

Equality & Human Rights Impact Assessment (EHRIA)

This Equality and Human Rights Impact Assessment (EHRIA) will enable you to assess the **new, proposed or significantly changed** policy/ practice/ procedure/ function/ service** for equality and human rights implications.

Undertaking this assessment will help you to identify whether or not this policy/ practice/ procedure/ function/ service** may have an adverse impact on a particular community or group of people. It will ultimately ensure that as an Authority we do not discriminate and we are able to promote equality, diversity and human rights.

Before completing this form please refer to the EHRIA [guidance](#), for further information about undertaking and completing the assessment. For further advice and guidance, please contact your [Departmental Equalities Group](#) or equality@leics.gov.uk

***Please note: The term 'policy' will be used throughout this assessment as shorthand for policy, practice, procedure, function or service.*

Key Details	
Name of policy being assessed:	Implementation of Social Care and Support into Leicestershire Prisons
Department and section:	Adults and Communities Department Strategic Planning and Commissioning
Name of lead officer/ job title and others completing this assessment:	Katie Joondan Strategic Planning and Commissioning Officer – Policy Lead
Contact telephone numbers:	0116 305 7832
Name of officer/s responsible for implementing this policy:	Katie Joondan
Date EHRIA assessment started:	29 th December 2014
Date EHRIA assessment completed:	17 th February 2015

Section 1: Defining the policy

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You should begin this assessment by defining and outlining the scope of this policy. You should consider the impact or likely impact of the policy in relation to all areas of equality, diversity and human rights, as outlined in Leicestershire County Council's Equality Strategy.

1	<p>What is new or changed in this policy? <i>What has changed and why?</i></p> <p>Implementing social care and support functions in prisons, approved premises and bail accommodation is a new requirement as prescribed by the Care Act 2014. The requirement becomes a statutory obligation from April 1st 2015. Currently there is no social care provision provided to the two Leicestershire prisons, Gartree and Glen Parva. The requirement constitutes a change to the way that social care needs are identified, assessed and acted upon for people with eligible social care needs in a custodial setting. Prior to the Care Act 2014 this requirement was not specifically stipulated to be any organisations responsibility but it was typically picked up by Offender Health Services.</p> <p>Leicestershire has one bail accommodation unit in Loughborough that houses 3 beds. People living here with social care needs can access the local social care provision if required as these people are not incarcerated. The national provider of Bail Hostels (Bail Accommodation Support Services) has been involved in the project and is aware that this group of people can access local provision.</p> <p>Leicestershire does not have any approved premises in its boundary and therefore Leicestershire's implementation of this part of the Care Act has focused on the care and support of prisoners.</p>
2	<p>Does this relate to any other policy within your department, the Council or with other partner organisations? <i>If yes, please reference the relevant policy or EHRIA. If unknown, further investigation may be required.</i></p> <p>An overarching EHRIA has been conducted for the Care Act 2014. People in prison are entitled to the same provision as people in the community, therefore most of the Department's policies also apply to this group, for example the Cost Effective Care policy, eligibility rules, charging policy.</p> <p>Policies relating to carers, direct payments or choosing accommodation do not apply to prisoners.</p>
3	<p>Who are the people/ groups (target groups) affected and what is the intended change or outcome for them?</p> <p>The provision of social care and support will be offered to all prisoners serving a sentence in a Leicestershire prison with eligible care needs. For those prisoners who do not have eligible needs information, advice and wellbeing sessions will be made available to them to prevent and reduce decline in their wellbeing.</p>

	<p>All prisoners will have the right to request an assessment and have access to independent advocacy services.</p> <p>Comprehensive training is being offered to internal local authority staff that will advise them on the processes and procedures related to working with this client group. Training is also being provided to prison officers and health care teams by Leicestershire's learning and development team.</p>		
4	<p>Will this policy meet the Equality Act 2010 requirements to have due regard to the need to meet any of the following aspects? (Please tick and explain how)</p>		
		Yes	No
			How?
	Eliminate unlawful discrimination, harassment and victimisation	✓	Supporting people to be as independent as possible will reduce opportunities for vulnerable prisoners to be abused or at risk from abuse, discrimination, harassment and victimisation.
	Advance equality of opportunity between different groups	✓	Supporting people to be as independent as possible will reduce opportunities for vulnerable prisoners to be abused or at risk from abuse and provide opportunities to be involved in everyday activities. This will ensure groups can interact together on a more equal footing.
	Foster good relations between different groups		✓ Whilst there is no evidence to suggest that this policy change will enhance or degrade existing prison relations it could contribute to ill feeling between the community and prisoners.

