

Cyflwynwyd yr ymateb i ymgynghoriad y [Pwyllgor Cydraddoldeb a Chyfiawnder Cymdeithasol](#) ar [Profiadau menywod yn y system cyfiawnder troseddol](#)

This response was submitted to the [Equality and Social Justice Committee](#) consultation on [Women's experiences in the criminal justice system](#)

WECJS 14

Ymateb gan: Coleg Nyrsio Brenhinol Cymru | Response from: Royal College of Nursing Wales

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## **Royal College of Nursing written evidence to the Equality and Social Justice Committee inquiry into Women's experience of the criminal justice system**

The Royal College of Nursing (RCN) Wales welcomes the opportunity to provide written evidence on women's experience of the criminal justice system. RCN Wales would welcome the opportunity to provide oral evidence.

### Summary:

- There is a lack of facilities in Wales for women who encounter the criminal justice system, including substance misuse services, forensic mental health services and prisons.
- Women in contact with the criminal justice system are more likely to have experiences of complex substance misuse, abuse, violence and trauma and particularly poor mental health compared to men.
- Nurses working within the criminal justice system including substance misuse nurses are vital to supporting vulnerable people by building relationships, providing advice, guidance and treatment.

### Recommendations

- The Welsh Government should evaluate the availability and standard of health services for women in Wales that are in contact with the criminal justice system. This should include substance misuse services, forensic mental health services and how the Welsh Government is fulfilling its responsibility of providing healthcare for women in prison.
- The Welsh Government should support the NHS and independent providers to offer female only services and end the use of mixed-sex forensic mental health and substance misuse services.
- The Welsh Government should establish a national substance misuse and criminal justice clinical network to facilitate collaboration and sharing of good practice across the independent sector and NHS.
- The Welsh Government should instruct Health Education and Improvement Wales (HEIW) to develop a strategy for commissioning and developing post-registration nursing education. This will provide nurses the foundation to advance their careers to specialist and advance nurse practitioners and consultant nurses.

## Secure Services

In the first quarter of 2022, there were 462 people detained under Section 135 and 136 of the Mental Health Act. Of those detained, 54% (250) were female.<sup>1</sup>

Secure hospital services provide care for patients that present a level of risk to themselves and others. There are three types of secure services:

- **Low:** a patients who has complex mental health needs and cannot be safely cared for in non-secure units, i.e. A&E. Often detained under the Mental Health Act.
- **Medium:** specifically designed to meet the needs of patients who present a serious risk to themselves or others, combined with the potential to abscond. Often detained under the Mental Health Act. In many cases, patients will have committed an offence or been referred to the secure hospital by the court services.
- **High:** patients that present with a grave and immediate danger to themselves or others. There is only one high secure hospitals in England and Wales that provides services for female patients.<sup>2</sup>

A Review, *Making Days Count (2021)*, carried out by National Care Commissioning Unit into secure mental health services in Wales, identified significant differences in male and female patients in secure mental health services.<sup>3</sup>

Initial findings of the review concluded identified that Wales is reliant on the independent sector and services in England to care for women needing secure services. Between 2013-2021 there has been an average of 36 female placed in independent hospitals or NHS England hospitals every year. This is due to the reduction of NHS beds over the last ten-years and the reduction of the NHS workforce able to provide care for female patients that require secure services.

The review identified significant difference between male and female patients:

- The average age of females admitted to a secure hospitals is 36: 5 years younger than the average male patient.
- The number of Adverse Childhood Experiences (ACEs) was higher for female patients with an average 4 ACEs while male patients had an average of 2.8.
- Female patients were more likely to be on antidepressants (61.7%) compared to male patients (28.1%).

### Restrictive intervention

The review highlighted that female patients were more likely to exhibit 'challenging behaviours' (89.4%) compared to male patients (71.9%). The most common for female patients were verbal aggression toward staff, verbal aggression toward other patients and deliberate self-harm.

