Adult Social Care Policies and Procedures

**Prisons and Approved Premises**

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| **WARNING!** Please note if the review date shown below has passed this procedure may no longer be current and you should check the PPG E Library for the most up to date version |

Care Policies and Procedures

**Prisons and Approved Premises Offender Social Care Policy and Guidance**

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# POLICY VERSION CONTROL

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| POLICY NAME | Prisons and Approved Premises | | |
| Document Description | This document sets out Lancashire County Council's responsibilities as outlined in the Care Act 2014 for the assessment and provision of social care for offenders who reside in prisons and approved premises in Lancashire. | | |
| Document Owner | Laura Hudson  Chorley Hospital and County Prisons, Adult Social Care | | |
| Document Author | Mick Duffy/Laura Hudson/Helene Cooper/Lynne Johnstone | Date | December 2017 |
| Status | Draft | Version | 1.0 |
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| Signed |  | Date Approved |  |

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# POLICY STATEMENT

Lancashire County Council must provide or arrange for services, facilities or resources which would prevent, delay or reduce individuals’ needs for care and support.

The Care Act 2014 places a duty on the county council to undertake an assessment of need for any adult offender (18 years and above) who resides in the area's prisons and approved premises, who appear to have a needs for social care and support. Within Lancashire, this involves means meeting this duty in five prisons which are located within the County's boundaries.

* HMP Wymott
* HMP Garth
* HMP Kirkham
* HMP Lancaster Farms
* HMP Preston

Between them these prisons accommodate over 4,000 male prisoners at any one time. There are also some approved premises (often known as bail hostels)

It is critical to the vision in the Care Act that the care and support system works to actively promote wellbeing and independence, and does not just wait to respond when people reach a crisis point. Offenders can often have complex health and care needs and experience poorer health and mental health outcomes than the general population. Evidence demonstrates higher prevalence among the adult prison population of mental illness, substance misuse and learning disabilities than in the general population. All adults in custody, as well as offenders and defendants in the community, should expect the same level of care and support as the rest of the population. This is crucial in ensuring that those in need of care and support achieve the outcomes that matter to them, and that will support them to live as independently as possible at the end of their detention. Before the Care Act's implementation, the responsibilities for meeting the needs of offenders have been unclear, and this has led to confusion between local authorities, prisons and other organisations.

For the purposes of the Act, adults detained or residing in a custodial setting are treated as if they were ordinarily resident in the area where the custodial setting is located. Local authorities are responsible for the assessment of all adults who are in custody in their area and who appear to be in need of care and support, regardless of which area the individual came from or where they will be released to. Therefore, to fulfil its duty under section 76 of the Care Act, in April 2015 Lancashire County Council introduced a social care in prisons and approved premises service to assess offender's needs for care and support. Where offenders meet the eligibility criteria (see section 2.2.5), services are provided by the Health and Social Care in Prisons Team in order to comply with the national threshold relating to care and support that is relevant, coherent, timely and sufficient.

The Care Act has established that carers can be eligible for support in their own right. However the role of carer as defined by the Act does not apply in the prison and approved premises settings, although there are offenders who have their needs met through informal forms of support and assistance. For the purposes of this document this support and assistance is referred to as *'peer support'*.

Lancashire County Council will make all reasonable adjustments to ensure that all disabled people in prisons and approved premises, have equal access to participate in the eligibility decision in line with the Equality Act 2010.

The population in prisons and approved premises in Lancashire is diverse and through Offender Social Care Policies and Practice, we aim to deliver an appropriate and safe level of service and support to adult offenders.

Lancashire County Council will follow the Care Act and other relevant legislation, policies and guidance to ensure our practice is of high quality and legally compliant. Where our customers or those we come into contact with wish to challenge or raise concerns in regard to our decisions, regarding eligibility, the [county council's complaints procedures](http://new.lancashire.gov.uk/council/get-involved/compliments-comments-complaints.aspx) will be made available and accessible.

# KEY DEFINITIONS AND PRINCIPLES

## Key Definitions:

All references to custody or custodial settings relate to prisons, approved premises and other bail accommodation. It also applies to offenders aged 18 years, in young offender institutions, secure training centres or secure children’s homes.