Section 2: Equality and Human Rights Impact Assessment (EHRIA) Screening

Section 2: Equality and Human Rights Impact Assessment Screening

The purpose of this section of the assessment is to help you decide if a full EHRIA is required.

If you have already identified that a full EHRIA is needed for this policy/ practice/ procedure/ function/ service, either via service planning processes or other means, then please go straight to [Section 3](#) on Page 7 of this document.

Section 2

A: Research and Consultation

5.	Have the target groups been consulted about the following?	Yes	No*
	a) their current needs and aspirations and what is important to them;		✓

	b) any potential impact of this change on them (positive and negative, intended and unintended);		✓
	c) potential barriers they may face		✓
6.	If the target groups have not been consulted directly, have representatives been consulted or research explored (e.g. Equality Mapping)?	✓	
7.	Have other stakeholder groups/ secondary groups (e.g. carers of service users) been explored in terms of potential unintended impacts?	✓	
8.	*If you answered 'no' to the question above, please use the space below to outline what consultation you are planning to undertake, or why you do not consider it to be necessary.		
	Prisoners will be engaged with about the proposals; this is planned for March 2015. So far only the Prison staff have been engaged with to ensure proposals meet security standards and are practical within the prison environment.		

Section 2

B: Monitoring Impact

9.	Are there systems set up to:	Yes	No
	a) monitor impact (positive and negative, intended and unintended) for different groups;		✓
	b) enable open feedback and suggestions from different communities		✓

Note: If no to Question 8, you will need to ensure that monitoring systems are established to check for impact on the protected characteristics.

Section 2

C: Potential Impact

10.	Use the table below to specify if any individuals or community groups who identify with any of the ' protected characteristics ' may <u>potentially</u> be affected by this policy and describe any positive and negative impacts, including any barriers.			
		Yes	No	Comments
	Age	✓		<p>The Department of Health has estimated that the costs of the Care Act for prisoners to local authorities will be £9.4 million per year - comprising of £7.4 million for people over 50 and £2 million for people below 50. This includes assessment and the cost of the care.</p> <p>Research conducted by the National Offender Management Service (NOMS) indicates that on average people in prison are 10 years older in their physiology than their chronological age.</p>

