

“He’s supposed to lose his liberty, not his human rights”

A summary of semi-structured interviews with families and carers in London prison visiting centres

January 2023 – April 2023

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HMP Belmarsh, HMP Brixton, HMP/YOI Feltham A & B, HMP/YOI Isis, HMP Pentonville, HMP Thameside, HMP Wandsworth and HMP Wormwood Scrubs

Summary

From January to April 2023, the *Listen to Families* team has spoken to 227 families and carers with loved ones in London prisons. Of these, 53% (n=122) had significant experience to share regarding their loved one’s healthcare. The remainder had little or no experience of dealing with prison healthcare either because their loved one is new to prison, their loved one is young and healthy, or because the carer is generally uninvolved in their loved one’s medical care.

Families and carers described a variety of experiences with the prison healthcare system – either first-hand through their own experience or second-hand based on their loved one’s accounts.

Some of the reported experiences were positive. We encountered families who felt supported by prison healthcare teams, had developed clear lines of communication with staff members, and felt assured that their loved one was receiving timely and effective care.

However, the overwhelming majority of families and carers reported negative experiences with the prison healthcare systems and lacked confidence that their loved one’s mental and physical health needs were being met. Across the nine London prisons we visited between January and April 2023, we found that families and carers raised a number of issues repeatedly:

- (1) There is a lack of communication between prison staff, healthcare staff, patients and their families. As a result, many families feel out of the loop regarding their loved one’s care. Patients likewise feel ignored.
- (2) Patients experience significant delays in receiving clinical attention, treatment, and medication, including those with serious and life-threatening conditions. Delays contributed to poor outcomes across physical health, mental health, optical and dentistry services.
- (3) Patients’ pain is often not taken seriously by prison and medical staff.
- (4) Medical information is not transferred from one prison to the next in a timely manner, impacting patients’ continuity of care.

- (5) Many patients and their families describe being shown a lack of respect by prison and/or medical staff. They report that patients are “treated like animals”, and that families are “treated like criminals”.
- (6) Families and carers would like more information about healthcare services in prison. For example, they want explanations of why their loved one’s health needs are not being met, what levers are available to get them help, and the standards of care that patients have a right to expect.
- (7) Numerous public health risks are posed by the prison environment. For example, biohazard risks from unsanitary conditions; rats and vermin; and lack of adequate food.
- (8) Prolonged time in a cell is detrimental to patients’ mental health, and they would like more access to activities and courses to heighten their mental stimulation.

How it feels to be in family and carers’ shoes

In recounting their experiences with prison healthcare services, families and carers with loved ones in prison expressed a range of emotions. Some individuals felt personally supported and satisfied with their loved one’s care. However, most interviewees shared negative emotions and described distressing encounters with the prison and prison healthcare systems.

Families and carers most commonly reported feeling (1) **worried** about their loved ones’ wellbeing, (2) **frustrated** with their loved one’s level of care, (3) **angry** at inaction and inadequate treatment, (4) **powerless** to resolve any issues, and (5) **in the dark** about what was happening to their loved one on the inside. Feelings of anxiety, hopelessness, and despair were also common.

Families and carers reported feeling these ways for different reasons. Underneath feelings of anger, there was often fear and an acute sense that their loved one was in danger. Many families and carers reported that the level of attention and treatment their loved one received in prison was inadequate and did not reflect the quality of care they would receive in the community. Additionally, families and carers felt strongly that their loved ones endured inhumane living conditions and treatment while in prison. Some described how their loved ones were provoked or bullied by prison and/or healthcare team staff. Families and carers also reported that they themselves had experienced disrespectful and belittling treatment by prison and/or medical staff, who “treat us like criminals”.

The word cloud below represents the full range of emotions expressed by families and carers who have come into contact with prison healthcare systems:



HMP/YOI Feltham A & B Visiting Centre Interviews

Date of Visit	Interviewers	Break-down of Interviewees	Themes from Conversations
23/01/23 18/02/23 27/03/23	Amy P Miriam B Nick M	Total = 56 interviewees	1. Some families described that the prison healthcare team demonstrates proactive engagement regarding mental healthcare.

