

Prison's opiate reduction regime 'endangered lives'

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A prison's attempt to reduce high levels of opiate prescribing resulted in an "unsafe" drug treatment regime which led to inmates being put on suicide watch and others at risk of overdose, a report by the prisons watchdog has revealed.

The findings by HM Inspectorate of Prisons into events last year at HMP Wayland, a category C jail in Norfolk, will send a stark warning to Britain's prison estate of the problems associated with weaning inmates off heroin substitutes too abruptly.

A comprehensive opiate dose reduction programme was introduced at HMP Wayland in May after public services firm Serco took over the running of healthcare at the Norfolk jail and three other Norfolk jails in a contract worth £24m last year.

But an unannounced visit and investigation by prison inspectors found the regime was introduced too quickly and care plans ignored, with some patients experiencing swift and substantial drops in dosing levels. Despite this, many prisoners told inspectors their requests for symptomatic relief medication, such as tranquillisers, had been disregarded – a policy inspectors said created "psychological, sociological and ethical risks".

As a result of the new regime, involving more than 100 prisoners on the jail's integrated drug treatment system (IDTS), inspectors said inmates became frustrated and anxious. Prisoners were abusive and threatening to clinical staff and the needs of dual diagnosis patients were not met. Four inmates were put on suicide watch. Prisoners were topping up their reduced methadone doses with illicit drugs bought inside jail, resulting in an increased risk of overdose.

The report said: "The change has been introduced suddenly with little consultation or communication with prisoners or relevant professional staff. In some cases previously agreed care plans and case review conclusions appeared to have been disregarded."

When inspectors visited the jail in June, only two out of four specialist IDTS

nursing posts were filled, 13-week reviews were frequently cancelled, there was no co-facilitation of group work with CARAT workers and individual prisoners received inadequate support.

The report said that clinical staff made repeated references to the treatment contract and budget, citing the need to save money as being the driving force behind the problems of the new regime.

CARAT workers told inspectors that concerns over the methadone reduction regime had been ignored by clinical staff. Wayland's drug treatment regime, "had the combined effect of rendering the IDTS programme unsafe and increasing the level of risk in regard to self-harm, suicide and overdose", the report said. Chief Inspector of Prisons Nick Hardwick said Wayland's opiate dose reduction programme was "very poorly implemented, caused significant disruption to the prison and risk to individual prisoners".

The prison's drug treatment programme was criticised in a second damning report, published by the Independent Monitoring Board. It blamed Serco's "complete management failure" and raised a number of concerns around staffing levels, budget cuts, bullying and the "deterioration" of healthcare services.

The report said: "The complete management failure of Serco within healthcare and the IDTS programme has greatly affected many regimes in the prison. Recently, the IDTS programme was found to be clinically unsafe. The board fully recognises the hard work and dedication of staff, but they are put under extreme pressure because of staff shortages and morale continues to be very low."

Both the Ministry of Justice and Serco, which has contracts to run public services including health, nuclear power, tagging, education, transport, science and defence, denied claims that budget constraints were to blame for the problematic drug treatment regime at Wayland. Since the inspection, Serco has added increased "flexibility" to its system, which has now been approved by the National Treatment Agency.

METHADONE IN JAIL: A GROWING CONTROVERSY

Prisons have come under increasing pressure to re-assess their methadone treatment programmes following accusations from some think tanks and politicians that prisoners are being 'parked' on methadone and that the opiate substitute is being used as an informal, expensive 'chemical cosh'. In March the NTA issued new guidance that emphasised that prisoners do not remain on open-ended maintenance regimes when detox or gradual dose reduction would be more appropriate.

But drug treatment in prisons is a policy the Ministry of Justice knows it must handle with care. A spate of suicides of young women in Styal Prison in the 2000s was blamed on inadequate drug treatment which effectively forced some inmates to go 'cold turkey' in their cells.

In the last five years the government has paid out £3.5m to prisoners for failings in treating addiction in prison. In 2006 the Labour government paid out £750,000 in compensation and £700,000 in costs to 197 inmates who claimed they had been forced to go "cold turkey" while in prison. *Druglink* revealed that legal advice given to the then Prisons Minister Gerry Sutcliffe, and obtained by this magazine, said the Prison Service's "appalling" record of clinical negligence had left the government little option but to settle out of court.

Earlier this year the government agreed to pay more than £2m in compensation and costs to settle claims by 499 former and current prisoners who said they suffered from systematic failure by the Prison Service to ensure they received acceptable standards of treatment for their addiction.