			<p>This means that the Leicestershire prison population will have disproportionately more people in need of care and support than those in the community of a similar age.</p> <p>In HMP Gartree the age profile on a snapshot date in January 2015 was -</p> <p>Number of prisoners under 50 years = 560 Number of prisoners aged 50-59 years = 87 Number of prisoners aged 60-64 years = 46 Number of prisoners aged 65-74 years = 11 Number of prisoners 75 years and over = 0 Total number of prisoners = 704</p> <p>Older prisoners</p> <p>According to the Bromley Briefings, Autumn 2014 the whole prison population has shown a continued trend of ageing since 2002.</p> <p>The proportion of prisoners aged 40 or above has increased from 18.5% in 2002 to 30.5% by 30 June 2014. The proportion of prisoners aged 60 or over has more than doubled from 2.1% in 2002 to 4.4% by 30 June 2014.</p> <p>People aged 60 and over and those aged 50–59 are respectively the first and second fastest growing age groups in the prison population.</p> <p>Between 2002 and 2014 there was an increase of 146% and 122% in the number of prisoners held in those age groups respectively..</p> <p>On 31 March 2014 there were 102 people in prison aged 80 and over. Five people in prison were 90 or older.</p> <p>On 30 June 2014 there were 2,090 people aged 50 and over serving life sentences, of these 1,253 were mandatory sentences.</p> <p>14% of older prisoners belong to a minority ethnic group, far higher than the proportion of the general population.</p> <p>In 2010–11 the Prisons and Probation Ombudsman called for a formal revision of restraints policy relating to seriously ill prisoners. Such a review has not taken place and the Ombudsman continues to investigate deaths where elderly people with limited mobility have been restrained with handcuffs and chains, even when they had been</p>
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				<p>assessed as a low escape risk and a low risk to the public. In some cases, restraints had restricted their access to appropriate healthcare intervention.</p> <p>Prisoners can apply for compassionate release if they have a life expectancy of less than three months, are bedridden or severely incapacitated. Numbers released on compassionate release are low.</p> <p>While the prevalence of dementia among older prisoners remains largely undetermined, combining rates in the community with the theory of accelerated ageing in prison would suggest it affects approximately 5% of prisoners over 55.</p> <p>Younger prisoners.</p> <p>In HMYOI Glen Parva on a snapshot date in January 2015 679 prisoners were incarcerated aged between 18 and 21 years. Of these none were identified as having social care needs but again this judgement was not made by a social care professional.</p> <p>At the end of June 2014 there were 5,701 young adults aged 18–20 in prison in England and Wales, 9% fewer than the previous year.</p> <p>In the 12 months ending March 2014 there were 8,522 young adults sent to prison under sentence, a 17% fall on the previous year.</p> <p>5,450 young adults entered prison to await trial, a fall of 9% from the previous year.</p> <p>While people aged 18–24 account for one in 10 of the UK population in 2010, they accounted for a third of those sentenced to prison each year; a third of the probation service caseload and a third of the total economic and social costs of crime.</p> <p>Only 5% of young adults surveyed by HM Inspectorate of Prisons in 2011–12 spent 10 or more hours a day out of cell in purposeful activity and just over half said they have association five or more times a week. In 2010–11, 12% of young adults surveyed had experienced some form of physical abuse from other prisoners.</p> <p>There were five self-inflicted deaths of young adult prisoners in 2013, all of them young men.</p>
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				<p>In the previous year there were two deaths.</p> <p>Young adults account for 17% of all self-harm incidents although they represent 7% of the population in custody.</p> <p>27% of young adults reported arriving into prison with an alcohol problem and 23% believe they will leave with an alcohol problem.</p>
	Disability	✓		<p>People with disabilities who are in prison are looked after by Offender Health Services but they do not usually receive any social care support which may promote their independence and quality of life. By assessing prisoners for eligible needs we will be able to contribute to a better quality life.</p> <p>An estimated 36% of 1,435 prisoners interviewed for the Surveying Prisoner Crime Reduction study, were considered to have a disability when survey answers about disability and health, including mental health, were screened. This compares with 20% of men and 18% of women in the community.</p> <p>A higher proportion of prisoners with a disability than those without a disability stated that they need help with a medical problem (35% compared to 10%) and with a mental health or emotional problem (40% compared to 9%).</p> <p>HM Inspectorate of Prisons found that 37% of those over the age of 50 had a disability, accounting for 21% of all disabled prisoners.</p> <p>The Inspectorate also found that sometimes questionable security imperatives got in the way of making reasonable adjustments required by the Equality Act 2010.</p> <p>18% of prisoners interviewed were considered to have a physical disability.</p> <p>Many offenders experience chronic health problems prior to or during incarceration as a result of poverty, poor diet, inadequate access to healthcare, alcoholism, smoking and other substance abuse.</p> <p>In 2010 the then HM Chief Inspector of Prisons said in her annual report that often inspectors found that prisoners with mobility difficulties suffered considerable disadvantage because of the refusal by prison staff to push</p>