**Prison:** This is a custodial centre provided by the Secretary of State.

**Approved Premises:** Premises approved as accommodation under section 13 of the Offender Management Act 2007 for the supervision and rehabilitation of offenders, and for people on bail. They are usually supervised hostel-type accommodation.

# Key Principles:

# 2.1 Wellbeing

“Wellbeing” is a broad concept, and it is described as relating to the following areas in particular:

* personal dignity (including treatment of the individual with respect)
* physical and mental health and emotional wellbeing
* protection from abuse and neglect
* control by the individual over day-to-day life (including over care and support provided and the way it is provided)
* participation in work, education, training or recreation
* social and economic wellbeing
* domestic, family and personal
* suitability of living accommodation
* the individual’s contribution to society

There is no hierarchy, and all should be considered of equal importance when considering “wellbeing” in the round.

# 2.2 Prevention and Early Intervention

Within the Care Act statutory guidance, secondary prevention or early intervention is defined as more targeted interventions aimed at individuals (in this case, adult offenders) who have an increased risk of developing needs, where the provision of services, resources or facilities may help slow down or reduce any further deterioration, or prevent other needs from developing.

# 2.3 Assessment

All assessments will be completed following receipt of referrals in a timely manner, with priority given to individuals identified as having urgent need. Completion of assessments need to include discussions on, and obtained consent, to share information in relation to the individual's needs. Full assessments and relevant information will be recorded electronically using IT systems as directed by Lancashire County Council.

Written copies of assessments, outcome from the assessment and support plans and agreed outcomes, should be provided to service users as required by the Care Act 2014 and associated regulations and guidance.

The focus will be on enabling and reablement principles, policies and practices into the way they routinely operate, improvements in quality, performance and outcomes by learning and implementing recommendations from good practice guidance. This may come from local experience and findings from the service to identify and drive improvements.

# 

# 2.4 Proportionate

This means that the assessment is only as detailed or intrusive as it needs to be, to establish an accurate picture of the needs of the individual or their carer, regardless of whatever method of assessment is used. This will involve:

* both hearing and understanding the initial presenting problem;
* not taking this at ‘face value’; and
* ensuring any underlying needs are also explored and understood.

Carer's assessments may not be undertaken when the cared for person is in a custodial setting.

# 2.5 Eligibility Criteria

The national eligibility criteria sets a minimum threshold for an individual's care and support needs which local authorities must meet. The threshold is based on identifying how an individual's needs affect their ability to achieve relevant desired outcomes, and whether as a consequence this has a significant impact on their wellbeing.

See section [3.5](#_3.5_Eligibility_for) for eligibility of offenders.

# 2.6 Fluctuating Needs

Where an individual's needs fluctuate, in order to determine whether they meet the eligibility criteria, the assessor shall take into account the individual's circumstances over a period of time that they consider necessary. This is to ensure that the county council has established an accurate indication of the individual's ongoing level of need.

# PROCEDURES

# **3.1 Referrals**

Referrals can come from the following sources:

* Self
* Family / Carer/ Advocate
* Prison Health and Social Care Service \*
* Prison Service
* Offender Managers / Probation Service
* Other Local Authority
* Disability Officers
* Community Acute settings -hospitals

\* *The Prison Health and Social Care Service consists of Lancashire County Council employed social workers designated to work with Prison Health and Social Care assistants employed by a commissioned provider (See* [*4.5*](#_4.5_COMMISSIONED_PROVIDER) *for details).*

# **3.2 Screening**

On entry and transfer to the prison or approved premises the Prison Health and Social Care service completes an initial health care assessment / reception screening process. This process may trigger the need for a [social care assessment](http://lccintranet2/corporate/web/viewdoc.asp?id=132709) and other support. The service will address and respond to the immediate needs of all offenders, and this will be followed by a full assessment if appropriate.

Reception screening and health assessments are key opportunities to establish whether an offender has been, receiving care and support before entering custody, identified at point of entry to the prison with existing social care assessments and packages of care, which will require a review of their needs. Current care plans are also taken into consideration.