03/04/23		<ul style="list-style-type: none"> ▪ 29 had no experience with prison healthcare services ▪ 27 had experience with or info to share re prison healthcare services 	<p>2. Some families are satisfied with the level of communication between medical staff, patients, and their families. Prison healthcare teams deliver quick HIV and gonorrhoea test results.</p> <p>3. Families have reported good care in hospital and follow-up care after a medical procedure, including access to physio and pain medication.</p> <p>4. Families often feel there is poor communication between:</p> <ul style="list-style-type: none"> • Prison/medical staff and patients: repeated rescheduling of appointments, long waits for tests • Prison/medical staff and families: families receive no or incorrect information • Prison staff and medical staff: there are not enough guards on duty to take patients to appointments <p>5. Families often feel they are being kept in the dark when it comes to their loved one's care. They feel they do not know enough about the resources available to their loved one on the inside.</p> <p>6. Patients' pain is often ignored or not taken seriously by staff.</p> <p>7. Patients experience delays in getting treatment, medication, and dental care unless advocated for by a member of prison staff. Delays in getting treatment are especially common over the weekend.</p> <p>8. Patients and their families experience disrespectful treatment and a lack of empathy from medical staff. Patients likewise receive poor treatment by prison staff.</p> <p>9. Families find it very difficult to get involved in their loved one's healthcare after they turn eighteen.</p> <p>10. Patients with asthma have trouble accessing their medication. Extra asthma pumps are required for patients with severe cases. Families are providing support on the phone where medication unavailable.</p> <p>11. Patients are often provoked, teased, and/or picked on by officers, which can cause anxiety and lead to outbursts.</p> <p>12. There is a lack of awareness surrounding neurodiversity among staff. Families can help in keeping patients calm and highlighting small things that can help.</p> <p>13. Prolonged time in their cell is detrimental to patients' mental health.</p>
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Suggestions and Messages from Interviewees

- Patients should have easier access to professionals with whom they can have serious, frequent conversations about mental and physical health.
- “[Prison staff] may not be able to stop everything and bring a patient to a medical appointment, but they should recognise that serious medical issues need to be dealt with quickly”.
- Prison healthcare teams should be on the lookout for sickle cell anaemia, given the high proportion of black and mixed-race prisoners.
- “If prison staff had reacted quicker to [my son’s appendicitis symptoms], what was supposed to be a 20-minute operation wouldn’t have had to be a 4-hour operation.”
- “Medical staff have a duty to take care of these kids. The kids should be healthy physically and emotionally so that they can be rehabilitated. They need to be supported.”
- “If I could change anything about the [prison healthcare] system, I would want easier access.”
- Weekend care needs to move more quickly if there is an emergency.
- Patients’ families would like someone to do welfare checks on their loved ones and report directly back.
- Patients’ families want information about healthcare and dentistry services available to their loved ones on the inside.
- Healthcare teams should be consistent in distributing medication. They should not start and then stop treatment for a patient who takes medication.
- Prison staff have helped cater to patients on the autism spectrum by giving them verbal commands instead of touching them and letting one patient in particular take his mattress with him when he moved cells. However, prison staff would benefit from a heightened awareness of/better training in neurodiversity. This would give them better ways to manage patients on the autism spectrum to avoid outbursts.
- “Give the guys better food. Clean their environment. Make sure they get the food they need based on their religious needs.”
- “The officers are too much. They go on power trips and will end visiting sessions even though we are supposed to have more time.”

Our Key Take-Aways:

- Some families have had positive experiences with proactive mental healthcare, communication between medical staff and patients, in-hospital treatment, and follow-up care.
- Other times, communication breaks down between prison staff, medical staff, and patients’ families. Patients’ families often feel ignored and out of the loop.
- Patients often experience delays in getting appointments and receiving treatment and medication. Serious medical issues are only dealt with quickly when a member of staff raises the alarm on a patient’s behalf.

- Families report that patients’ symptoms are often not taken seriously by staff, and they are met with a lack of empathy.
- Patients and their families are not aware of all the healthcare resources available to them inside prison.
- Patients’ families sometimes feel racial biases play a part in the level of care their loved one receives (reported by both Black and white families).
- Sensitivity training and neurodiversity awareness training may help to improve dynamics between prison staff and patients.
- Prolonged amounts of time in the cell have detrimental effects on patients’ mental health.

