Restricted Patients 2018
England and Wales

Ministry of Justice
Statistics Bulletin

25 April 2019
Main Findings

Population

- There were 7,533 restricted patients as at 31 December 2018, and this is 1.5% higher than the number of restricted patients at the end of 2017. The population has been increasing every year since 2013.

- 4,821 restricted patients were detained in hospitals and 2,712 were conditionally discharged.

- 87% of restricted patients were males and 13% females, with a slightly higher proportion (15%) of conditionally discharged population being females.

- Most are in the 20-39 (40%) and 40-59 (47%) age brackets.

- Majority of males (58%) and females (57%) committed offences of violence against the person.

Admissions and Recalls

- A total of 1,553 restricted patients were admitted (new admissions and recalls) in 2018, a 3% increase from 2017, a departure from successive decreases in the previous two years.

- The largest source of admissions was transfer from prison to hospital (62%), followed by recalls (17%) and hospital order with restriction order (16%). These remain the major sources of admissions over the years.

- About 5% (73) were admitted into high secure hospitals. Only 1 female was admitted into a high secure hospital in 2018.

Discharges and Disposals

- There were 1,409 disposals and discharges in 2018, a 5% increase from 2017 and a deviation from successive decreases in the previous two years.

- We recorded 553 discharges in 2018, a 3% increase from 2017, and most of them were conditional discharges by tribunals (70%).

- Overall number of disposals was 856 in 2018, a 6% increase from 2017. These were mainly disposals at court, returns to custody to complete sentences and expiry of restrictions in hospital.
The number of absolute discharges was 87 (79 conversions from conditional discharges and 8 absolute discharges from hospital).

Introduction

A mentally disordered offender may be diverted from the criminal justice system to hospital for treatment by a court under the Mental Health Act 1983. Prisoners may similarly be transferred from prison to hospital or ordered to receive treatment before completing a custodial sentence.

An offender can become a restricted patient by a number of routes.

An offender\(^1\) may be ordered by a court to receive hospital treatment as a restricted patient both as well as or instead of a prison sentence.

While in prison, an offender can subsequently be transferred to hospital from prison as a restricted patient by the Secretary of State.

In addition, individuals may also become a restricted patient where they found by a court to be unfit to plead or found not guilty by reason of insanity.

Discharge refers to restricted patients released into the community, either as a conditional or absolute discharge. Those receiving a conditional discharge continue to receive treatment in the community, remain liable to detention in hospital and may be recalled to hospital by the Secretary of State.

Discharge could be ordered by either the Secretary of State for Justice, the First-Tier Tribunal (Mental Health) in England or the Mental Health Tribunal for Wales (which are independent judicial bodies with discharge powers separate from those of the Secretary of State).

Disposals are all other outcomes for, and movements of mentally disordered offenders (e.g. return to prison custody), other than (i) discharges and (ii) transfers to another hospital in England and Wales.

For those prisoners transferred to hospital who are serving a determinate prison sentence, the restrictions attached to the Secretary of State transfer direction will cease on the earliest date of release. If they still require treatment in hospital, they will remain detained as unrestricted patients and not subject to the management of the Secretary of State for Justice.

Legislative Framework

The key legislation affecting this bulletin is the Mental Health Act 1959, the Mental Health Act 1983, as amended by the Mental Health Act 2007 and the Criminal Procedure (Insanity) Act 1964 as amended by the Criminal

\(^{1}\) Including untried and unsentenced offenders
Procedure (Insanity and Unfitness to Plead) Act 1991 and the Domestic Violence, Crime and Victims Act 2004 (which came into force on 31 March 2005). The 1959 Act was amended by the Mental Health (Amendment) Act 1982 and was then consolidated by the 1983 Act which was largely implemented on 30 September 1983. The provisions of the two Mental Health Acts are similar and references below are to the 1983 Act only. In terms of admissions, the 1983 Act provides for:

i. the diversion to hospital by the courts of convicted offenders who satisfy certain conditions (sections 37(1) & (2)) by making a hospital order. This may be with or without a restriction order under section 41, which has the effect of requiring the Secretary of State’s consent on all matters relating to leave of absence, transfer or discharge, except where the Tribunal orders discharge;

