

Within our Central Mersey programme we screen at two prison's, Risley and Thorn Cross:-

**Risley** is a category C prison, this is for those who can not be trusted in an open prison environment and are likely to escape. However they are low risk to the public, the Central Mersey DESP screens at Risley every 3 months and even though there is a high rate of retinopathy found the Central Mersey DESP often do not see the same patients due to movement within the prison system, release dates and refusal to be seen.

Working in this prison the Central Mersey DESP found prisoners are not told what they are coming to the medical unit for, so some refuse to come with the guard, others come unprepared so no correction for VA's and some are just hoping to be seen by another service i.e the mental health team, bloods or GP, as these services are not always readily available.

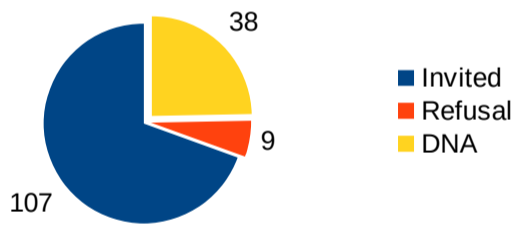
The Central Mersey DESP also see patients who where under the eye hospital before entering prison and have been moved around the prison system so is lost on the health pathway's and when they are screened. They then need urgent referrals and the vision is starting to be effected, this can be really difficult to refer as the patient may be due for release and move out of area, they may have to move prisons or the letter may get lost within the system so the patient isn't given the time or chance to go to hospital as this needs preparation from the prison.

**Thorn Cross** is a Category D prison and this is a open prison for those who can be reasonably trusted not to escape and pose no known threat to the public. Again these are low risk to the public and this prison is within a small village with lots of local amenities and housing estates so not as rural as Risley, because of these amenities some patients have the freedom to choose to go to the local optician so figures are not representative of all patient numbers screened at Thorn cross.

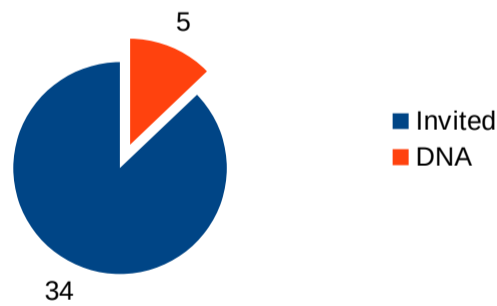
As with Risley the patients are not always told about the screening until the day of, however the health staff within the medical unit are always aware of where the patients are when they present us with a list. They will always advise us first thing about who is likely to attend. At Thorn cross the Central Mersey DESP do get less refusals to attend they mostly have work commitments so aren't at the prison or have already been released, or have been screened at the opticians, as there is no local programme to the prison we are not able to get data from the opticians.



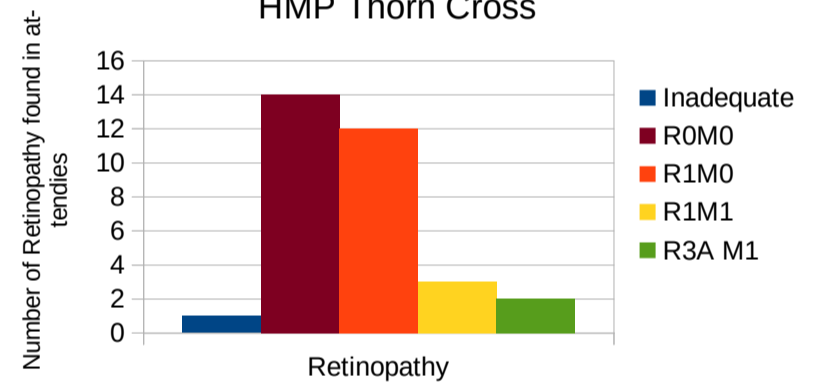
Clinic uptake Jan 2020 - Jan 2022  
HMP Risley



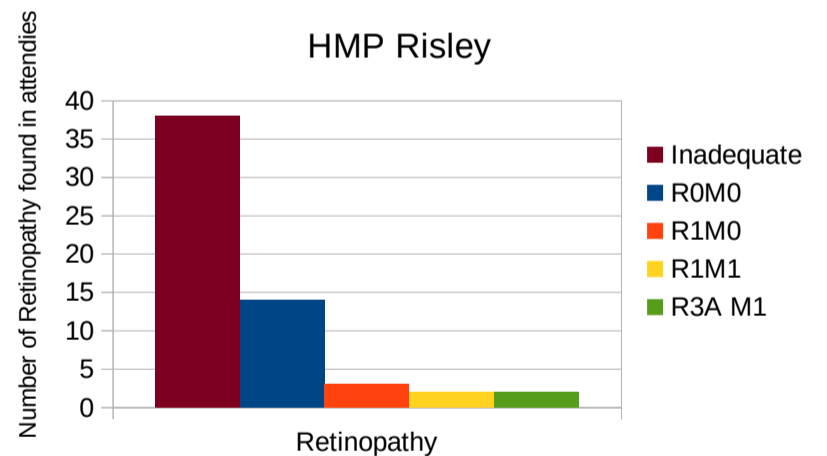
Clinic uptake Jan 2020 - Jan 2022  
HMP Thorn Cross



HMP Thorn Cross



HMP Risley



\*The data collected was between January 2020 – January 2022 within this period the global covid 19 pandemic caused less screenings and no visits where allowed within the prisons.

There are a lot of inequalities within the prison system, however the health inequalities could be:

**Mental health issues** – The common mental health issues like depression (seen in 10% of the UK population) and anxiety are regularly seen in prison, but not always treated as quickly or effectively as they would be in the general population, also personality disorders which is much higher within the prison population as is psychotic. Depression affects 42% of male and female inmates in the UK. What the Central Mersey DESP could do to help to reduce inequality is making sure the Central Mersey DESP treat everyone with respect and understanding, speaking with the prison if we have any worries after screening and make sure we voice concerns just in case they have not been picked up and the inmate has not come forward with concerns.

**Disabilities** – Learning, autism and ADHD, also brain injuries are common within the prison population and some might not strictly meet criteria for additional help and support. Some may only get diagnosed within prison so may just be learning about there disability and may not know what help they could get. What the Central Mersey DESP do to help reduce the inequality is making sure we explain why we are seeing them and talking through what they can expect from a screening and there future screenings within the prison system and outside so they understand there rights as a patient. We can also take our time with the VA testing and use alternative charts so they are still getting a full screening.

**Age** – People in there 30's take up 30% of the prison population, forties 18%, mid 20's 18%, but over the last decade the over 50's population has risen within the UK prisons and is now 16% but continues to rise.

**Death** – The average age of death within the prison population in England is 56, the mortality rate in prisoners is 50% higher than the general population.

We have also seen inequalities with prisoners not getting screened due to covid, this has been when some wings are on lock down due to an outbreak of covid and the whole wing can not leave for any reason, this happened twice and the same wing was locked down during our last 2 visits.