Lancashire County Council Social workers will undertake regular visits to the County Prisons and approved premises to identify any Prisoners that may have eligible care needs that may not have been referred by any of the above sources.

# **3.3. Information and Advice**

For any needs that are not eligible under the Act, the Prison Health and Social Care Service will provide offenders and staff in the establishment with information and advice related to care and support that may reduce or delay the development of care and support needs of offenders. It is important to consider the level of access to electronic media and the most appropriate format, such as easy-read leaflets, of information and advice in custodial settings, and the custodial environment in which the care and support is to be provided, including signposting to other services.

The level, type and recording of such information and advice given will need to be agreed between the Prison Health and Social Care Service and Lancashire County Council and inputted onto Lancashire County Council's recording systems.

# **3.4 Prevention and early intervention**

Individuals in custodial settings, like people in the community, may benefit from low level preventative support and information and advice that will help them maintain their own health and wellbeing.

A key principle of the county council's support will be focusing on reducing the offender's reliance on formal services and in preventing their level of need from increasing. In order to meet this requirement, the social worker will need to develop a strong relationship with the offender they support, have the skills and ability to recognise any signs of deterioration and be able to act upon these without necessarily referring back to the county council.

To help with the health and wellbeing of individuals, the county council has begun working in partnership with other organisations to commission aids, adaptions and assistive equipment within prisons and approved premises. [Telecare services](http://www.lancashire.gov.uk/health-and-social-care/adult-social-care/equipment.aspx) are now available in County Prisons which provides motion sensors that give early warning of incidents such as; falls, seizures or blackouts as a result of a medical condition; needs a reminder to take medication as prescribed.

We also signpost Prisoners, where they are settled back in to a community, to the [Lancashire Wellbeing Service](http://www.lancswellbeing.co.uk/) for free practical and short-term support to help towards a better quality of life.

# **3.5 Eligibility for the service**

The social worker within the Prison Health and Social Care Service in the prison or approved premises, will assess needs and determine eligibility. The prioritisation of resources for adult offenders with eligible social care needs, will be carried out in accordance with the Care Act 2014.

Eligible offenders will be adults (18 years or over) if:

* the adult's needs are caused by a physical or mental impairment or illness,
* the adult is unable to achieve two or more outcomes specified below, and
* as a consequence there is a significant impact on the adult's wellbeing.

**An offender’s needs are only eligible where they meet all three of these conditions.**

Eligibility will be determined during the assessment if the person is unable to achieve two or more of these outcomes:

* managing and maintaining nutrition;
* maintaining personal hygiene;
* managing toilet needs;
* being appropriately clothed;
* being able to make use of the prison environment safely;
* maintaining a habitable environment;
* maintaining relationships;
* accessing and engaging in work, training, education or volunteering opportunities in prison;

And are unable to achieve an outcome if they are:

* unable to achieve it without assistance,
* unable to achieve it without assistance but doing so causes significant pain, distress or anxiety,
* able to achieve it without assistance but doing so endangers or is likely to endanger the health and safety of the adult, or others, or
* able to achieve it without assistance but takes significantly longer than would normally be expected.

Where the Prison Health and Social Care Service has determined that a person has eligible needs, they must:

* agree with the person which needs they would like the prison health and social care service to meet,
* consider how those needs may be met. (Where the support options include services for which the county council makes a charge then we will carry out a financial assessment),
* be offenders in Lancashire Prisons and Approved premises (to be considered to be ordinarily resident).

# **3.6 Assessment**

Where the county council is made aware that an adult in a custodial setting may have care and support needs, they must carry out an assessment as they would for someone in the community. It is likely that there will be complexities for carrying out assessments in custodial settings and consideration should be given to how such assessments will be carried out in an efficient way for all involved.

The assessment will be holistic and will cover the physical, sensory, cognitive, environmental, psycho-social needs and risks in relation to the prison sentence of the individual taking into account other professional assessments. This will impact on the content and timescale of the integrated support plan which will be discussed and agreed with the offender in conjunction with the Prison Health and Social Care Service and the approaches and methodology required to achieve the identified needs.

