

### **3.12 Deputy S.Y. Mézec of the Minister for Home Affairs regarding the handling of offenders with mental illness and drug dependency:**

What steps, if any, is the Minister taking in co-operation with his Ministerial colleagues to divert more of the less serious offenders with mental illness and drug dependency into treatment rather than prison?

#### **Senator B.I. Le Marquand (The Minister for Home Affairs):**

Presently through Home Affairs and through the Building a Safer Society strategy, the Health and Social Services Department Alcohol and Drug Service provide an arrest referral worker, working directly with the police, to identify and support people who have been arrested, who have been identified with either alcohol or drug misuse issues with a view to establishing early intervention with an appropriate therapeutic service. After that, it is really issues which relate to decisions made by a prosecutor or decisions made by a court. When a prosecutor is considering whether charges should be brought the prosecutor will consider whether, in the light of mental illness, it is in the public interest to bring charges. A court which is sentencing an individual should obtain background reports on the offender prior to sentencing to imprisonment and these may include psychological and/or psychiatric reports. They may also include assessments as to suitability for a treatment order in relation to a drug or alcohol addiction.

#### **3.12.1 Deputy S.Y. Mézec:**

Does the Minister agree that Jersey has a very poor track record of helping Islanders with mental health issues and does he agree that there is much more the Government, including his department, could be doing to help these people rather than punish them and their families?

#### **Senator B.I. Le Marquand:**

I think there are issues in relation to people with mental health in Jersey. One of the most difficult issues - which is once again highlighted in the recent excellent Scrutiny Report - is the lack of secure accommodation. This acts in 2 different ways. Firstly, it means that if a person who is mentally ill is taken to a place of safety, because of their mental illness, and for their protection, the police have powers to do this. In practice they are normally taken to a police cell, which is not ideal and of course that has been highlighted in relation to children, but applies also in relation to adults. Similarly, on sentencing the lack of secure accommodation for people who are mentally ill does lead to situations sometimes where people are sentenced to imprisonment and whereas it might be if there were other more secure options available the court might take a different route. Having said that, I am well aware of the difficulties faced by the Minister for Health and Social Services in this area, the costs of running such a secure unit and the difficulties because of the smallness of scale means you can only have one type with one level of security, whereas of course in the U.K. (United Kingdom) or elsewhere with larger catchment areas there is a whole variety of secure units. So there is an issue. There is an ongoing problem but my colleague has found that difficult to solve.

#### **3.12.2 Deputy M.R. Higgins:**

Following on from the Minister's answer, because the issue of mental health and offenders and prison, and the lack of facilities, has been going on for at least 8 years. In fact I think as long as I have been in the States. I know the Judiciary have mentioned on numerous occasions the failure of the Mental Health Law or the inadequacy of provision, that they are having to send someone to jail because there is nothing else, can the Minister tell us what he and his colleagues in the Council of Ministers have been doing, certainly in the last 3 years,

and he was on the previous one, what they have done to try to alleviate this problem, and if not, if they have not tried to do anything what are they going to do about it now?

**Senator B.I. Le Marquand:**

The issues that I have described have been going on for much longer than that because my predecessor, as Magistrate, had a particular concern which he voiced on numerous occasions. I have had a number of meetings over the years with counterparts in Health to try to alleviate the situation in relation, particularly, to areas where people who are in prison become mentally ill and that mental illness persists. I have to say I think some improvements have been made here in relation to speeding-up assessment times in order to transfer such people to the U.K. where they can stay in a mental hospital during the duration. But it is a difficult problem. I have sought to press my colleague to make this a higher priority. I hope that the pressure now coming in in relation to the young people will demonstrate why it is essential to have such a secure facility. Having said, that, a secure facility is not going to solve all the problems because frankly sometimes people who are mentally ill also represent a serious danger to the public who will continue to commit offences and have to go into the criminal justice system for that reason.

**3.12.3 Deputy R.G. Le Hérissier:**

Could the Minister tell us that with the benefit of professional judgment how many people does he think are in the prison who would be better in mental health facilities?

**Senator B.I. Le Marquand:**

There are always some, I suppose is the answer, but that number will vary. There are different categories in this. There is the category I referred to before, which have serious and repetitive mental issues. Although they can be transferred short term to receive treatment in a hospital it is a recurring pattern. There are also a certain number of people who are frankly inadequate in a variety of different ways and part of their inadequacy relates either to alcoholic abuse or mental illness, and who get shuffled between agencies and spend some of their time in a prison. The system has changed over the years. I can remember the days when such people would have been long-term patients in a mental hospital but the whole concept of care in the community and so on has led to a more risk-taking, if I can say, approach, which does work and enhance the life of many.

**3.12.4 Deputy S.Y. Mézec:**

I think it is quite apparent that the issues we have with mental health in Jersey require absolute urgent attention, so could I ask the Minister if he has any plans to do anything before the end of his term to perhaps maybe secure extra funding for something that could help that or bring forward proposals to change the policy so something can be done for these Islanders who are being failed?

**Senator B.I. Le Marquand:**

Of course I am a member both of the Children's Policy Group and the Adult Policy Group and via my membership on those I will seek to raise these issues. I think that these issues need to be looked at quite seriously, not just by one department, i.e. Health and Social Services, but across the board because of the cross-border aspects of them.