HMP Pentonville Visiting Centre Interviews

Date of Visit	Interviewers	Break-down of Interviewees	Themes from Conversations
01/01/2314/03/2316/03/2314/03/23	Amy P Miriam B Nick M	Total = 48 interviewees <ul style="list-style-type: none"> ▪ 26 had no experience with prison healthcare services ▪ 22 had experience with or info to share re prison healthcare services 	<ol style="list-style-type: none"> 1. Patients’ symptoms are often not believed by staff. They are given Paracetamol for severe pain and/or are given pain medication after it is no longer needed. 2. Patients experience delays in getting treatment and/or an appointment with a healthcare or mental healthcare professional. Patients are often denied treatment when they ask for it. 3. Patients feel they must take drastic measures to be seen by a doctor or to have their pain be taken seriously. 4. When a patient rings the buzzer in their cell, no one comes to check up on them. 5. Patients find it difficult to get an appointment with an optician, a sufficient eye exam, and lenses with the right prescription. Apps for vision needs often get lost or go unanswered. 6. Some patients have had positive experiences with mental health services. 7. There is poor communication between prison staff and patients’ families. Families do not trust prison staff to communicate accurate information about the welfare of their loved one. Families are often denied access to information based on confidentiality issues.

			<p>8. Families would like to know if patients are offered regular health checks without specifically requesting an appointment. They often feel they don't have enough information on healthcare in prison.</p> <p>9. Families feel their insights could help patients struggling with mental health and addiction issues. Their understandings would help ensure patients receive the right treatment and medication.</p> <p>10. Families feel their loved ones are not given sufficient resources to succeed/avoid relapsing once released into the community. This includes substance misuse and mental health treatment while in custody and safe, clean housing accommodations once released.</p> <p>11. Prolonged time in a cell is detrimental to patients' mental health.</p> <p>12. Patients live in inhumane and unsanitary conditions which negatively impact their mental health. These conditions include being in the cell for up to 23 hours a day, run-down facilities, rats in the cells, power cuts, and not being allowed to shower for up to 5 days. Patients have also witnessed violence and suicides.</p> <p>13. Patients experience belittling and disrespectful treatment by staff. This includes bullying, lack of support, and poor handling of sensitive news when patient is faced with a family tragedy. Patients and their families also feel they receive discriminatory treatment due to their race and/or disabilities.</p>
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Suggestions and Messages from Interviewees
<ul style="list-style-type: none"> • Prison healthcare teams should deliver treatment more quickly. • "Prisons should make arrangements for opticians to give proper eye tests like on the outside. Why can't someone from the outside come in to help? And families should be given the [patient's] new prescriptions so they can help." • "Whenever [my brother] is in the community, it feels like he's been let down by the system... How do they expect a 28-year-old man with mental health issues to come out of prison and feel like he's worth anything when he's put into housing like that? He feels worthless and ends up back in prison as a result."

- “Whenever he is let back into the community, he relapses because he is not given the right resources or housing to succeed on the outside.”
- “[Prison staff] act as if communicating with prisoners is no one’s job, and no one will take responsibility for it... I understand that they’re [the patients] here to make up for the mistakes that they’ve made, but they are being treated like animals.”
- “The staff are there to protect [the patients] and to do their job, not to treat the prisoners badly.”
- “It’s really difficult because you’re already facing such stigma and judgment from the outside world. You already have to deal with the judgement [of having a loved one in prison] and justify yourself. That’s already hard. You shouldn’t have to feel that way with professionals [prison staff] as well...”
- “So many people don’t care and don’t want to help... I really hope that people [the patients] are listened to and that feelings are understood despite the fact that they’re prisoners here for punishment. They shouldn’t be treated inhumanely.”
- Prison staff should take grief and bereavement training.
- “[Patients] need better access to healthcare. Unless you’ve collapsed and you’re dying, [prison staff] are not interested.”
- Families want prison authorities to think about how being stuck in a small cell all day would impact their mental health and depression.
- “[Prisons] don’t actually give dental appointments.”
- “[Prison staff] need to put themselves in the prisoner’s situation when it comes to healthcare needs. [They are] providing a service to human beings. [They] should provide it just like they would to anyone else.”
- “They’re [the patients] already here to serve their punishment. They should not also be treated like animals.”