The assessment must consider whether the offender’s needs and their inability to achieve the outcomes (see section [3.5](#_3.5_Eligibility_for)) above, cause or risk causing a significant impact on their wellbeing. The meaning of “wellbeing” is set out in Section 1 of the Care Act 2014 and also see definition in [section 2](#_2.1_Wellbeing) of this Policy.

Assessors must determine how the offender’s inability to achieve the outcomes impact on their wellbeing. Where the offender is unable to achieve more than one of the outcomes, the assessor does not need to consider the impact of each individually, but should consider whether the cumulative effect of being unable to achieve those outcomes is one of a “significant impact on wellbeing”. In doing so, assessors should also consider whether:

* the offender’s inability to achieve the outcomes above impacts on at least one of the areas of wellbeing in a significant way; or,
* the effect of the impact on a number of the areas of wellbeing mean that there is a significant impact on the offender’s overall wellbeing.

The term “significant” is not defined by the regulations, and must therefore be understood to have its everyday meaning. Assessors will have to consider whether the offender’s needs and their consequent inability to achieve the relevant outcomes will have an important, consequential effect on their daily lives, their independence and their wellbeing.

In making this judgment, assessors should look to understand the offender’s needs in the context of what is important to them. Needs may affect different people differently, because what is important to the individual’s wellbeing may not be the same in all cases. Circumstances which create a significant impact on the wellbeing of one individual may not have the same effect on another.

There is an expectation that assessors will provide objective evidence to support their judgement when applying the criteria.

While it may not always be possible or appropriate to involve family members directly in assessment or care planning, individuals should be asked whether they would like to involve others in their assessment or support planning.

# 3.7 Integrated Care and Support Planning

Whilst the setting in which the care and support will be provided is likely to be different from community or other settings, this should be taken into account when considering how to meet the need for care and support as part of the support planning process. The extent and nature of need should be identified before taking into account the environment in which the individual lives.

The development of care and support plans [Link to care and support plans PPG will be available shortly] produced by Health or Social Care Service will be consistent with care and support planning guidance under the Care Act 2014 and take into account any further guidance.

Such plans will identify the care and support needs and outcomes, the nature of the specific provision needed, including the amount, frequency and duration of care needed. The care and support plan may cover general health, social needs, and rehabilitation requirements and will be reviewed on a regular basis, as defined in the individual' care and support plan. The service user and Prison Health and Social Care Service must be actively involved throughout the planning process and should be given clear information regarding the personal budget available to meet their needs and the limitations of its use in the prison setting.

Where the Prison Health and Social Care Service considers that an offender has substantial difficulty in engaging with their assessment, then they must consider whether there is anyone appropriate who can help the person to be fully involved, e.g. family member/carer. If there is no one appropriate, then the service must arrange for an [independent advocate](http://lccintranet2/corporate/web/viewdoc.asp?id=132713) to support and represent the offender, care and support planning and the review process.

# 3.8 Pathway for individuals who have eligible needs but who refuse social care

Individuals, if they have the capacity to make decisions about their care, can refuse support even though they may have eligible needs. If this occurs this information will be circulated to the Prison Services and Offender Management with the Service User’s consent.

If someone in a custodial setting refuses a needs assessment, the county council is not required to carry out the assessment, subject to the same conditions as in the community. This does not apply if:

* the person lacks the capacity to refuse and the county council believes that the assessment will be in their best interests; or
* the person is experiencing, or is at risk of, abuse or neglect (see chapter 6 on assessment).

# 3.9 Information sharing

Local authorities, provider organisations and their staff working in custodial settings should abide by all rules and practices for that establishment, including (but not restricted to) security policies such as restricted items and searches on entry, equality and safeguarding procedures.

Local authorities and the Prison Health and Social Care Service should ensure the security of information held on people who are in custodial settings, should develop agreements consistent with policies and procedures of Ministry of Justice and the National Offender Management Service and with relevant legislation enable appropriate information sharing on individuals, including the sharing of information about risk to the prisoner and others where this is relevant.

