

Rory Stewart MP

Minister of State

Ministry of Justice

Selborne House, 54-60, Victoria St

SW1E 6QW

March 19th 2019

Dear Mr Stewart,

I am writing to raise concerns about serious weaknesses in the collaboration between the prison service, IRCs and ambulance services, in relation to the provision of emergency care and safeguarding.

Our principle concern is about the time taken for ambulance crews to obtain access to patients inside prisons and IRCs, when they are identified as being ARP Category 1 or 2 by Emergency Operations Centres and therefore require care within a few minutes.

Paramedics have often told us that although their response to Cat 1 calls is immediate and should achieve their 7 minute target, that in practice they are often delayed at prison or IRC gates for very long periods, creating a serious risk to the life of the detained person.

We have asked the LAS for data on total times to reach patients in prisons and IRCs, but they do not hold this data and can only produce data on single responses that are classified as serious incidents or where there is a complaint being investigated. They tell us that the LAS has no jurisdiction once at the boundary of the prison or IRC and must adhere to local rules and regulations.

We assumed that each prison, IRC and YOI would have detailed information about the time taken from the arrival of ambulances to patient contact, and therefore wrote to each prison, IRC and YOI in London with the following questions:

1. What was the average time in 2016/17 and 2017/18 from the arrival of emergency ambulances at your gates to direct ambulance crew contact with unwell detainee?
2. What were the 5 longest times from arrival at your gates to contact with unwell patients in 2016/17 and 2017/18?
3. What was the average time taken from the end of emergency ambulance crew contact with patients to their leaving your gates in 2016/17 and 2017/18
4. How many detainees were taken by emergency ambulance to hospital in 2016/17 and 2017/18?
5. How many Safeguarding referrals were made in 2016/17 and 2017/18?

Unfortunately, none of the prisons or IRCs could provide any data and our questions were referred to the Ministry of Justice and Home Office, who replied that either information was not available, or our request for information exceeded the cost threshold of the Freedom of Information Act.

Our concern is the safety of prisoners and detainees who have very serious health problems or have self harmed. Getting access to the information we have requested is essential to achieving the objective of reducing morbidity and deaths in prisons and IRCs. We have also raised this issue with Kate Davies, Director of Health and Justice, Commissioning NHS England.

Perhaps you can ask your team to provide access to the data we have requested on arrival times of ambulances at prison, YOI and IRC gates, to direct patient contact, for paramedics providing Cat 1 and Cat 2 emergency responses.

We are also concerned about the issue of safeguarding when an LAS crew has concerns about the safety of a prisoner or someone detained in an IRC or YOI. The LAS has told us that: “Local Authorities receive all safeguarding concerns raised and triage accordingly and pass to the relevant agencies to engage. Prisons are different as the Local Authorities do not have jurisdiction over them - safeguarding concerns are dealt with in house” Clearly, the point of safeguarding is to enable an independent local body to assess the level of harm or potential harm and to take appropriate action. We cannot see how this is possible if safeguarding is dealt with in-house.

We believe that all those detained in prisons, IRCs and YOIs have the right to receive care and treatment in a way that is equal to all other people in the UK. This right to equality of access and treatment is built into the fabric of law and rights within the NHS constitution and the Human Rights Act. We would therefore very much like to discuss with you how we can ensure that people who are detained in prisons, YOIs or IRCs receive equal access to emergency care and effective safeguarding.

I look forward to receiving your reply and I hope we can find a resolution to these extremely serious matters.

Yours sincerely



Malcolm Alexander

Chair

Patients’ Forum for the LAS

07817505193

[WWW.Patientsforumlas.net](http://WWW.Patientsforumlas.net) Patientsforumlas@aol.com

Address: 30c Portland Rise, N4 2PP

Copy to: Kate Davies OBE, Director of Health and Justice, Commissioning NHS England

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