Our Key Take-Aways:

- Patients are often not believed, or the severity of their pain is underestimated. Patients and their families feel they must go to extremes to get medical attention while inside (e.g., writing to the King, going through their MP, and overdosing on drugs to get a doctor’s attention).
- Patients experience long delays in receiving medical attention and treatment. Patients and their families would like routine health and mental health checks. Delays have undermined faith that systems for care even exist.
- Patients would like to receive regular appointments and follow-up appointments with an optician. They would likewise like to receive their prescriptions in a timely manner.
- Communication between prison staff/medical teams, patients, and their families is lacking. Families and carers feel out of the loop and distrustful of prison staff.
- Sensitivity, grief and bereavement training would improve relationships between prison staff and patients.
- Families would like their loved ones to receive mental health and substance misuse treatment while in prison so that they are well equipped to live in the community once released. They feel this, in addition to clean, safe housing accommodations, will help prevent recidivism.

- Prolonged time in their cell and poor living conditions negatively impact patients' mental health.

HMP Brixton Visiting Centre Interviews

Date of Visit	Interviewers	Break-down of Interviewees	Themes from Conversations
16/02/23 07/03/23 09/03/23 04/04/23 17/04/23	Amy P Miriam B Nick M	Total = 40 interviewees <ul style="list-style-type: none"> • 19 had no experience with prison healthcare services • 21 had experience with or info to share re prison healthcare services 	<ol style="list-style-type: none"> 1. Some families reported having had positive experiences with prison healthcare. 2. There is a general lack of trust in the system among patients and their families. 3. Patients experience delays in receiving medication, receiving treatment, and getting an appointment with a medical professional. When they reach out to a member of the medical staff, they often get no response and/or delayed action. 4. Patients find it difficult to schedule follow-up appointments and think these should be conducted regularly after a medical issue is dealt with. 5. Patients' pain is often not believed or taken seriously by staff, in some instances leading to major deterioration in health. Patients' medical issues may not be taken seriously by staff until it reaches a life-or-death situation. 6. There is poor communication between staff, patients, and their families, even during medical emergencies. 7. There is a culture whereby staff commit violence against patients and cover it up. 8. There is a lack of resources for patients with severe mental health needs who need to learn to self-manage. Patients are also not aware of the mental health resources available to them and find it hard to get mental health support. 9. It is difficult to get enrolled in a course or activity, which means patients are often bored and their mental health suffers. 10. Patients and their families would like a stronger focus on/more access to rehabilitative resources, especially for sex offenders. 11. Prison staff should be educated on the needs of patients on the autism spectrum.

Suggestions and Messages from Interviewees

- “Prisoners should be taken seriously.”
- “Prisoners need to be treated with dignity.”
- “You’ve got to be dead before you get any help... It’s a running joke to [prison staff]. They laugh at us. It’s like they take it upon themselves to judge and give out more punishment. It makes it harder for [my loved one in prison] to be the best version of himself... I need to feel reassured that he’s in safe hands or I can’t rest.”
- “It’s not about rehabilitation anymore. It’s about punishment.”
- “They don’t listen. Once they put their uniform on, they think they’re something else. And they won’t listen. They’re very arrogant.”
- “Make sure that he’s being looked after and getting the correct medical help.”
- “Guards should be aware of prisoners with autism and their needs, so that people can speak to them about what they need and be understood.”
- “If they need mental health support, then doctors should see them. Once [a patient] is in here- for whatever reason- his mental health is turned upside down.”
- “Treatment programmes, support groups, and talking therapies are really important. It seems a wasted opportunity [not to have access to these].”; “If you want to rehabilitate people, you have to provide programmes for them. If you just want to punish people, let them know that.”
- “It’s particularly hard in regard to mental health. There’s nobody [for patients] to talk to. It’s like you’re trapped in your own mind. Obviously, it’s a prison, but being trapped in your own mind is the worst kind of punishment. There should be more activities, group therapies, and ways for people to build communities and lean on each other. And more outside time and activities outside in the sun would help with mental health. There should also be more courses for G wing. G wing aren’t offered the same amount of courses as other wings and it’s not fair. Being told they’re not able to do something [e.g., sign up for a course] is hard on their mental health.”
- “It’s meant to be a reformation prison and it doesn’t feel like it.”

