

# Perinatal Care in Custody.

Facilitating a collaborative approach.

**Fiona Dry**

**Specialist Midwife for Vulnerable women in the  
Judicial System HMP Low Newton.**

**Teresa Purvis**

**Perinatal Clinical Lead for Mental Health  
HMP Low Newton**

# Low Newton Prison

- Houses up to 350 residents.
- Residents from Young offenders to those serving a life sentence, Cat A to D.
- One of four women's prisons in the Northern region alongside Styal, New Hall and Askham Grange.
- Low Newton does not have a mother and baby unit. The other three female units can house up to ten Mothers with their Baby's on designated Mother and Baby Units.

# Why Now?

- Recommendations of Coroners report following a death in custody Dec 2015. These recommendations pointed out the following main areas for action :
- Confusion relating to terms, acronyms and document titles across agencies.
- Issues relating to criteria for referral to safer custody within prison.
- Absence of clear guidelines for staff and methods of information sharing, contributing to the lack adequate of communication between the multi disciplinary team (OMU, Mental Health, DART, Midwifery, safer custody)

# What we are doing at Low Newton?

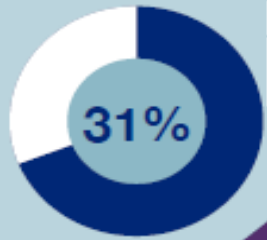
- We are implementing an innovative and collaborative cross agency approach to improve the safety and effectiveness of prison perinatal care (from pregnancy to 12 months post natal).
- We are a strong and dynamic multi disciplinary team making demonstrable improvements to ensure 'equivalence of care' in line with national guidance in a challenging and complex environment.
- Our HMP perinatal pathway is being adapted by women's prisons across the Northern region as an example of Best Practice.

# 'Care versus custody?'

There is a clear need for a convergence of knowledge.



# Women In Prison – March 2018 Public Health Matters



Almost one-third of female offenders have spent time in care as a child

## Domestic violence



Over half the women in prison say they have suffered domestic violence



53% of women in prison have experienced child abuse

High rates of post traumatic stress have been reported

## Drug use



8/10 have ever taken an illegal drug



6/10 have used class A drugs in the four weeks before custody



5/10 reported committing offences to support someone else's drug use



49% of women had a drug problem on arrival in prison

## Impact on families



6/10 have dependent children



2/10 are lone parents before imprisonment



84% are serving a sentence for non-violent crime



Only 5% of children remain in their own homes while their mother is in prison

Suicide among recently released female prisoners is

**40x**

higher than general population

Just under half of female prisoners (46%) have attempted suicide at some point

## Sexual health

Women have higher rates than men HIV, Hepatitis C and STIs such as chlamydia infection, gonorrhoea and syphilis



## Mental health

**5x**

Women in prison are **5x more likely** to have mental health concerns than the general female population



65% of women in prison suffer from depression, compared to 37% of men in prison

Prison population

Self harm incidents



Women in prison accounted for **23%** of all prison self harm incidents despite representing just **5%** of the prison population



# Vulnerability

- Vulnerability of Women in prison can be seen to be markedly increased compared to the general population. (Public Health matters - Statistics 2018)
- ‘Institutional Thoughtlessness’ (Crawley). Practices may not be questioned or rationalised in large scale institutions by staff or clients.
- Lack of control and disempowerment due to restrictions of the custodial setting and absence of infants at Low Newton which does not have a Mother and Baby Unit.

# The need for change - Evidence

## National:

- Equivalence of Care agenda.
- **Birth Charter. Birth Companions 2016. RCM endorsed.**
- WHO guidance, incl. Health in Prisons guide, Women's Health in Prison (UNODC).
- Corston Report – key driver for reform – review 2014.
- Women In Prisons, National charity providing specialist support and information.
- Research based approaches e.g. Trauma informed care.
- NICE – CG 192/CG62
- Better Births – Maternity Review - 2017
- **PHE Gender Specific Standards to Improve Health and Wellbeing for Women in Prison in England**

## Regional:

- NHS Regional Commissioning Boards. North East Offender Health commissioning unit.
- CCG commissioning of services for those involved in the judicial system but not detained.
- Local Authority – public health services to wider population.
- Prison service, resettlement pathways, sentence planning.
- Police.

## Local:

- Local prison partnership boards, (bringing together all of the above)
- **Local prison reports, inquest recommendations and commissioned insights (Adrian Clarke).**
- Local NHS trusts providing direct health care.



# Mental Health input

- Development of the HMP Perinatal care Protocol.
- Member of the MH team allocated as lead for perinatal caseload
- Standardised assessment process introduced using recognised tools (e.g. use of Whooley questions)
- Weekly perinatal review meetings. Opportunity to refer to additional support services via MDT
- Additional support/debriefs for staff across MDT and wider HMP teams.



# Midwifery input

- Developing the 'Maternity care pathway' (based on 2016 Birth Companions Birth Charter.)
- Continued consistent maternity caseload management and greater access to Midwife within the HMP environment.
- Developing associated documents to improve information sharing and guidance for all agencies, through cross agency consultation.
- Assertive advocacy role in relation to perinatal needs of residents.



# Midwifery input cont...



- Cross agency training and workforce development relating to needs of client group and awareness of the pathway - Conduit between HMP and Obstetric and Safeguarding teams.
- Ongoing monitoring and amendment of the care pathway using client and staff evaluation.
- Increase of in house services such as lactation plans and plans to input CTG monitoring service in HMP Antenatal clinic.

# HMP input



- Scrutiny of the HMP perinatal protocol to ensure it is relevant and ‘fit for purpose’ for HMP teams.
- Allocated perinatal Offender Manager -sharing of relevant elements of client Sentence Management plans with the MDT.
- Membership of the HMP Family Support worker within the MDT- liaising with social services & families on HMP behalf. This means we make better informed decisions to support the residents, aiding the safety of the client and their children throughout the perinatal period.

# HMP input cont...



- A named Offender Supervisor designated as member of the perinatal MDT.
- Increased input of Safer Custody teams in weekly perinatal meetings when risks are identified and in Hospital pre discharge planning.
- Attendance at workforce development sessions and improved team support.
- Increased awareness of perinatal health issues and the impact on individuals, ensuring increased monitoring of clients when applicable.  
(ACCT)

# Ongoing Developments:

- Regular student placements in HMP.
- Additional resources to support parents e.g. commissioning of 'Baby Express'
- Improved access to support for staff
- Collaboration with Birth Companions project to develop peer support and parent education.
- Further development of pregnancy assessment services in HMP setting.
- Further collection of client evaluation data and adaption of NHS 'friends and family' test.





# Ongoing developments cont...

- Regional framework and clinical network development
- Developing relationships with external services e.g. Pause Practices in the Northern region
- Raise awareness with Social services around MBU applications.
- Trust Travel Award - Nov 2018
- Consultation to develop Health visiting services.
- Showcasing regionally and nationally
- Continued reporting to stakeholders



# Feedback

“ I am currently a prisoner in HMP Low Newton and I have been working with the midwife here since May last year. The support I have received throughout my pregnancy and afterwards from Fiona has been amazing, I honestly wouldn't of got through any of what I have without her. I couldn't be any more thankful for the services provided in this establishment and with such a kind, caring, understanding and supportive midwife.”





# Celebrating and Showcasing!



# Best Maternity and Midwifery Service 2018 HSJ- Patient Safety Awards



Thank you.....

