



Annex A: Proven Reoffending rates for restricted patients statistics, 2010 to 2016

Introduction

This annex presents statistics on the reoffending of restricted patients absolutely or conditionally discharged from detention in high secure or other psychiatric hospitals¹. Statistics on the reoffending of restricted patients was last published in the 'Proven reoffending statistics bulletin January to December 2014'².

An offender can become a restricted patient by one of two main routes. An offender convicted for a serious offence may be ordered to receive hospital treatment instead of a prison sentence. When making the hospital order, the Court has the option of adding a restriction order for offenders posing a risk of serious harm to others. "Restricted patients" are subject to risk management by the Secretary of State for Justice. Alternatively, if the Court passes a prison sentence, it can simultaneously direct the offender's admission to hospital, or the offender can subsequently be transferred to hospital by the Secretary of State. These prisoners are usually made subject to restrictions. In addition, there are other groups of restricted patients, such as offenders transferred from prison service establishments while unsentenced or untried, or offenders who are unfit to plead or found not guilty by reason of insanity.

The term "restricted patients" in this bulletin refers to persons who have been compulsorily admitted to hospital under Part V of the Mental Health Act 1959, Part III of the Mental Health Act 1983, or the Criminal Procedure (Insanity) Act 1964 as amended by the Criminal Procedure (Insanity and Unfitness to Plead) Act 1991, or the Domestic Violence, Crime and Victims Act 2004 (whose provisions came into force on 31 March 2005) and who are subject to a Restriction Order, Restriction Direction or Limitation Direction.

Restricted patients are liable for detention in psychiatric hospitals. Three high secure hospitals are available for those restricted patients who pose a grave and immediate risk.

The term discharge refers to release into the community, by whatever means, with or without conditions. Discharges can be ordered by either the Secretary of State or the First-Tier Tribunal (Mental Health) for England or the Mental Health Tribunal for Wales (which are independent bodies with discharge powers separate from those of the Secretary of State).

¹ There are three high security hospitals in England and Wales – Ashworth, Broadmoor and Rampton. 'Other' psychiatric hospitals refer to any other psychiatric hospitals in England and Wales which admit restricted patients as well as other patients. These include 'medium secure' and 'low secure' hospitals.

² www.gov.uk/government/statistics/proven-reoffending-statistics-quarterly-january-to-december-2014

Methodology

The methodology used to measure the reoffending of restricted patients uses a one year follow-up period and six month waiting period for cases to be proven in court. This means that a reoffence will only count if it is committed within one year of discharge and results in a court conviction, caution, reprimand or warning within 18 months of discharge. The method for restricted patients is based on an annual cohort, rather than the quarterly cohort used in the main proven reoffending statistics. For this reason, the results are not comparable. Further work is being undertaken to try to provide a comparable measure for restricted patients, to the overall proven reoffending methodology.

The figures in this bulletin cover restricted patients absolutely or conditionally discharged from detention in hospital. The reoffending data for restricted patients are based on information sourced from the MoJ's extract of the Police National Computer (PNC) and the Public Protection Unit Database (PPUD) owned by Her Majesty's Prison and Probation Service (HMPPS).

Caution should be exercised when interpreting the figures, which only represent the reoffending of restricted patients who can be matched to the PNC following their first discharge from hospital between 2010 and 2016. Therefore, the figures do not capture all restricted patients discharged into the community in a given year, or take into account recalls.

Results (see excel tables for Annex A)

In the 12 months ending December 2016 (Table 1), 404 restricted patients³ were absolutely or conditionally discharged from detention in hospital for the first time. Of these, 23 committed a proven reoffence within a year of discharge. This gives an overall proven reoffending rate of 5.7%, which represents a decrease of 0.2 percentage points from 2015 and an increase of 0.4 percentage points compared to 2010. However, due to the small number of reoffenders, the reoffending rate is prone to fluctuation. There is no clear trend in the reoffending rate since 2010, ranging between 3.6% and 5.9%.

As shown in Table 2, males accounted for 81% of the total number of restricted patients discharged in the 12 months ending December 2016, and females 19%. In the 12 months ending December 2016, 6.7% of males reoffended compared to 1.3% of females. For males, this represents a small decrease of 0.1 percentage points since 2015 and an increase of 1.4 percentage points since 2010. For females this represents a small decrease of 0.1 percentage points from 2015 and a drop of 4.0 percentage points since 2010. However, due to the small number of females particularly, these numbers should be interpreted with caution.

The volatility in the reoffending rates by age group (Table 3) is a consequence of the small numbers involved. It is, therefore, difficult to discern a trend or pattern in the reoffending rates of restricted patients by age group.

³This number does not represent the total number of restricted patients absolutely or conditionally discharged in 2016. In 2016, 519 restricted patients were discharged. Of these 404 were matched to the PNC. In 2015, 508 were discharged of which 393 were matched to the PNC.

Restricted patients with a large number of previous offences (Table 4), generally, have a higher rate of proven reoffending. In the 12 months ending December 2016, the proven reoffending rates ranged from 1.6% for offenders with no previous offences to 9.2% for offenders with 11 or more previous offences. Additionally, while those with 11 or more previous offences represented 46% of all restricted patients, they were responsible for committing 76% of all proven reoffences.

Table 5 shows that only two of the restricted patients discharged in the 12 months ending December 2016 committed an indictable reoffence in the 12 months after discharge. This is equivalent to an indictable proven reoffending rate of 0.5%.

Further information

Contact

Press enquiries should be directed to the Ministry of Justice press office:

Tel: 020 3334 3536

Email: newsdesk@justice.gov.uk

Other enquiries about these statistics should be directed to the Justice Statistics Analytical Services division of the Ministry of Justice:

Nick Mavron, Head of Prison, Probation, Reoffending and PbR Statistics

Ministry of Justice, 7th Floor, 102 Petty France, London, SW1H 9AJ

Email: ESD@justice.gov.uk

Next update: October 2020

URL: www.gov.uk/government/collections/proven-reoffending-statistics

© Crown copyright

Produced by the Ministry of Justice

Alternative formats are available on request from ESD@justice.gov.uk