Our Key Take-Aways:

- There are delays in receiving medication, with some patients waiting up to two months for their treatment.
- Patients’ pain and symptoms are often not believed by staff. As a result, they are only offered Paracetamol for severe pain and serious, life-threatening medical issues may go untreated until the last minute.
- During medical emergencies, patients’ families are not made aware of what is happening.
- Patients and their families would like to be treated with more respect by prison and medical staff.
- Patients and their families are unaware of the mental health resources available to them.

- Patients want to engage in reformative and rehabilitative activities, groups, and courses.
- If prison staff were educated on the special needs of patients on the autism spectrum, these patients would be better understood.

HMP Wormwood Scrubs Visiting Centre Interviews

Date of Visit	Interviewers	Break-down of Interviewees	Themes from Conversations
07/03/23 11/04/23 27/04/23	Amy P Miriam B	Total = 24 interviewees <ul style="list-style-type: none"> ▪ 8 had no experience with prison healthcare services ▪ 16 had experience with or info to share re prison healthcare services 	<ol style="list-style-type: none"> 1. Some families feel their loved one is being well taken care of. 2. Some families feel medical staff have been responsive to patients' mental health needs and pre-existing medical conditions. 3. Patients' pain is not taken seriously by prison and medical staff. Patients are given Paracetamol for severe pain. 4. Patients experience long delays (up to several months) in getting an appointment with a medical professional, treatment, and medical tests like ultrasounds and X-rays. Some patients are not treated for injuries in a timely manner when attacked by other patients. 5. Some patients struggle to access care for pre-existing conditions once they enter prison. This includes treatment for dental issues, pain management, ear infections, stomach ulcers, and heart conditions. Healthcare teams have been made aware of these issues. 6. There is poor communication between medical staff and patients. Patients often wait weeks to receive their test results. 7. When patients reach out to medical staff, they are not given the information they need. They often do not even get a response. 8. Patients and their families feel that their comments, concerns, and complaints to the healthcare team are ignored. They often do not receive responses when they reach out. Patients sometimes have to spend their limited time out of their cells chasing up healthcare-related matters. 9. Families who ring the prison to inform prison authorities that their loved one is in a vulnerable mental state would like to receive timely responses so that they know that they were heard.

			<p>10. Patients often express that when they press the buzzer in their cell, they are either ignored or must wait up to 45 minutes for a response. This is particularly problematic if a patient is self-harming or feeling suicidal.</p> <p>11. Patients with diabetes are given unhealthy and potentially dangerous food options, such as sugary food and carbs. They often have to purchase more appropriate food options themselves, but it can be difficult for them to prepare healthy meals.</p> <p>12. Patients are concerned they will face recriminations with the prison staff if they assert themselves and ask for better food options. They fear they will be accused of seeking special favours by other patients and will be put at risk of bullying.</p> <p>13. Families would like to know more about the resources available to them and their loved ones on the inside and how to get their voices heard.</p> <p>14. Patients would like to know more about the mental health resources available to them.</p> <p>15. Families feel there are not enough facilities and resources for patients struggling with their mental health, self-harming, and suicidal ideation.</p> <p>16. Families have been told by their loved ones that multiple suicides have occurred in HMP Wormwood Scrubs. They were told that, leading up to his suicide, one particular patient was repeatedly ringing his buzzer but was not answered.</p> <p>17. Families feel the induction process is not thorough enough. They feel patients enter prison without proper instruction or being told what to expect. They also feel prison healthcare teams do not review patients' medical records when they are inducted, and therefore do not know the mental health challenges of the newly arrived men.</p> <p>18. Families note that newly inducted patients must wait a long time to get their PIN sorted and to be able to book visits. This negatively impacts their mental health and can contribute to self-harming behaviours.</p> <p>19. Families have been told by their loved ones that HMP Wormwood Scrubs recently ran out of water for a period of time.</p>
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<p>Suggestions and Messages from Interviewees</p>
<ul style="list-style-type: none"> Families would like to be able to contact prison authorities more efficiently to share medical background information on behalf of patients.