				<p>wheelchairs without training.</p> <p>Some prisons inspected in 2012–13 had made significant adaptations to their accommodation, and prisoners were used as paid carers and wheelchair pushers. In surveys conducted by HM Inspectorate of Prisons, prisoners with a disability continued to report reduced access to the regime—including education or vocational training, access to the library, gym, exercise and association compared to prisoners without a disability.</p> <p>Learning disabilities</p> <p>20–30% of all offenders have learning disabilities or difficulties that interfere with their ability to cope with the criminal justice system.</p> <p>People with learning disabilities or difficulties can experience problems communicating and expressing themselves, and in understanding ordinary social cues. 7% of prisoners have an IQ of less than 70 and a further 25% have an IQ between 70–79.</p> <p>21% of young people in custody surveyed for the Youth Justice Board reported that they had learning difficulties.</p> <p>Dyslexia is three to four times more common amongst prisoners than the general population. Over 80% of prison staff say that information accompanying people into prison is unlikely to show that the presence of learning disabilities had been identified prior to their arrival. Once in prison there is no routine or systematic procedure for identifying prisoners with learning disabilities. Consequently the particular needs of such prisoners are rarely recognised or met.</p> <p>Many prisoners with learning disabilities or difficulties find it hard to access prison information; over two-thirds have problems reading prison information, which rises to four fifths for those with learning disabilities.</p> <p>Over two-thirds have problems filling in prison forms, which rises to three-quarters for those with learning disabilities. Consequently many miss out on things such as family visits and going to the gym, or getting the wrong things delivered such as canteen goods.</p>
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				<p>Prisoners with learning disabilities or difficulties are five times as likely as prisoners without such impairments to have been subject to control and restraint techniques and more than three times as likely to have spent time in segregation</p> <p>Prisoners with learning disabilities or difficulties are more than three times as likely as prisoners without such impairments to have clinically significant depression or anxiety.</p> <p>Youth offending team staff often do not know what specialist service provision is available to help support children with learning disabilities and difficulties, or what benefits access to such support might bring.</p>
	Gender Reassignment	✓		This policy change will affect people with social care needs and people who are undertaking gender reassignment will be treated the same as all other prisoners when their needs are being assessed.
	Marriage and Civil Partnership	✓		This policy change will affect people with social care needs regardless of their marital status.
	Pregnancy and Maternity		✓	Leicestershire prisons are male only and therefore this criterion is not applicable.
	Race	✓		<p>This policy change will affect people with social care needs regardless of their race.</p> <p>On 30 June 2014, 26% of the prison population, 21,937 people, came from a minority ethnic group. This compares to around one in 10 of the general population.</p> <p>Of the British national prison population, 10% are black and 6% are Asian. For black Britons this is significantly higher than the 2.8% of the general population they represent.</p> <p>Overall, black prisoners account for the largest number of minority ethnic prisoners (49%). At the end of June 2014, 28% of minority ethnic prisoners were foreign nationals.</p> <p>Special consideration will need to be given to supporting the variety of languages spoken in the prison and the possible impact a social care assessment may have on their asylum status.</p>

	Religion or Belief	✓		<p>This policy change will affect people with social care needs regardless of their religion or beliefs race.</p> <p>50% of the total prison population are Christian (of whom 40% are Anglican, 36% Roman Catholic, 22% other Christian, 2% Free Church), 14% are Muslim, 2% Buddhist and 30% report having no religion.</p> <p>The number of Muslim prisoners has more than doubled over the past 12 years. In 2002 there were 5,502 Muslims in prison, but by 2014 this had risen to 12,106.</p> <p>Muslims in prison are far from being a homogeneous group. Some were born into Muslim families, and others have converted. In 2013, 41% were Asian, 31% were black, 14% were white and 8% were mixed.</p> <p>Analysis by HM Inspectorate of Prisons found that less than one per cent of Muslims in prison were there for terrorism related offences. A higher proportion of people in BAME groups were sentenced to immediate custody for indictable offences than white people.</p>
	Sex		✓	Leicestershire prisons are male only.
	Sexual Orientation	✓		This policy change will affect people with social care needs regardless of their sexual orientation.
	Other groups e.g. rural isolation, deprivation, health inequality, carers, asylum seeker and refugee communities, looked after children, deprived or disadvantaged communities	✓		<p>HMYOI Glen Parva has a large number of foreign nationals residing in it. They will usually be deported after serving their sentence and have no recourse to public funds.</p> <p>Since April 2013, NHS England became responsible for commissioning of all health services. Responsibility for commissioning offender health services lies with ten of the 27 area teams of NHS England. A National Partnership Agreement between NHS England and NOMS sets out a commitment and strategy for joint working.</p> <p>HM Chief Inspector of Prisons has said that Gypsy, Roma and Traveller prisoners are a significant but often unrecognised minority in some prisons. Prison Inspectorate surveys conducted in 2012–2013 found that 5% of prisoners said they considered themselves to be Gypsy, Romany or Traveller. However,</p>

				<p>“there is evidence of a possible reluctance by many Gypsy, Romany or Traveller prisoners to identify themselves as such.”</p> <p>A study of Irish Travellers in prison found that Irish Travellers represent between 0.6% and 1% of the entire prison population and between 2.5% and 4% of the minority ethnic population in prison. The survey report notes that this number “must be seen as a minimum.”</p> <p>The population of Irish Travellers in England is estimated at between 55,000 and 123,000, accounting for between 0.1- 0.2% of the population.</p>
	Community Cohesion		✓	<p>Prison is a community in itself and the role of probation will be to reintroduce prisoners into the community after serving their sentence.</p> <p>Implementing social care in prisons should improve community cohesion in the prison setting by providing independence and an opportunity to choose for the less mobile in the prison.</p> <p>Over a quarter of prisoners in their sample of foreseeable deaths had no palliative care plan, support for families was variable, and greater efforts could have been made to obtain temporary or compassionate release to allow prisoners to die with dignity in the community.</p>
11.	<p>Are the human rights of individuals <u>potentially</u> affected by this proposal? Could there be an impact on human rights for any of the protected characteristics? (Please tick)</p> <p>Explain why you consider that any particular article in the Human Rights Act may apply to your policy/ practice/ function or procedure and how the human rights of individuals are likely to be affected below: [NB. Include positive and negative impacts as well as barriers in benefiting from the above proposal]</p>			
		Yes	No	Comments
	Part 1: The Convention- Rights and Freedoms			
	Article 2: Right to life	✓		Prisons house very dangerous people and therefore some prisoners will pose a real and immediate risk to someone's life. By providing social care and support to people with eligible needs the Council is taking appropriate preventive operational measures to protect that person. This is of course in partnership with the