If the county council is providing care and support for a person in the community and that person is subsequently remanded or sentenced to custody, or bailed to an approved premises, or required to live in approved premises as part of a community sentence, the county council should share details of the most recent assessment and care and support plan with the relevant custodial setting and the county council in which it is based so that care and support may continue.

Local authorities may also receive requests for information from managers of custodial settings or probation services when an individual who has already received care and support in the community is remanded or sentenced to custody.

# 3.10 Prison Health and Social Care Service Cessation and Continuity of Care

People in custody with care and support needs must have continuity of care where they are moved to another custodial setting or where they are being released from prison and are moving back in to the community. This is to ensure that the person continues to receive care during and following the move.

Local authorities are responsible for ensuring continuity of care [LINK to Continuity of Care PPG] for offenders with a package of care moving into their area on release from prison. Provision of care and support, where an adult has eligible needs, and is to be released into the community, should have those needs provided by the upper tier council in whose area the individual is ordinarily resident ([see 3.14](#_3.14_Ordinary_Residence)). Lancashire County Council's responsibility in circumstances where an individual with social care needs is being released and moving back to another local authority area is to ensure that relevant details of the assessment and support plan are shared as appropriate with the that council's Adult Social Care service.

# 3.11 Financial Assessments

The county council does not require financial assessments to be carried out routinely in custodial settings. However the county council may choose to undertake a financial assessment if it is identified that there is an opportunity for significant income from charging an individual

# 3.12 Direct Payments

Direct payments [Link to Direct Payments PPG will be available shortly] must not be made to people in custodial settings. However, those in bail accommodation and approved premises who have not yet been convicted can request their needs are met through provision of direct payments, as they would have been whilst in their own homes.

# 3.13 Ordinary Residence

Determining an offender’s ordinary residence on release from prison may not always be straightforward and each case must be considered on an individual basis. Where there is any uncertainty staff should seek clarification on the actions to take from their manager who in turn should refer to Ordinary Residence [Link to Ordinary Residence PPG will be available shortly] and obtain legal advice to establish ordinary residence.

# 3.14 Transition from children’s to adult care and support

Staff should be aware that the county council retains responsibility for the transition requirements of children and young people in Young Offender Institutions, Secure Children’s Homes, Secure Training Centres or other places of detention as well as children and young people in the youth justice system, who are likely to have eligible needs for care and support as adults, and are approaching their eighteenth birthday. This also applies where an offender moves from the youth custodial estate to the adult custodial estate, which may include a change in the responsible local authority.

A request for an assessment can be made on the young person’s behalf by the professional responsible for their care in the Young Offenders’ Institution, Secure Children’s Home or Secure Training Centre. Staff should refer to Transitions teams.

# 3.15 Care leavers

If a young person is entitled to support and services as a care leaver, this status remains unchanged while in custody and staff should be aware that where the county council is responsible for providing leaving care services to any young person prior to their time in custody, the responsibility is retained during the custodial period and on release.

The Children's Social Care Procedures Manual sets out the responsibilities for children and young people leaving care.

# 3.16 Section 117 Aftercare

Where prisoners have previously been detained under sections 47 and 48 of the [Mental Health Act 1983](http://www.legislation.gov.uk/ukpga/1983/20/contents) and transferred back to prison, their entitlement to [section 117 aftercare](http://www.legislation.gov.uk/ukpga/1983/20/section/117) should be dealt with in the same way as it would be in the community, apart from any provisions which are disapplied in custodial settings, such as direct payments and choice of accommodation. Section 117(3), as amended by the Care Act 2014, will apply in determining which local authority is responsible for commissioning or providing the section 117 after-care.

If the person was ordinarily resident in the Lancashire County Council area immediately before being detained in hospital, the county council will be responsible for the after-care while the person is in prison and upon their release from prison. However, if the person was not ordinarily resident in any area immediately before detention, the council responsible will be where the person becomes resident or where they have been discharged (i.e. the upper tier council responsible for the prison to which the person has been discharged). The county council will be jointly responsible for ensuring that such after-care is arranged with NHS England while the person is in prison.