- “My partner could do with anger management, bereavement work, and drug and alcohol counselling, but he’s been told it’s a three month wait.”
- “When visiting, no canteens are open and it’s nice when you can sit and have a cup of tea with [the patients]. To sit and have a cup of tea with my son would be lovely.”
- “Usually if you have any problems in prison, you’re not getting seen to. And with mental health, [staff] don’t know how to deal with it. They just lock you in your cell. To see a dentist is impossible. You’ll leave prison before you see a dentist.”
- “It shouldn’t have to take five or six complaints to get medical attention. Treat people how you want to be treated. Just because they’re in prison doesn’t mean they’re any less of a human.”
- “He feels like he’s speaking to no one. Is there a forum where prisoners can have their voice heard? There are no ways for him to feed back, and there needs to be something where they can share their thoughts and be taken seriously.”
- “You’re treated as a number when you’re already down.”
- “I understand that prison staff are overworked, but not everyone in there is guilty. An innocent person could be suffering in there and, on top of that, they have no one to listen to them. I think they [prison staff] need to listen. Sometimes all it takes is a conversation because not everyone in there has someone to listen to them... No one really pays attention to them as individuals- they’re just numbers.”
- “Everything is a nightmare. You can’t do anything. They [prison staff] don’t speak to you when you call up. They tell you the prisoner has to [call about a medical issue themselves]. The communication is shocking... They just tell you to write a letter to the governor. How do I know that it’s actually going to get to them?”
- “Listen more to the prisoners. [Staff] ignore them and forget that they’re people too- people’s sons. They don’t get heard. For example, whenever he presses the buzzer in his cell, it takes half an hour for someone to come. It’s frustrating because he’s trying to work with them but they’re not helping him at all.”
- “Self-harm is a massive thing here. If there is a crisis, it needs to be dealt with immediately. They [the patients] just be left. As soon as the bell is rung! It’s people’s lives.”
- “There are no support groups here whatsoever. [My grandson] gets his medication every day, but that’s about it. The chaplaincy is the only thing that offers help... There needs to be more support. You need to feel like you’re human.”
- “The staff need to listen to the families.”
- “How many people have to end up in body bags before something changes?”

Our Key Take-Aways:

- Families commonly express that their loved ones’ pain is not taken seriously by prison healthcare teams.
- Patients experience long delays when it comes to getting an appointment with a healthcare professional and in getting medical test results.

- Communication between medical staff and patients is lacking. Medical staff do not deliver test results in a timely manner. Patients and their families often feel unheard.
- Patients with diabetes struggle to find safe and healthy meal options.
- Patients and their families would like to know more about the healthcare and mental healthcare resources available to them.
- Patients and their families would like to be treated with respect and dignity.
- A more thorough induction process would help patients to adjust to prison routines and expectations.
- There is a pattern of self-harm among patients. They need mental health support.

HMP Belmarsh Visiting Centre Interviews

Date of Visit	Interviewers	Break-down of Interviewees	Themes from Conversations
14/01/23 18/04/23	Amy P Miriam B	Total = 23 interviewees <ul style="list-style-type: none"> ▪ 5 had no experience with prison healthcare services ▪ 18 had experience with or info to share re prison healthcare services 	<ol style="list-style-type: none"> 1. There is often poor communication between prison staff, patients’ families, and patients. Other times, patients’ families are satisfied with the level of communication they receive. 2. Patients’ pain is often not believed or taken seriously by prison staff. To that end, patients are given ineffective treatment, such as low-grade pain killers for serious pain. 3. Patients experience delays in getting treatment and/or an appointment with a medical professional. 4. Prescriptions, such as eczema cream, are not always available to patients. Patients struggle to get eczema cream through the healthcare team, and it is not available for purchase at the canteen. 5. Prison healthcare teams often do not consult a patients’ previous medical files when conducting examinations. 6. Patients experience physical abuse, neglect, unjust treatment, and the loss of privileges from prison staff. 7. Patients experience discriminatory treatment based on protected characteristics, such as race and religious affiliation. During Ramadan, it is not easy for patients to break their fast at the right times because it is out of sync with the prison’s schedule. This undermines physical health and mental wellbeing.

