

The reality is that on any given day, over 2,500 people in our prisons are, according to assessment, 'at risk' of harming themselves. That is an enormous challenge for our criminal justice system.

It is perhaps axiomatic for me to say that we need to reduce those numbers but it is one of my goals in office to see a reduction. They are not just figures on a page, they are real people.

Behind the numbers

Behind each statistic there is a real person and a real story. Behind each number there is trauma and there is tragedy.

Recently there have been a number of television programmes like ITV's Inside Belmarsh, Channel 4's Prison documentary. I think it helps in raising general awareness about the realities of life in custody. We all know what it is really like, which can be miles apart from the cosy clichés we hear.

I was struck by Collette's story in Britain Behind Bars. In custody at HMP Downview and desperate to see her children – like any parent would be – in that state of anxiety she lashed out at others and herself.

In her case I believe the right approach was taken in adjudication – that more charges were in fact the last thing that would be appropriate. Like so many people in prison at risk of causing themselves harm, it was empathy and the right support that Collette really needed.

Preventative measures

Now, when it comes to prevention, we know there are certain steps we can take in prisons to mitigate against – to reduce – the risks of self-harm and suicide.

First, it is really important that we are clear about whether or not prison is the appropriate setting in each individual case.

Liaison and Diversion

This is why the work of NHS England and NHS Improvement's Liaison and Diversion services place clinical staff at police stations and courts to assess and refer those with mental health, substance misuse or wider vulnerabilities – who we know can be at risk of self-harm – the right sort of treatment and support that can help. Information can then be shared to inform sentencing and disposal decisions. And where appropriate, offenders may be diverted away from the criminal justice system altogether, or away from custody in the first instance.

What's more, through the Community Sentence Treatment Requirement (CSTR) Programme, we are working together to improve access to timely and appropriate mental health and substance misuse services for the offenders who need them. Because the aim is to ensure greater use of mental health, alcohol and drug treatment requirements as part of community sentences, supporting efforts to reduce reoffending.

And our evaluation revealed that the Programme is providing a much clearer pathway for the use of mental health treatment requirements in particular. The Programme is currently operating in courts across ten areas in England, with further sites are expecting to go live in 2020.

This sort of smart approach – giving options to the police and courts – is about working together to address the causes of offending and get people into the right parts of the system: where progress is most likely to be felt and harm is least likely to happen. And this is happening now as we speak.

Mental Health Act

It is also important that we are alert at every turn to the circumstances that can put people at risk.

The independent review of the Mental Health Act, led by Professor Sir Simon Wessely – Regius Professor of Psychiatry at King's College London and president of the Royal Society of Medicine, considered a range of issues concerning prison safety and mental health.

The review is clear that police cells and remand to prison should never be considered as viable options when seeking a place of safety for a person in crisis. It recommends that alternatives in healthcare settings are made available. Working with justice and health partners, we are determined to make that happen.

There are lengthy delays during transfers between prisons and secure hospitals and this was also highlighted by the Wessely review. Delays of up to 100 days and the associated impact for treatment can undoubtedly contribute to deterioration in a person's mental health, which could put them at greater risk of self-harm or suicide. We need to ensure that transfers are much quicker so that appropriate treatment can be accessed sooner.

The work of Sir Simon and his team has been vitally important. I am pleased to say that we will be publishing a White Paper in response to the review as soon as possible this year.

Early Days

I want to keep on the topic of timing as we know that intervention at the right time can be crucial in the prevention of harm. There are key periods when a person is at greater risk to themselves. As recent deaths remind us, the period after entry to custody – including on recall – is one of particularly high risk

And with this in mind, we have published an Early Days Toolkit that promotes a whole prison approach to prevention – in other words every part of the prison has a responsibility for safeguarding – from the moment someone enters custody right through their sentence.

And that Toolkit supports individual prisons to evaluate and improve their own approach to suicide and self-harm during key time periods, spreads good practice from the best performing prisons, and signposts to resources that can help prison staff to address underlying causes.