			<p>prison staff and other agencies promoting safer custody.</p> <p>Immediate responsibility to protect Article 2 rights would appear to lie with the prison authorities, representing the jurisdiction that has assumed responsibility for welfare and safety.</p>
	Article 3: Right not to be tortured or treated in an inhuman or degrading way	✓	<p>The prisoner's human rights are potentially promoted because those prisoners with eligible social care needs will have access to life enhancing aids, adaptations and personal care. Their vulnerability should reduce if they are more independent and receive personal care assistance.</p> <p>The care services provided to eligible people in a prison setting will be subject to the same standards and scrutiny as any other comparable services we provide.</p>
	Article 4: Right not to be subjected to slavery/ forced labour		✓
	Article 5: Right to liberty and security		✓
	Article 6: Right to a fair trial	✓	<p>HM Inspectorate of Prisons analysis suggests that black and minority ethnic prisoners have more negative perceptions of the fairness and effectiveness of complaints systems. 28% who said that they had made a complaint felt they were dealt with fairly compared with 41% of white prisoners, and 22% reported being prevented from making a complaint, compared with 15% of white prisoners.</p>
	Article 7: No punishment without law		✓
	Article 8: Right to respect for private and family life	✓	<p>The care services provided to eligible people in a prison setting will be subject to the same standards and scrutiny as any other comparable service we provide.</p> <p>It is possible that this right could be restricted if the prison authorities disallow certain aids and adaptations on the grounds that they could be used in other ways that may be dangerous to the prisoner or other inmates. This question will require some clarity, and a protocol is being</p>

				developed with Health designed to address this potential difficulty.	
	Article 9: Right to freedom of thought, conscience and religion		✓		
	Article 10: Right to freedom of expression		✓		
	Article 11: Right to freedom of assembly and association		✓		
	Article 12: Right to marry		✓		
	Article 14: Right not to be discriminated against		✓		
Part 2: The First Protocol					
	Article 1: Protection of property/ peaceful enjoyment		✓		
	Article 2: Right to education		✓		
	Article 3: Right to free elections		✓		
Section 2					
D: Decision					
12.	Is there evidence or any other reason to suggest that:	Yes	No	Unknown	
	a) this policy could have a different affect or adverse impact on any section of the community;		✓		
	b) any section of the community may face barriers in benefiting from the proposal		✓		
13.	Based on the answers to the questions above, what is the likely impact of this policy				
	No Impact <input type="checkbox"/>	Positive Impact <input checked="" type="checkbox"/>	Neutral Impact <input type="checkbox"/>	Negative Impact or Impact Unknown <input type="checkbox"/>	
Note: If the decision is 'Negative Impact' or 'Impact Not Known' an EHRIA Report is required.					
14.	Is an EHRIA report required?	Yes <input type="checkbox"/>		No <input checked="" type="checkbox"/>	

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Section 4: Sign off and scrutiny

Upon completion, the Lead Officer completing this assessment is required to sign the document in the section below.

It is required that this Equality and Human Rights Impact Assessment (EHRIA) is scrutinised by your [Departmental Equalities Group](#) and signed off by the Chair of the Group.

Once scrutiny and sign off has taken place, a depersonalised version of this EHRIA should be published on Leicestershire County Council's website.

Section 4 A: Sign Off and Scrutiny

Confirm, as appropriate, which elements of the EHRIA have been completed and are required for sign off and scrutiny.

Equality and Human Rights Assessment Screening ☒

Equality and Human Rights Assessment Report ☐

1st Authorised Signature (EHRIA Lead Officer):

Date:

2nd Authorised Signature (DEG Chair): ...



Date: ...03/03/2015.....