Evening Seminar

Commissioning to Transform Liaison and Diversion Services

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Linda Bryant
Director of Criminal Justice, Together for Mental Wellbeing

Chief Supt Chris Bourlet
Health in the Justice System, NHS England (London)

5 November, 2014
Liaison and Diversion Programme

Dave Burton
Programme Director

Academy for Justice Commissioning
5 November 2014
Liaison & Diversion Core Model

• Early intervention in criminal justice processes
  • Identification, assessment and referral
• Integrated model for children, youths and adults
• Targeting a range of vulnerabilities such as
  • Mental Health, Learning Disability, Substance Misuse
  • Social issues, Housing, Education…
• Provision at Police Custody and Courts
• Hours to suit operational requirements
• Range of referral pathways to suit identified issues
Liaison & Diversion core model

Early intervention → Liaison and diversion → Criminal justice interventions

- Pre-arrest
- Arrest and/or charge
- Court/sentence

Liaison and diversion

Case identification
Secondary screening/triage
Assessment including specialist assessment

Mental health, learning disability, substance misuse and/or other treatment services provide options to divert into, or work alongside, criminal justice interventions.

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Interfaces

Liaison and Diversion

- Police
- Courts
- Social Care
- Housing
- Mental Health
- Learning Disability
- Education
- Substance Misuse
- YOTs / Probation
2014/15 L&D national coverage

KEY
- Green: Fully specified services
- Orange: Existing L&D services
Benefits of Liaison and Diversion

Process improvements:
• Improved information on vulnerable people and their conditions
• Improved use of police time
• Timely provision of information to the judiciary
• Early identification, early intervention
• Vulnerable people able to participate appropriately in the justice system

Leading to:
• Improved access to treatment and support services
• Reduction in those reaching crisis-point
• Reductions in re-offending
Linda Bryant

Director of Criminal Justice
Together for Mental Wellbeing
Governance arrangements

- Strategic Advisory Board: quarterly
- Local operational steering groups: bi-monthly
- Contract monitoring meetings: quarterly
- Shared clinical governance between providers

Further to that:
Feedback process from stakeholders and service users
Data analysis - strategic and local reporting
Feedback on London L&D service

The mental health practitioners at Court provide great assistance in getting much needed support for my most vulnerable and difficult clients (solicitor).

When I came to Court, I was at my lowest ebb and had suicidal thoughts. The women’s practitioner changed everything, she made me feel comfortable and safe, I could open up to her. She turned everything around for me, got me help and support. She changed my life (service user).

In many cases, if the offender could be helped with their issues, proper support may change or reduce their offending behaviour. Now, with the L&D Teams embedded in Custody, we are seeing intervention at the beginning of the process and this is following the individual throughout the whole CJ system if necessary. The introduction of L&D staff has increased the chances of those that would benefit being identified when, previously, they would have slipped through unrecognised (police).

The L&D practitioner had already made the enquiries that I wanted the answer to, which made my decision to bail much easier (sentencer).

Very helpful to know the lady is not mentally unwell but requires support in other areas (sentencer).
Liaison and Diversion – Police Perspective

Chief Supt Chris Bourlet
Health in the Justice System
NHS England (London)
Why do police officers like Liaison and Diversion?

- 20-40% of custody detainees have mental health issues
- 70% of prison population have mental health issues
- Detainees have higher incidence of learning difficulties and alcohol misuse
- 50% suffer from anxiety and depression (compared to 15% of general population)
- Higher suicide risk
Benefits

• Identification and management of risk
• Access to mental health background and history
• Improved pre-release care plan
• Address root causes of offending
• Reduce re-offending
Challenges

- What does success look like?
- Will L&D actually reduce re-offending - how do we prove it?
- How does L&D link with the full range of health services in custody (physical health, drugs, alcohol etc)
- L&D identifies need - can existing services meet the need?
- What is the balance between diverting to mental health services Vs Criminal Justice outcome?
- How do we standardise the service?
Conclusion

Dave Burton
L&D Programme
Predicted growth in Liaison and Diversion services

2014/15

- Fully specified services
- Existing L&D services
- No cover

2015/16

2016/17

2017/18
Contact us…

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Questions ?