

## **Oral Question – House of Lords – Wednesday 1<sup>st</sup> March 2023 – Lord Moylan - New action plan for prisoners serving an indeterminate Imprisonment for Public Protection (IPP) Sentence.**

### **Background:**

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This is briefing in advance of an oral question in the House of Lords tabled by Lord Moylan (Conservative) regarding the issue of prisoners serving indeterminate prison sentences under an Imprisonment for Public Protection (IPP).

*Lord Moylan to ask His Majesty's Government what progress they have made in developing a new action plan for prisoners serving an indeterminate Imprisonment for Public Protection (IPP) sentence.<sup>1</sup>*

The Commons Justice Select Committee report published in September 2022 highlighted that, 'people are in prison serving indeterminate sentences for public protection, even though IPP sentences were abolished nearly 10 years ago. Some 96% of those prisoners have completed their mandatory period in prison (known as their "tariff") and do not know when they will be released.'<sup>2</sup> On 9<sup>th</sup> February 2023 the Ministry of Justice responded to the report by the Select Committee, which included a reference a review to the Government's Action Plan for people, serving IPP sentences.<sup>3</sup>

### **Key points:**

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- People still under IPP sentences – reportedly nearly 3,000 people - need urgent and effective government action to resolve their unsatisfactory and potentially dangerous situation.
- We are encouraged by the extent of the recommendations in the Justice Select Committee report, but urge against any solution that would merely allow release without provision of individually needs-assessed support.
- We strongly encourage the Government to support the recommendation for setting up a small expert committee to advise on solutions and urge that this should include mental health experts, given the extent of the psychological problems already acknowledged among those still imprisoned under IPPs.
- Mental Health services in prison are not equipped to manage the complexities of many of those subject to IPP in prison and additional resource and development of expertise is needed.
- The Ministry of Justice and His Majesty's Prison and Probation Service have started to review the current IPP Action Plan and we welcome this move and urge that the psychological impact of serving an indeterminate prison

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<sup>1</sup> [Normal Oral Question - House of Lords Business - UK Parliament](#)

<sup>2</sup> [Imprisonment for Public Protection \(IPP\) sentences - Committees - UK Parliament](#)

<sup>3</sup> [IPP sentences: Government and Parole Board Responses to the Committee's Third Report - Justice Committee \(parliament.uk\)](#)

sentence, on an individual's Mental Health is fully recognised as a factor in their deterioration.

### **About the Royal College of Psychiatrists:**

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The Royal College of Psychiatrists is the professional medical body responsible for supporting psychiatrists throughout their careers from training through to retirement, and in setting and raising standards of psychiatry in the United Kingdom. We work to secure the best outcomes for people with mental illness, intellectual disabilities and developmental disorders by promoting excellent mental health services, training outstanding psychiatrists, promoting quality and research, setting standards and being the voice of psychiatry.<sup>4</sup>

### **Response from The Faculty of Forensic Psychiatry to the Justice Committee's report, 11<sup>th</sup> November 2022:**

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The report, published 28 September 2022, is welcomed by the Faculty.

We note the evidence of the profound and lasting impact the IPP sentence on the psychological well-being of prisoners sentenced in this way and on their loved ones with over a quarter of the 250 people who have died since the sentence was imposed having died by suicide. Further, self-harm rates are nearly twice those of other prisoners and very much higher than in the wider community.

We commend the candour of Lord Blunkett, of the government introducing these sentences, in accepting their failure, in a House of Lords debate on the Police, Crime, Sentencing and Courts Bill on 15 November 2021:

*"I got it wrong. The Government now have the chance to get it right."*

The abolition of the IPP sentence in 2012 improved justice for subsequent offenders, but not for those people already sentenced in this way. It is possible that, in addition to the problems they brought into prison and the exceptional hardship of knowing that a sentence will never end, they have been further stressed by an injustice acknowledged for others but not for them. Some have never had an opportunity to return to their families if they have them, those who have returned remain liable to recall, and recall occurs more often than not for reasons other than the person committing a further crime. Between 2010 and 2021, 24% of the 7,852 recall incidents were for people who faced further charges.

Just under 3,000 of these men and women are currently in prison, of whom nearly all are post-tariff, some more than ten times over. A sizeable number are also in hospital in order that they can receive medical treatment. In 2019, there were 276 IPP-sentenced men and women in secure hospitals.

The Faculty welcomes the Committee's acknowledgement that people still under IPP sentences need urgent and effective government action to resolve their unsatisfactory and potentially dangerous situation. We suggest that a first important step would be for this to be conveyed in writing to all under such

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<sup>4</sup> [About us | Royal College of Psychiatrists \(rcpsych.ac.uk\)](https://www.rcpsych.ac.uk)

sentences and the prison authorities. Prison governors should be encouraged to speak to any such people in their prison to make sure they are aware of this acknowledgement.

We are encouraged by the extent of the recommendations in this report, but urge against any solution that would merely allow release without provision of individually needs-assessed support.