ii. the admission of an unconvicted offender to hospital by the magistrates’ courts where they are satisfied that the person concerned meets the criteria for admission and has done the act or made the omission with which charged (section 37(3));

iii. the imposition of a hospital order on unsentenced prisoners in their absence and without conviction for an offence (section 51(5));

iv. the recall to hospital, by order of the Secretary of State, of patients subject to restriction orders who were conditionally discharged (section 42(3));

v. the court to impose a prison sentence on a convicted offender together with a direction for immediate admission to hospital, subject to restrictions (hospital and limitation direction under section 45A);

vi. the transfer to hospital, by order of the Secretary of State, of prisoners serving a sentence of imprisonment (section 47). Under section 49 these patients can be made subject to a restriction direction, which has the same effect as a restriction order under section 41;

vii. the transfer to hospital, by order of the Secretary of State, of an unsentenced or untried defendant in criminal proceedings who is held in a Prison Service establishment (section 48). In this case a restriction direction is mandatory. Civil prisoners and persons detained under the Immigration Act 1971 or under the Nationality, Immigration and Asylum Act 2002, may also be admitted under this section, but restrictions are not mandatory;

viii. the transfer of patients from one part of the United Kingdom, Channel Islands or the Isle of Man to another. Those transferred to England and Wales are treated as if they had been admitted to hospital under the Act, so that some of them will, in effect, be subject to restricted hospital orders (part VI).
Section 2 of the Trial of Lunatics Act 1883 enables juries to return a verdict of acquittal on grounds of insanity, and Section 4 of the Criminal Procedure (Insanity) Act 1964, as substituted by Section 2 of the Criminal Procedure (Insanity and Unfitness to Plead) Act 1991 and amended by section 22 of the Domestic Violence, Crime and Victims Act 2004 enables the court without a jury to find a defendant unfit to plead. The 2004 Act also gives courts a range of disposal options ranging from a hospital order with restrictions to an absolute discharge.

In relation to disposals and discharges the Mental Health Act 1983 provides for:

i. the removal of a restriction order by the Secretary of State so that the hospital order continues unrestricted (section 42(1));
ii. the discharge of a patient with a restriction order, either conditionally or absolutely, by the Secretary of State, and the termination of the restriction order where discharge is absolute (section 42(2));
iii. the return to prison of sentenced prisoners (section 50(1)a);
iv. the return of unsentenced prisoners to prison to await court action where the Secretary of State or the court is satisfied that they no longer require treatment or no effective treatment is available (sections 51(3) & (4) respectively);
v. the transfer direction ceases to have effect in respect of untried prisoners at the end of their remand period, unless they are subject to further remand or committal for trial (section 52(2));
vi. the direction or recommendation by the First-tier Tribunal (Mental Health) or Mental Health Review Tribunal for Wales, of the discharge of a patient either conditionally or absolutely (sections 72-74);

vii. the absolute discharge by the First-tier Tribunal (Mental Health) or Mental Health Review Tribunal for Wales of a conditionally discharged patient (section 75).
**Users and uses of these Statistics**

The contents of the report will be of interest to the public, the media, agencies responsible for offender management at both national and local levels, government policy makers and others who want to understand more about MAPPA eligible offenders, including registered sex offenders, the use of restrictive orders and serious further offences.

The statistics included in this publication meet a broad spectrum of user needs as shown below.