# 3.17 End of Life Care

The provision of care and support for those in custodial settings extends to those who reach the end of life whilst in prison. For this provision of palliative care, some will transfer to a local hospital, hospice or care home or move to an alternative prison where a more suitable environment is available. In these cases, responsibility for care and support will pass to the NHS or new local authority, once the individual arrives at the new location.

Work is being undertaken nationally by Macmillan to identify and develop a pathway for people dying with dignity in custody. The county council has already developed links with community hospices for end of life care and support.

If an individual is transferred to another custodial establishment in a different local authority area this responsibility will transfer to the new local authority area.

# 3.18 Complaints Procedure

Local authorities should provide information to those in custodial settings on how to make complaints, and seek redress about provision of care and support services.

The Prison Health and Social Care Service provide individuals in custodial settings, without access to the internet, with information on how to complain via a leaflet in all Lancashire Prisons <http://intranet.ad.lancscc.net/media/2144/your-views-count.pdf>

The PPO investigates complaints from prisoners, those on probation and those held in immigration removal centres. The Ombudsman also investigates all deaths that occur among prisoners, immigration detainees and the residents of approved premises.

The [Complaints policy](http://intranet.ad.lancscc.net/how-do-i/council-and-democracy/complaints/?page=3) sets out Lancashire County Council's policy and arrangements for handling complaints about adult social care and is based on the 2009 Regulations and the accompanying Department of Health (DH) guide to better customer care, Listening, Responding, Improving. References throughout this document to "the Regulations" and "the DH guidance" relate to the 2009 Regulations and to ["Listening, Responding, Improving – a guide to better customer care".](http://webarchive.nationalarchives.gov.uk/+/http:/www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_095408)

# 4 FLOW CHARTS/DIAGRAMS OR EXAMPLES

The following documents show;

4.1 the referral process to be followed in prisons;

4.2 the referral process for Immediate Care;

4.3 the referral process to be followed in approved premises;

4.4 Contact details for the Commissioned Provider.

# 4.1 REFERRAL PROCESS FOR SOCIAL CARE IN PRISONS

**Sources of Referral)**

* Self
* Family member/advocate/carer
* Healthcare staff
* Internal – prison/probation staff
* External – Other Local Authority

Initial contact/referral for social care sent to [ACSCustomer.Services@lancashire.gov.uk](mailto:ACSCustomer.Services@lancashire.gov.uk)

Basic information recorded on LAS

Is this referral routine or priority?

Routine

Priority

SW to notify Healthcare lead in relevant prison that case has been allocated

Follow immediate care pathway

Allocated to social worker via County Prison Intake LAS work-tray

Obtain consent

Has consent to share information been given?

Letter confirming referral and assessment date sent to offender & prison

Signed, scanned and entered into the system

Social Worker to arrange assessment

\* Confirmation needed about the legislation of 5 days payment

Contact named Social Worker to advise of housing application

SW to contact YP.

Once YP has been placed they will undergo an assessment (within 5 days)\*.

The results of this assessments could be:

* Section 17: we pay no rent and provider claims housing benefit.
* Section 20: YP's placement is authorised for longer.
* YP is sent home

ART will be notified of the outcome of this assessment to monitor demand and usage.

Is advocacy required?

Involvement of key people including:

* Person representative
* Family
* Prison/healthcare staff

Appoint advocate

Service offer to be confirmed in writing

Assessment approved

Reablement Support Plan with input from offender and Healthcare staff

Reviewed quarterly by Provider

Reviewed annually by LCC social care

# 4.2 IMMEDIATE CARE REFERRAL PROCESS

Reception screening

Social Care need identified

Ensure service user is safe

Reception nurse granted approval from manager/senior duty manager to commission service

Immediate care plan including access to bank staff to incorporate immediate service provision put in place. Record approval on systems

# 4.3 REFERRAL PROCESS FOR SOCIAL CARE IN APPROVED PREMISES

Referral for urgent social care assessment sent to [ACSCustomer.Services@lancashire.gov.uk](mailto:ACSCustomer.Services@lancashire.gov.uk)

**Sources of Referral)**

* Self
* Family member/advocate/carer
* Healthcare staff
* Internal – AP/probation staff
* External – Other Local Authority

Initial contact/referral for social care sent to [ACSCustomer.Services@lancashire.gov.uk](mailto:ACSCustomer.Services@lancashire.gov.uk)

Basic information recorded on LAS

Is this referral routine or priority?