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<sup>1</sup> <https://statswales.gov.wales/Catalogue/Health-and-Social-Care/Mental-Health/Detentions-under-Section-135-and-136-Mental-Health-Act/section135136detentions-by-lhb-age-gender-quarter>

<sup>2</sup> [https://institutemh.org.uk/images/research/7778\\_Secure\\_Hospital\\_Care\\_Brochure\\_A5\\_V5\\_Online.pdf](https://institutemh.org.uk/images/research/7778_Secure_Hospital_Care_Brochure_A5_V5_Online.pdf)

<sup>3</sup> [Making Days Count - National Collaborative Commissioning Unit \(nhs.wales\)](#)

However the review does not provide any insight into why there is a disparity based on sex, or why female patients were more likely to exhibit ‘challenging behaviour’. A follow up review should be done to understand this.

Restrictive intervention is used to address challenging behaviours dependent on risk and response. Verbal de-escalation is not typically classed as a restrict intervention but was included in the review. Interventions include:

1. Verbal de-escalation
2. Time out
3. Restraint (not floor)
4. Supine restraint
5. Prone restraint
6. Seclusion in specialised facility
7. Rapid tranquilisation

Female patients in low secure units were more likely to have been subject to one or more restrictive interventions in the 90 days before the review took place; 72.7% compared to 59.3% of male patients. This was echoed in medium secure hospitals; 60% female patients were subjected to one or more restrictive behaviours compared to 40% of male patients.

Despite the reviews staggering findings, of the 10 recommendations and 39 actions, only two actions referred specifically to female services. This is deeply troubling as it does not reflect the extent to which female patients are challenged by the current system.

That said, RCN Wales does agree with action 4.3 that ‘WHSSC should consider how to enhance specialist female secure services to manage high acuity and highly complex patients.’

Studies have suggested that female patients have different assessments and treatment needs, and ultimately different philosophies of care.<sup>4</sup> Therefore the care of female patients should differ from the care of male patients.

Research has further shown female patients much prefer single-sex environments as they feel safer and more comfortable. Studies have shown that whilst single-sex units do not reduce the possibility of intimidation, threats and abuse by other patients, patients are less vulnerable to sexual abuse, exploitation and serious physical assault.<sup>5</sup> Wales must end the use of mixed-sex secure mental health services.

### Role of mental health nurses

Registered mental health nurses are highly skilled professionals educated to care for people suffering from mental ill-health, particularly those in mental health crisis.

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<sup>4</sup> [Women in acute psychiatric units, their characteristics and needs: a review | BJPsych Bulletin | Cambridge Core](#)

<sup>5</sup> [Safety of women in mixed-sex and single-sex medium secure units: staff and patient perceptions | The British Journal of Psychiatry | Cambridge Core](#)

Mental health nurses provide holistic value-based and non-judgemental care through utilising a psychological formulation and a psychiatric diagnosis while also focusing on all aspects of an individual's life through the development of a professional therapeutic relationship. Understanding the psychotherapeutic process is a distinguishing feature and core component of mental health nursing.

Mental health nurses also need to have a firm understanding of physical health and health legislation including the Mental Health Act 1983 and Mental Health Measure.

Mental health nurses provide support for women in secure services, prisons and those needing support with substance misuse and addiction.

A mental health consultant nurses is an extremely senior role, providing education, research, strategic and clinical leadership. However there has been a lack of investment in post registration education and clinical career pathways.

The lack of investment in post registration education has severely impacted on the development of expert nurse roles including consultant nurses. In the last 10 years the total number of mental health consultant nurses has not risen above 10 and is currently at 8.3 (full time equivalent).

The Welsh Government should instruct Health Education and Improvement Wales (HEIW) to develop a strategy for commissioning and developing post-registration nursing education. This will provide nurses the foundation to advance their careers to specialist and advance nurse practitioners and consultant nurses.

## Prisons

There are no prison facilities for women in Wales. The lack of female facilities in Wales has led to issues regarding distance from home, visits from families and a link to the community.