<table>
<thead>
<tr>
<th>User</th>
<th>Summary of main statistical needs</th>
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</thead>
<tbody>
<tr>
<td>MOJ Ministers</td>
<td>Use the statistics to monitor the offender caseload and the use of some restrictive orders.</td>
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<tr>
<td>MPs and House of Lords</td>
<td>Statistics are used to answer parliamentary questions.</td>
</tr>
<tr>
<td>Policy teams</td>
<td>Statistics are used to inform policy development, to monitor impact of changes over time and to model future changes and their impact on the system</td>
</tr>
<tr>
<td>Agencies responsible for offender management</td>
<td>Current and historical robust administrative data are used to support performance management information at national and local levels to complement their understanding of the current picture and trends over time</td>
</tr>
<tr>
<td>Academia, students and businesses</td>
<td>Used as a source of statistics for research purposes and to support lectures, presentations and conferences</td>
</tr>
<tr>
<td>Journalists</td>
<td>Used as a compendium of robust data on Restricted Patients so that an accurate and coherent story can be told on this subset of the offender population.</td>
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<tr>
<td>Voluntary sector</td>
<td>Data are used to monitor trends of Restricted Patients, to reuse the data in their own briefing and research papers and to inform policy work and responses to consultations.</td>
</tr>
<tr>
<td>General public</td>
<td>Data are used to respond to ad-hoc requests and requests made under the Freedom of Information Act.</td>
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Related publications

**Offender Management Statistics Quarterly Bulletin**[^2]: This bulletin provides key statistics relating to offenders who are in prison or under Probation Service supervision. It covers flows into these services (receptions into prison or probation starts) and flows out (releases from prison or probation terminations) as well as the caseload of both services at specific points in time.

**Re-offending bulletin**[^3]: This report provides key statistics on proven re-offending in England and Wales. It gives proven re-offending figures for offenders who were released from custody, received a non-custodial conviction at court, received a caution, reprimand, warning or tested positive for opiates or cocaine.

In both cases, these reports will enable comparability with those offenders in and released from prisons.

**MAPPA Annual Report**[^4]: This report provides key statistics relating to offenders who are managed by Multi-Agency Public Protection Arrangements (MAPPA). These are a set of statutory arrangements to assess and manage the risk posed by certain sexual and violent offenders and involves Police, Probation and Prison Services.

**Release Schedule**

This bulletin was published on 25 April 2019 and includes calendar year statistics for the year 2018.

The next publication of Restricted Patients Bulletin is scheduled to be published on 30 April 2020.


Definitions

Admission
The admittance of an offender to secure hospitals as determined by the sentencing court or PPG on behalf of the Secretary of State for Justice and/or where a patient’s legal category changes. In some cases, a patient may appear to have been admitted or discharged more than once within a given year, although he/she may not have physically moved. In particular, patients transferred from prison to hospital while unsentenced or untried can reappear in the figures as admitted under restricted hospital orders. Transfers between hospitals in England and Wales are not counted as separate admissions, unless the patient’s legal category also changes.

Conditional Discharge
Release into the community but patient remains liable to detention in hospital and may be recalled by the Secretary of State for Justice.

Discharge
Release from hospital into the community.

Disposal
Leaving treatment as a restricted patient other than as a discharge or a transfer to another hospital in England and Wales.

High secure hospital
High secure hospitals hold patients detained under mental health legislation, who require treatment under conditions of high security because of their dangerous, violent or criminal propensities. There are three high secure hospitals, Ashworth, Broadmoor and Rampton.

Other Hospitals
Other hospital refers to any psychiatric hospital in England and Wales, which provides secure mental health services. These include ‘medium secure’ and ‘low secure’ hospitals and they admit other patients requiring mental health treatment as well as mentally disordered offenders.

Restricted patient
A mentally disordered offender (MDO) subject to a restriction order due to the risk of serious harm they pose to others and liable to a hospital order. They cannot be transferred between hospitals, discharged or allowed leave without consent of the Secretary of State for Justice. The First-tier Tribunal (Mental Health) in England and the Mental Health Review Tribunal for Wales can also discharge restricted patients if they conclude that the criteria for detention in hospital under the Mental Health Act 1983 is no longer met.
Data sources, quality and revisions

Information on Restricted Patients was obtained from the Public Protection Unit Database (PPUD) administered by the Mental Health Casework Section within the Public Protection Group of HMPPS.

Explanatory notes

Symbols and conventions

The following symbols have been used throughout the tables in this bulletin:

- = Not applicable
0 = Nil
.. = Not available
(r) = Revised data
(p) = Provisional data
— = Discontinuity in the series
Contact points for further information

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General information about the official statistics system of the UK is available from www.statistics.gov.uk

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