We want to share best practice so that more people can benefit.

The Samaritans

It is also important that people can support each other – because, though we can empathise with them, only they know what being in custody is really like.

We are continuing our partnership of nearly thirty years with the Samaritans – who I am so pleased to see represented here today – with an annual grant of £500k until 2021. This money is testament to the Listeners scheme, which trains selected people in custody to provide emotional support to others around them who may be at risk of falling into the types of crises that could precipitate self-harm or suicide.

The Listener scheme operated in 111 prisons last year, it provided over 30,000 hours of emotional support during nearly 50,000 incidents of contact. And this was delivered by over 1,400 active Listeners, supported by nearly 800 volunteers with the Samaritans.

With their support we have also launched and rolled out a new suicide prevention learning tool, designed to equip prison staff with the skills and with the confidence to engage with people at risk. This is available on the Prison Service intranet and has been provided to safety teams in DVD format for use during training sessions and staff briefings.

We are also further running a pilot with the Samaritans in 15 prisons to help people in custody and staff following a self-inflicted death – to reduce the risk of further harm by supporting those who may have been affected. That includes guidance for Governors, including an on-site Samaritans adviser in the period immediately following the tragedy, information for people and staff, as well as additional training for Listeners – all designed to ensure that everyone in the prison community is able to get the additional help they need at a really difficult time.

Ultimately, I think the Samaritans work in prisons is about relationships. It is about making sure people do not feel alone; reassuring them that there is someone there when they are struggling – someone who understands what they are going through.

Families

As we know, relationships in prisons are so often key to better outcomes.

Family relationships are particularly important – for people's mental health but also for their rehabilitation. Families act as a support and encouragement as people progress in their custodial sentence. It can often be a family member who raises the alarm when someone poses an immediate risk of harming themselves.

We are working to make prisons more aware of the crucial role that is played by families – through publicity campaigns and making information available to prison officers, including learning bulletins on responding to safety concerns and how to share information with families.

As part of the improvements we are making to ACCT – our case management process for those at risk – that I will come onto later, we will be encouraging more proactive engagement with families. This is all designed to give staff greater confidence to build relationships with the family members of people in their care.

Most importantly, families must be able to make contact to raise a concern over safety at any time. We are working hard with all prisons in the estate to ensure that there is a well-advertised and reliable means of speaking to a member of staff – such as a duty governor or orderly officer – where there is an imminent risk, as well as a separate voice mail service for less urgent matters where calls are monitored regularly and, yes, followed up.

Prison Officers

That line of communication is critical because prison officers are the first line of defence when someone in custody is in real danger of causing harm to themselves.

Keyworkers

Our keyworker model is improving the way prison officers work with and support people throughout their journey in custody.

Keyworkers establish relationships with small numbers of people in prison – usually around six – and become consistent points of contact for them. This allows trust to be built with them, encouragement to be given to them, and for them to be made to feel that someone is looking out for them and on their side.

They meet regularly with their select group to provide support and listen to any concerns, including those which are over self-harm and suicide.

This is a specialised type of support and managing a caseload takes both time and effort. I am very pleased to say that keyworkers are already working in 92 prisons in the male estate. And since 2016 we have been able to recruit and train 4,500 new prison officers – that will help us to reach our aim of rolling out the keyworker model across the closed estate.

But of course, I recognise that recruitment – and retaining staff – will always be a challenge.

Prison Officer training

The new prison officers taking up their first posts and the ones already inside the estate must be properly trained to spot and intervene when there are concerns about someone's safety.

Our improved suicide and self-harm training is being delivered to every new member of prison staff and existing staff are undertaking it as refresher training. The training has reached over 25,000 members of staff to date and over 14,000 have completed all six training modules.

And later this year we are looking to refresh our approach to safety training, with a new and improved model to include self-harm, violence, mental health, neurodiversity (this is not the first time I've mentioned this and it won't be the last), and supporting people with complex needs – each with trauma and its effects as a central theme throughout.