We strongly support the recommendation for setting up a small expert committee to advise on solutions and urge that this should include mental health experts, given the extent of the psychological problems already acknowledged among those still imprisoned under IPPs.

We also urge that new resources be made available to support the work of this committee and, in particular, for expert probation-health partnerships to facilitate the safe progress of the men and women under IPPs. Mental Health services in prison are not equipped to manage the complexities of many of those subject to IPP in prison and additional resource and development of expertise is needed.

The RCPsych Forensic Psychiatry Faculty is committed to doing what we can to help this process. As a first step, we have organised a plenary debate at our Annual Conference in March 2023, through which we will reach at least 500 psychiatrists with special expertise of working alongside criminal justice organisations to raise awareness of particular need and collate practical responses.

### **IPP Case Study:**

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The Faculty of Forensic Psychiatry at the Royal College of Psychiatrists is aware of an individual – please note certain details have been anonymised and/or altered to protect their identity – who was sentenced to one year in youth custody in 2004 at age of 16 year for a street robbery of a mobile phone from another youth.

Aged 17 years the individual was then convicted of another street robbery of a pair of trainers, and was given an IPP sentence with a tariff of one year in 2006. The individual concerned remained in prison for the next 10 years and during this period their Mental Health deteriorated severely, and self-harm was a strong feature of their behaviour. In the eyes of the Parole Board this meant the individual concerned remained mentally unstable and so the level of risks for his release remained. During the period the individual was in prison both his mother and grandmother – his only immediate family - sadly died in the community.

As a consequence the individual's Mental Health deteriorated to a such an extent that a few years ago they were transferred to a secure NHS psychiatric hospital for a few months. They were then subsequently returned to the prison estate after their Mental Health improved.

However, the cycle of their Mental Health deteriorated again, which manifested itself with severe self-harm and Psychosis, and five years ago they were transferred back to a Psychiatric hospital from prison. His self-harm involved

stabbing himself causing lasting damage to his bowels and bladder, and he continues to suffer with incontinence to the present day.

The individual concerns currently remains in a secure hospital, where his Mental Health has improved considerably. So much so that the Ministry of justice has granted the individual escorted leave to support the process of reacclimatising him back into the community.

He is currently waiting for a Mental Health Tribunal and parole hearing some 15 years *after* his tariff ended in detention. The individual concerned had high hopes following the recommendations made in the recent Justice Select Committee report on this issue.

He does not know when he will be released, if at all.

### **Further Information:**

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Another tragic example of an individual who 'lost hope' while on an IPP sentence is Tommy Nicol.

[Inquest concludes into death of Tommy Nicol who 'lost hope' on IPP sentence | Inquest](#)

[UK government pays out to family of IPP prisoner who killed himself | Sentencing | The Guardian](#)

### **Suggested Supplementary Questions:**

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- What reassurances can the Minister provide that the Ministry of Justice will proactively lead on the process of communicating any updates to individuals on IPP sentences, so that people are not left in the on-going uncertainty caused by a lack of information about their own individual predicaments?
- What reassurances can the Minister provide that individuals on an IPP sentence will be able to have their circumstances properly reviewed by the Parole Board at the earliest opportunity; and that such cases will be fast-tracked for consideration in light of the on-going psychological and Mental Health impact caused by the complete lack of a hope many individuals find themselves in, with no prospect of a solution in sight?
- What reassurances can the Minister provide that the Government will prioritise targeted resources, so that appropriate and on-going support will be provided in the community - as part of the process of transition from Prison/Secure Mental Health Units; and that the current lack of appropriate community provision, will not be used as a rationale to keep people detained longer than is absolutely necessary?

### **Mental Health Watch:**

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You can find out more how services are performing using [Mental Health Watch](#). Produced by the Royal College of Psychiatrists, Mental Health Watch is a resource that provides an overview of the performance of mental health services, drawing

on 24 key indicators. You can view and compare these data at a local, regional, and national level in one, easy-to-use platform.

## **Choose Psychiatry:**

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[Choose Psychiatry](#) is a yearly campaign run by the Royal College of Psychiatrists aimed at encouraging medical students and foundation doctors to Choose Psychiatry as their specialty. It's been running since 2017 and has led to year-on-year improvements in the fill rate for trainee psychiatry posts, until we reached nearly 100% in 2020 and 2021.

With mental health referrals at record levels of 4.6m over 2021/22 and a backlog of 1.4m people still waiting to start treatment, pressure on the NHS is likely to reach new unprecedented levels and there are currently not enough psychiatrists to meet this ever-increasing demand.

You can send a tweet in support of the **Choose Psychiatry** campaign by sharing the following message:

***I'm supporting the @RCPsych campaign to encourage medical students and foundation doctors to choose psychiatry as a career. Make a difference - #ChoosePsychiatry [www.rcpsych.ac.uk/choose](http://www.rcpsych.ac.uk/choose)***

## **More information:**

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