Routine

Priority

SW to notify Healthcare lead or relevant person in approved premises that case has been allocated

Follow immediate care pathway

Allocated to social worker via County Prison Intake LAS work-tray

Obtain consent

Has consent to share information been given?

Letter confirming referral and assessment date sent to offender & APs

Signed, scanned and entered into the system

Social Worker to arrange assessment

\* Confirmation needed about the legislation of 5 days payment

Contact named Social Worker to advise of housing application

SW to contact YP.

Once YP has been placed they will undergo an assessment (within 5 days)\*.

The results of this assessments could be:

* Section 17: we pay no rent and provider claims housing benefit.
* Section 20: YP's placement is authorised for longer.
* YP is sent home

ART will be notified of the outcome of this assessment to monitor demand and usage.

Is advocacy required?

Involvement of key people including:

* Person representative
* Family
* AP/healthcare staff

Appoint advocate

Service offer to be confirmed in writing

Assessment approved

Reablement or Support Plan with input from offender and Healthcare staff

Reviewed within 3 months by LCC ASC

Reviewed annually by LCC social care

# 4.4 COMMISSIONED PROVIDER

The commissioned provider to manage the health and social care service in Lancashire Prisons are as follows:

|  |  |
| --- | --- |
| **HM Prison** | **Provider Contact Details** |
| HM Prison Garth  HM Prison Wymott | **Bridgewater Community Healthcare NHS Foundation Trust**  Bevan House  17 Beecham Court  Smithy Brook Road  Pemberton  Wigan  WN3 6PR   1. Telephone: 01942 482630   [www.bridgewater.nhs.uk](http://www.bridgewater.nhs.uk/) |
| HM Prison Lancaster Farms  HM Prison Kirkham  HMP Prison Preston | **Spectrum Community Health care**  One Navigation Walk  Hebble Wharf  Wakefield  WF1 5RH  Telephone: 01924 311400  Fax: 01924 675360 [info@spectrum-cic.nhs.uk](mailto:%0bOne%20Navigation%20Walk%0bHebble%20Wharf%0bWakefield%0bWF1%205RH%0b%0bT%2001924%20311400%0bF%2001924%20675360%0d%20info@spectrum-cic.nhs.uk%0d) |

# 5. RELATED DOCUMENTS

|  |  |
| --- | --- |
| **POLICY, PROCEDURES AND GUIDANCE (PPG) DOCUMENTS** | * [PPG Intranet site](http://lccintranet/acs/index.asp?siteid=6521&pageid=43423&e=e) |
| **LEGISLATION AND REGULATIONS** | * The Care Act 2014 * [Care and Support Statutory Guidance – Updated 17th August 2017](https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance) * Mental Health Act 1983 |

# 6. EQUALITY IMPACT ASSESSMENT

The Equality Act 2010 requires the county council to have "due regard" to the needs of groups with protected characteristics when carrying out all its functions, as a service provider and an employer. The protected characteristics are: age, disability, gender identity/gender reassignment, gender, race/ethnicity/nationality, religion or belief, pregnancy or maternity, sexual orientation and marriage or civil partnership status.

The main aims of the Public Sector Equality Duty are:

* To eliminate discrimination, harassment or victimisation of a person because of protected characteristics;
* To advance equality of opportunity between groups who share protected characteristics and those who do not share them. This includes encouraging participation in public life of those with protected characteristics and taking steps to ensure that disabled people in particular can participate in activities/processes;
* Fostering good relations between groups who share protected characteristics and those who do not share them/community cohesion.

It is anticipated that the guidance on Prisons and Approved Premises in this document will support the county council in meeting the above aims when applied in a person-centred, objective and fair way which includes, where appropriate, ensuring that relevant factors relating to a person's protected characteristics are included as part of the process.

More information can be found on the Equality and Cohesion intranet site on

<http://lccintranet2/corporate/web/?siteid=5580&pageid=30516>