			8. After undergoing operations, patients with open wounds have been made to recover in unsanitary conditions.
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Suggestions and Messages from Interviewees			
<ul style="list-style-type: none"> • Mental health services should conduct proactive welfare checks on patients. • Patients should be made aware of the mental health resources and potential care pathways available to them beyond medication. • There should be a system in place so that those with serious conditions, such as a heart condition, always receive their life-saving medication on time. • Medical staff should take note of prior medical information before meeting with a patient so that they can have care plans in place in advance. • There should be more activities to keep prisoners occupied and help them with their mental health. • There needs to be a greater focus on duty of care among the prison staff. 			

Our Key Take-Aways:

- Patients’ families have had mixed experiences with prison staff and healthcare teams in terms of communication and timely treatment. Some are satisfied and some are dissatisfied.
- Delays in medical treatment and not being taken seriously by medical staff are particularly widely reported issues among patients and their families.
- When patients enter and/or are transferred to HMP Belmarsh, their medical files are often lost. This means healthcare teams are uninformed about patients’ medical histories.
- Patients often experience inhumane treatment by staff and have been made to recover from medical procedures in unsafe environments.
- Patients would benefit from proactive welfare checks and being made aware of the mental health resources available to them.

HMP Wandsworth Visiting Centre Interviews

Date of Visit	Interviewers	Break-down of Interviewees	Themes from Conversations
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28/02/23 02/03/23	Amy P Miriam B	<p>Total = 21 interviewees</p> <ul style="list-style-type: none"> ▪ 13 had no experience with prison healthcare services ▪ 8 had experience with or info to share re prison healthcare services 	<ol style="list-style-type: none"> 1. Patients experience delays in getting medical, dental, and psychiatric appointments. They also struggle to get medication for mental health needs. 2. Patients are not given sufficient pain relief medication or ointments for severe pain. 3. If patients are given pain relief medication, it is potentially addicting, and they are on it for weeks while waiting to see a medical professional. 4. When patients ring the buzzer in their cells, they are ignored, and no one comes to check up on them. 5. Patients and their families are treated poorly by prison and medical staff. They feel they are met with inhumanity and inequality. 6. Some white families have felt discriminated against by Black prison officers due to their race. 7. There is poor communication between prison/medical staff and patients regarding waiting times to see a medical professional. 8. There is poor communication between prison/medical staff and legal representatives. Legal advisors struggle to access patients' medical notes. 9. There is poor communication between prison staff and patients' families. Families are often ignored and treated rudely. 10. Patients experience unsanitary and/or inhumane living conditions, including rats in their cells, freezing cold temperatures, and not being able to shower for up to 10 days. 11. Patients are at risk of gang violence within prison. They are too scared to exercise, and their mental health is deteriorating as a result. Violent incidents include attacks, fighting, making knives out of plastic spoons, and throwing boiling water on each other. 12. Patients with learning disabilities are vulnerable and need support. They often have food stolen from them, are unable to use the kiosks on their own, and can't remember appointments.
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Suggestions and Messages from Interviewees

- "At the end of the day, [the prison] needs to take consideration of the healthcare they are providing and not just put people on painkillers. Because painkillers can be addicting."
- "[The prison] should have more support in place for people with disabilities. [They] need to respect their human rights."

- “Because of the violence [at HMP Wandsworth], I sleep with one eye open. Always- when the phone rings- I think it will be because my son has died.”

Our Key Take-Aways:

- Patients experience delays in getting medical, dental, and psychiatric appointments. Patients and their families often find it difficult to get mental health treatment, medical treatment and pain relief medications.
- Patients are ignored by prison staff when they ring the buzzer inside their cell.
- There is poor communication between prison/medical staff, patients, their families, and their legal representation.
- Prisoners and their families are mistreated by prison and medical staff.
- Gang violence and attacks within prison negatively impact patients physical and mental health.
- Patients with learning disabilities need support in navigating daily (and health-related) processes.