As ever, we are collaborating with partners from across the justice and health sectors to develop this with best practice in mind – so that together we can create the best possible training.

Support for people who self-harm

Now when a someone does self-harm, or attempts to take their own life, it is important that we offer the right care in each individual case.

Healthcare partnerships

The Ministry of Justice, HMPPS, the Department of Health and Social Care, NHS England are working together to deliver safe, decent, effective healthcare for all people in custody.

I know you heard from my colleague in government, Nadine Dorries, earlier who said reminded you that the National Partnership Agreement for Prison Healthcare in England and the workplan that accompanies it, includes a

priority for us to work together to improve both mental health and wellbeing, as well as securing that vital timely and appropriate assessment, treatment, and transfer of care.

This is about accepting that no one agency can turn the dial on this by itself – only when we are united in our efforts can we really make a difference.

Assessment, Care in Custody and Teamwork

And with that in mind we have been working with healthcare partners as the joint HMPPS and MoJ Prison Safety Team have revised and updated the Assessment, Care in Custody and Teamwork case management approach. That work included a wide-scale consultation in 2018.

Last year we piloted changes to ACCT in nine of our prisons and a detention centre in the male, female and youth estates, including a focus on the individual needs and effective multi-disciplinary working.

Now initial feedback on the pilots has been positive, however there is still work to be done – particularly around de-stigmatising self-harm in custody and making sure that people feel involved in the ACCT process – that it is not just something done to them, but rather, with them, for them and focussed on them.

As we finalise the new document, there are a range of areas we are looking at to improve the process, including:

- Agreeing roles and responsibilities for the professionals who are supporting people through ACCT, so that we can offer support tailored to each individual to meet their needs and reduce their risk of harm;
- Also, looking at how ACCT and Challenge Support & Intervention Plans can be better aligned to support those at risk of causing harm either to themselves and others;
- Supporting those moving off ACCT so that they do not feel there is an immediate dropping off of support that we know can lead to relapse. That is a concern for treatment in the community too when people come to the end of their treatment. We must ensure there isn't a cliff edge for them.

As part of the changes we have made to the ACCT process, we have focused on improving the design and format of the document itself. We want to ensure that this is streamlined, easy to use and follow, and facilitates meaningful care for individuals who are at risk. I have been looking at these in prisons myself and I think it's important that the documents are human, easy to use, and accessible.

The revised approach will be rolled out in the women's estate initially and the nine other ACCT pilot sites from July, before being rolled out more widely from October.

As this happens we are working together with key stakeholders to develop communications materials that raise awareness of the changes, as well as

challenging stigma, and improving mental wellbeing in prisons.

A better estate

We have been working for a number of years to improve the prison estate as a whole – to make prisons safer and raise levels of decency.

Now all the work I have outlined today – all the ways we are working together to make positive change – depend on us having an estate with the right capacity and ability to carry it out. In August we announced a £2.5bn investment to transform the prison estate and create 10,000 new prison places.

A more modern, better estate, with more resources, and more places, will be better placed to bring down levels self-harm and suicide.

Conclusion

In closing let me say once again how grateful I am to the Panel – for their ongoing work and for today's conference. And let me also say how grateful I am to each of you for your individual contributions – particularly to the families of those who have taken their own lives.

As human beings, I think that drive to protect people – to offer them dignity even in punishment – is a very natural one. I am committed, as you all are, to making prisons safer for people who might be at risk of harming themselves – not to say we moved the numbers, but so that we can save lives.

We will only achieve that by working together...

... with the police, the courts and clinicians, to determine whether diversion into treatment is a more appropriate step than custody...

... with mental health experts, families, and the third sector who can ensure that we step in at the right times and with the right interventions...

... with prison officers who can encourage and reassure those at risk and do so with improved training that is based on the very best practice...

... with healthcare partners who can help us to deliver effective support based on individual needs...

... and with any stakeholder who has a contribution to make in keeping people in custody safe.

As we continue to work together during my tenure as the Secretary of State, please know that my door is always open to those who want to make a difference.

Thank you.