

# **Celebrating the Role of the Psychological Wellbeing Practitioner (PWP) and Innovation in Step 2 Interventions'**

## **The Role Of The PWP In The North East Prisons**

The logo for Rethink Mental Illness, featuring a large blue circle with the text 'Rethink Mental Illness.' inside, and several smaller blue circles of varying sizes arranged in a vertical line to the right of the main circle.

**Rethink  
Mental  
Illness.**

**Paris Gibson (Senior PWP) & Alexandra Morris (PWP)**  
**Rethink Mental Illness**

# BACKGROUND

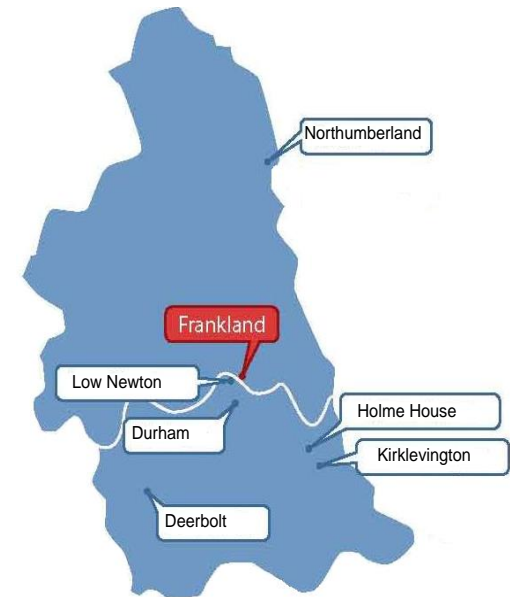
- Lord Bradley conducted an independent report on the offender pathways of those with mental health and learning difficulties (Bradley Report, 2009). This highlighted the need of a 'robust' primary care service and improved partnership working.



- In 2015 Rethink Mental Illness were appointed by TEWV NHS Trust to deliver the primary care step 2 interventions.

# THE PRISON POPULATION

- The prison service within the UK currently houses 86, 368 offenders (Ministry of Justice, 2017). The prevalence of mental health problems within the criminal justice system is difficult to estimate yet it is proposed that approximately 49% of female and 23% males experience anxiety and depression, compared to 19% and 12% respectively within the community (Prison Reform Trust, 2017).
- The 7 North-East prisons are diverse in nature, including Category A-D male estates, a female estate, a youth offenders' institution and a privatised Category C Male estate.



# CHALLENGES IN DELIVERING STEP 2 IN A PRISON ENVIRONMENT

- **Complexity of the client group** due to;
  - High prevalence of co-morbidity/severe mental illness such as psychosis (Prison Reform Trust, 2017).
  - High prevalence of substance misuse issues (Public Health England, 2017).
  - Higher prevalence of learning difficulties (Rack, 2005).
  - Higher Prevalence of Personality Disorder (Prison Reform Trust, 2017; Motz et al 2015).
  - Trauma history.
  - Diverse socioeconomic backgrounds.
  - Some higher risk clients both in terms of risk to self and offending.



# CHALLENGES CONTINUED

## ○ **The prison regime**

- Access to prisoners.
- Restriction on activity.
- Recent prison reform resulting in high churn in some local prisons.

## ○ Prisoner's **previous experiences of mental health services** and;

- Experiences with those in authority.
- Experiences of Social Services/Care System.



# INNOVATIONS- ADAPTED INTERVENTIONS

- Adaptations made and interventions delivered in a flexible, creative, solution focused manner.
  - “How do you deliver BA in a prison?”.
- Adaptations to how educational material is delivered
  - Attending prison induction.
  - Adapted group sessions/information desks to meet the needs of remand prisons.
- Use of prisoner specific self-help materials and creation of suitable resources.

Image obtained from  
Insidetime website

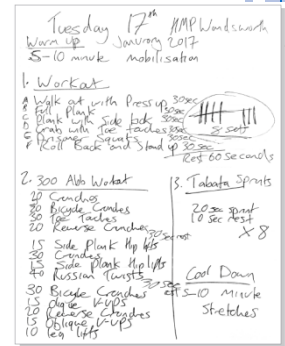


Image obtained from  
NTW Trust Website



Prisoner Anxiety



# INNOVATIONS- ROBUST RISK MANAGEMENT AND WIDER CONSIDERATION

- **PWPs are not expected to work with those at risk of suicide or severe deliberate self-harm however;**
  - Multi-disciplinary meetings are attended including prison staff and the prisoner to discuss and minimise risk to self.
  - PWPs may work with a prisoner who may ordinarily be excluded from primary care due to risks if they are under the care of a Registered Psychiatric Nurse.
  - PWPs apply a ‘here and now’ focused intervention whilst considering the wider context of the client including presenting problem and precipitating, perpetuating, predisposing and protective factors as well as potential risks to self and others.

# INNOVATIONS- PARTNERSHIP WORKING

- PWPs work in Partnership with many teams and services within the prison which promotes inclusion and shared understanding.
- Primary care Step 2 services are now integrated in to the Mental Health team which consists of PWPs, Mental Health Resettlement Officers, Registered Psychiatric Nurses, Counsellors, Support Workers, Psychologists/Higher Assistant Psychologists and Psychiatrists.
- Work is also completed with other partnerships such as;
  - Drug and Alcohol Recovery Services
  - Prison Safer Custody
  - Healthcare





# IMPORTANCE OF SUPERVISION

- It is acknowledged within the service that supervision is of importance to safely deliver Step 2 Interventions in the North East Prisons.
- PWPs liaise closely with TEWV Registered Mental Health Nurses and daily multi-disciplinary meetings are attended.
- PWPs access weekly caseload management supervision to ensure risk is appropriately assessed and monitored (in line with national IAPT recommendations; Richards, Chellingsworth, Hope, Turpin & Whyte, 2010)

# CELEBRATING SUCCESS

- The Step 2 role has been successfully integrated in to an already established mental health team.
- This has improved access to low intensity intervention and reduced pressure on in-reach services.
- Step 2 interventions have had a positive impact on clients, even some who may usually be excluded from community IAPT services due to secondary diagnoses or co-morbidities.
- Innovation is an integral part of the service and additional services such as PAT dogs have recently been introduced.



**Any Questions?**

Thank you for listening



# REFERENCES

- Department of Health (2009a) *The Bradley Report: Lord Bradley's review of people with mental health problems or learning disabilities in the criminal justice system*. London: Department of Health. Retrieved from <https://www.rcpsych.ac.uk/pdf/Bradleyreport.pdf>
- Ministry of Justice (2017), *Prison Population Figures: Population bulletin: weekly 11 August 2017*. Retrieved from <https://www.gov.uk/government/statistics/prison-population-figures-2017>
- Prison Reform Trust (2017), *Mental Health Care in Prisons*. Retrieved from <http://www.prisonreformtrust.org.uk/ProjectsResearch/Mentalhealth>
- Rack, J. (2005) *The Incidence of Hidden Disabilities in the Prison Population*. Surrey, UK: Dyslexia Institute.
- Motz et al. (2015). *Working with Offenders with Personality Disorder: A Practitioners Guide (2<sup>nd</sup> Ed.)*. United Kingdom, UK: National Offender Management Service and Department of Health. Retrieved from <https://www.gov.uk/government/publications/working-with-offenders-with-personality-disorder-a-practitioners-guide>.
- Public Health England (2017) *Secure Setting Statistics from the National Drug Treatment Monitoring System (NDTMS)*. Retrieved from <http://www.nta.nhs.uk/uploads/secure-setting-statistics-from-the-national-drug-treatment-monitoring-system-2015-2016.pdf>

