

## **7.9 Forensic Mental Health**

Forensic Mental Health Services provide assessment, treatment, and rehabilitation for mentally disordered people who pose a significant risk of serious harm to others. There is a tiered protocol of service delivery with assessment available to all suitable referrals.

Regional Forensic Mental Health in-patient services are provided by the 34-bedded Shannon Clinic facility on the Knockbracken Health Care Park site. Inpatients are required to be detainable under the Mental Health Order so the inpatient service is orientated towards severe mental illness. Community forensic multi-disciplinary teams in each Board area work collaboratively with both Shannon Clinic and general mental health services as well as the various agencies of the Criminal Justice System, i.e. Police, Probation, Courts and Prison. The community service will deal with a wide range of mental disorder.

The mentally disordered offender, regardless of setting (e.g. whether in police custody, in prison or in the community) can access mental health services in the same way as a non-offender patient i.e. through crisis teams and sector mental health teams. If these teams identify serious risk they will refer to forensic mental health services for additional input. This integrative approach makes most efficient use of resources.

## **Overarching Standard 55: Forensic Mental Health Services**

A person who is a mentally disordered offender (MDO) (young person or adult) should have access to the full range of services and interventions available to those in the general population delivered in the appropriate environment by suitably trained staff.

### **Rationale**

Mentally disordered offenders are entitled to equal access to the full range of services and interventions, and should not be denied access solely on the principle of risk or lack of available resources.

### **Evidence**

Bamford Review: The Reform and Modernisation of Mental Health and Learning Disability Services (May 2007) <http://www.rmhdni.gov.uk/>

Reed Principles (1994)

Human Rights Act (1998)

[http://www.direct.gov.uk/en/Governmentcitizensandrights/Yourrightsandresponsibilities/DG\\_4002951](http://www.direct.gov.uk/en/Governmentcitizensandrights/Yourrightsandresponsibilities/DG_4002951)

Revolving Doors (2005)

<http://www.revolving-doors.org.uk>

NACRO (2005)

<http://www.nacro.org.uk>

Responsibility for Prison Health Care transferred to NHS

### **Responsibility for delivery/implementation**

There are a wide range of services and agencies required to work collaboratively to make this standard a reality. These agencies include, but are not exclusive to:

DHSSPS and their associate HSC Trusts in partnership with

Northern Ireland Prison Service

Police Service of Northern Ireland

Northern Ireland Probation Board

Northern Ireland Housing Executive

Voluntary/Independent Sector

### **Quality Dimensions**

**Person Centred** - People accessing forensic mental health services, what is important to them, their family and friends are central to the assessment and early intervention/treatment process. Options should be explored in regard to what would work best for them given their unique history, context and lifestyle.

**Timely** - Complies with Human Rights legislation. Drives agenda for step-down resources.

**Equitable** - Decisions based on needs assessment. Reflective of generic

service provision. Mental health issues are given serious consideration when dealing with the individual supports the principles of 'equivalence' and 'reciprocity'

**Effective** - Treatment and interventions are delivered in the most appropriate environment. Mental health needs are speedily identified and interventions put in place early to address need. Promotes effective communication between agencies. Early intervention promotes better outcomes. Service delivery is needs driven.

**Efficient** - Promotes better use of resources. Treatment delivered in the most appropriate environment. Supports collaborative working and sharing of resources.

**Safe** - Care and treatment are delivered in the most appropriate environment based on assessed need. Promotes proactive positive risk management.

**Equitable** - MDOs regardless of their location have access to services and resources appropriate to their need.

<b>Performance Indicator</b>	<b>Data Source</b>	<b>Anticipated Performance Level</b>	<b>Date to be achieved by</b>
Review of services and interventions available to any person within the criminal justice system	HSC Trust report	Establish baseline  Performance level to be determined once baseline established	March 2013