Any distance away from home is not conducive to the continuation of the family unit as it makes visits and integration back into the community challenging. This is true for men and women. However as women are predominately the primary caregiver it poses a significant challenge, the distance away from home adds to this. Women are held on average 63 miles away from their home, with a significant number held more than 100 miles from their home. This is compared to an average of 50 miles for men.<sup>6</sup>

There is also difficulties regarding accessing healthcare for women who live in Wales but are in prison in England. If a women is receiving treatment in Wales before going to prison they may experience delays in receiving their treatment while in prison due to patient records not being easily shared across nations or a requirement to be reassessed. Furthermore there is no assurance that she have access to continue this treatment in Wales if it was prescribed while in prison in

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<sup>6</sup> Ministry of Justice, (2018), Supporting Data Tables for the Female Offender Strategy

England. This is particularly pertinent for those struggling with substance misuse, for example those that are prescribed long acting injectable buprenorphine.

Furthermore research has shown that an estimate of 600 pregnant women from England and Wales enter prisons each year and around 100 babies are born in prison.<sup>7</sup> Pregnant women in prison are especially vulnerable and need to be provided with healthcare before and after the baby is born. This must include an option of where the baby should be born, the babies right to breastmilk and the mothers need for breastfeeding support.

The Welsh Government should consider the responsibilities to women in Wales and how it can support women that encounter the criminal justice system. RCN Wales recognising the need for a future conversation regarding an expansion of facilities in Wales.

### Substance Misuse

Substance misuse is higher for women encountering the criminal justice system and is often a driver to their offending.<sup>8</sup> The reasons for why women start using drugs differs from men. Fedock et al (2013) found a history of trauma in 51% of their female respondents compared to 24% of male respondents.

Drug addiction is having a disproportionate impact on women in the criminal justice system with around 70% of women coming into custody requiring clinical detoxification compared to 50% of men. Women have more complex substance misuse: some are known to use up to nine different types of substances simultaneously and require detoxification for alcohol, benzodiazepine and opiates.

### Role of substance misuse nurses

There is no nationally recognised substance misuse training or accreditation programme for nurses, nursing staff or the wider health and social care workforce in Wales.

Substance misuse nurses will have a degree in either adult or mental health nursing and have specialised in drug and/or alcohol misuse.

Substance misuse nurses provide patient-centred care and ensures appropriate assessment of patient needs, treatment plans and interventions. They will be familiar with the Mental Health Act and Mental Health Measure and are aware of physical health and mental health needs. They provide information, advice and

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<sup>7</sup> Shona Minson, [The impact of imprisonment on pregnant women and their unborn children](#), A summary of research evidence from Dr Laura Abbott, Fellow of the Royal College of Midwives, Senior Lecturer in Midwifery, University of Hertfordshire.

<sup>8</sup> [https://eprints.whiterose.ac.uk/112907/1/DUWOs\\_accepted\\_manuscript.pdf](https://eprints.whiterose.ac.uk/112907/1/DUWOs_accepted_manuscript.pdf)

guidance on the management of substance misuse. Many often provide treatment for substance withdrawal as independent prescribers.

A significant proportion of substance misuse nurses are employed in the independent sector for companies such as Adferiad and Kaleidoscope.

Nurses are crucial to the delivery of substance misuse services. However, similar to nurses in prison settings, substance misuse nurses are struggling with burnout. There is very little opportunity for substance misuses to progress within their field and it is often the case that they are fixed at the entry pay point – similar to Band 5 NHS Agenda for Change.

To ensure women in Wales can continue to access substance misuse services there needs to be an investment in substance misuse services by supporting their career development and pay.

### **About the Royal College of Nursing (RCN)**

The Royal College of Nursing is the world's largest professional organisation and trade union for nursing, representing over 465,000 nurses, midwives, health visitors, healthcare support workers and nursing students, including over 26,000 members in Wales. RCN members work in both the independent sector and the NHS. Around two-thirds of our members are based in the community. The RCN is a UK-wide organisation, with National Boards in Wales, Scotland and Northern Ireland.

The RCN represents nurses and nursing, promotes excellence in nursing practice and shapes health and social care policy.