HMP/YOI Isis Visiting Centre Interviews

Date of Visit	Interviewers	Break-down of Interviewees	Themes from Conversations
24/01/23 22/02/23 12/04/23	Amy P Miriam B	Total = 11 interviewees <ul style="list-style-type: none"> ▪ 4 had no experience with prison healthcare services ▪ 7 had experience with or info to share re prison healthcare services 	<ol style="list-style-type: none"> 1. Families feel unsure whether their loved ones’ medical records are transferred from previous prisons. They feel case histories are not being taken under consideration, and continuity of care is lacking. 2. Families feel unfair punishment of patients undermine their mental health. There is a perceived lack of empathy toward patients from prison staff. 3. Patients’ health issues are not taken seriously by staff. Patients are not given sufficient pain relief, such as paracetamol for serious pain. 4. Patients must wait a long time to get a dental appointment, even for urgent issues. 5. Prison healthcare teams do not take patients’ knowledge or understanding of their own health issues under advisement. As a result, the wrong medication is administered. 6. There is poor communication between prison staff and patients’ families during a crisis. 7. There is a lack of follow-up from substance misuse treatment services.

			8. Family members are unsure how they can get their voices heard and how their loved ones in prison can get their voices heard.
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Suggestions and Messages from Interviewees			
<ul style="list-style-type: none"> • “Prison staff should put themselves in prisoners’ shoes to try and understand where they are coming from.” • “Prison staff and medical teams need to make more time for prisoners and take their issues seriously.” • “He’s not getting the help he needs... He’s in a bad way, and it’s quite concerning.” • “It’s horrible when he’s been smoking [spice]... It’s quite concerning because it’s really bad for your health. And he’s got mental health issues, on top of that. He’s been diagnosed with PTSD before he came to this prison. I’ve noticed a change in his behaviour with paranoia since he started smoking it. And it’s upsetting to see because he’s still got a long time to be here... It’s worrying and upsetting that he’s not getting the help he needs.” 			

Our Key Take-Aways:

- Families and carers are concerned that medical information is not transferred from one prison to the next and that continuity of care is lacking as a consequence.
- There is a perceived lack of empathy across prison staff. Patients’ families feel their loved ones are unfairly punished and not taken seriously, which negatively impacts both their health and mental health.
- Patients experience delays in getting medical and dental appointments. During appointments, their own understanding of their health issue is often ignored.
- Communication between prison staff and patients’ families should be prioritised during a crisis.
- Patients undergoing treatment for substance misuse require more frequent follow-up appointments.
- Patients and their families would like to know more about how they can get their voices heard by prison staff and healthcare teams.

HMP Thameside Visiting Centre Interviews

Date of Visit	Interviewers	Break-down of Interviewees	Themes from Conversations
20/04/23	Miriam B	Total = 4 interviewees <ul style="list-style-type: none"> ▪ 1 had no experience with prison healthcare services ▪ 3 had experience with or info to share re prison healthcare services 	<ol style="list-style-type: none"> 1. Patients experience delays in getting treatment and medication. 2. Some families have had positive experiences getting dental appointments when needed. 2. Patients and their families have expressed a need for sessions with a psychologist. 3. Patients and their families feel that health issues are not being dealt with properly. They would like patients to get more individual attention. 4. Patients' pain is often underestimated. They are given paracetamol for severe pain. 5. Patients have expressed that the quality of the food is poor and that there are few clean, healthy options. They often complain of stomach aches.

Suggestions and Messages from Interviewees
<ul style="list-style-type: none"> • “The healthcare experience has been 50-50. If someone gets ill- because there are so many [patients]- it takes them so long to see the healthcare team... Maybe employ more health care team members to be able to help.” • “Health checks are important and should be prioritised. As much as [the patients] may be in there for doing the wrong things, their health still needs to be looked after.” • “Employ more people to be able to look after all these prisoners... [The healthcare team] should be providing more than just paracetamol. [The patients] need to be looked at [when they complain about an issue] because it could be something serious going on.” • “[The health team] don't look after them properly. They just give them paracetamol.” • “Listen more. Do things with [the patients] more. Have them see therapists and psychologists. Especially, because if something goes wrong, there's a lockdown and that's not fair. Only the people who start things up should have to go into lockdown, not everyone else.”

Our Key Take-Aways:

- Patients experience delays in getting physical and mental health treatment.
- Patients would benefit from regular mental health checks and services.
- Patients would like more individualised care and for their pain to be believed by medical staff.
- Patients would benefit from healthier food options during meals.