

---

**People convicted of sexual offences.  
Alternative penalties and resolutions in  
Criminal Justice and Correctional  
Procedures.**

Saturday 21<sup>st</sup> January 2017  
Central Bank of Cyprus Cultural Centre.

Lynn Saunders. Governor at HMP Whatton,  
Nottinghamshire. England.

# Scope of presentation:

- Introduction – Background
- HMP Whatton
- Interventions and options for treatment
- Evidence Base

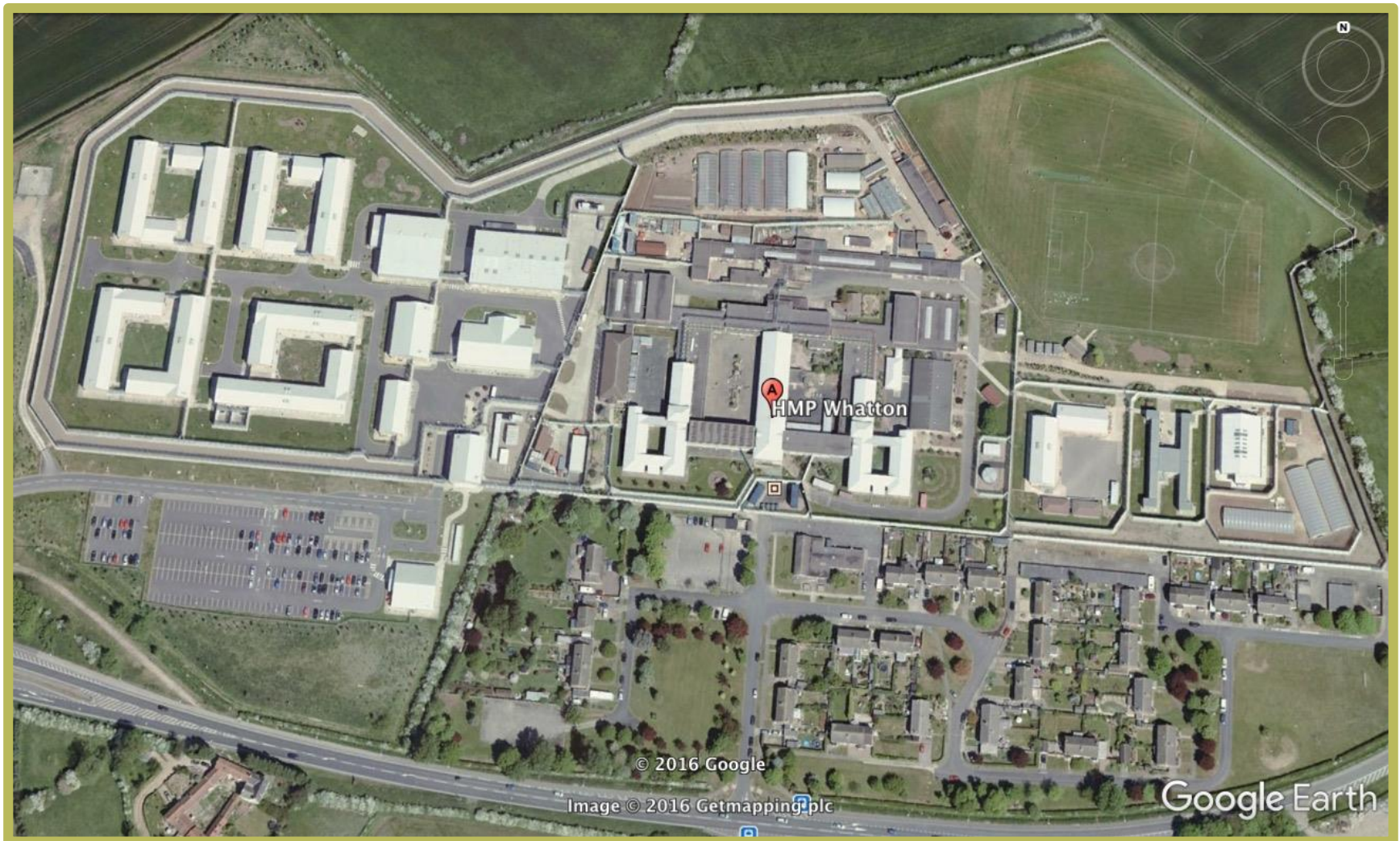


# Background



- ❑ Trained as a social worker in 1986.
- ❑ Worked as Probation Officer.
- ❑ Joined Prison Service on Graduate fast track scheme in 1992.
- ❑ Governor (person legally responsible for the security, safety and operation of a prison) since 2000.
- ❑ Governor of Whatton since 2008.

# HMP Whatton



# HMP Whatton



- ❑ Specialist treatment site (medium security) for people convicted of sexual offences.
- ❑ 6 accredited cognitive behavioural programmes including two programmes for people with intellectual disability (30%) – Core, Extended. HSP, BNM, LNM, Horizon and shortly to introduce KAIZEN.
- ❑ Specialist programme for deaf people (Sign Language as first Language).
- ❑ 841 Adult Male prisoners over 21.
- ❑ 70% offences against children.
- ❑ 158 over 60 (66 over 70).
- ❑ 54 deaths in prison custody at Whatton since 2008.
- ❑ 58 prisoners needing social care support.



# Interventions and options for treatment



## Assessment process:-

- ❑ Prisoners assessed according to their risk of reoffending (RM 2000) (Thornton, 2007)
- ❑ CBT group work programmes provided for those scoring medium risk and above (mixed offence group)
- ❑ Groups consist of 8-10 prisoners and take between 4-6 months to complete.
- ❑ Also one to one work HSP (Healthy Sex Programme) usually 20 sessions for high or very high risk offenders.
- ❑ Counselling and support to enable people to access programmes (trauma based counselling).
- ❑ ID services – specialist nurse, psychiatrist and psychologist.
- ❑ Peer support – post programme volunteers.

# Interventions and options for treatment



## Anti libidinal intervention:-

- ❑ Assessment by Psychiatrist to determine suitability
- ❑ SSRI's or Anti Androgen medication
- ❑ Voluntary
- ❑ Option to continue post release

## Education and Employment:-

- ❑ Skilling or re-skilling people in preparation for release – range of training programmes
- ❑ Rehabilitative culture (positive staff prisoner relationships reinforcing programmes work).

## Peer Support Projects:-

- ❑ Social care support
- ❑ Listeners
- ❑ Insiders
- ❑ Shannon Trust Literacy
- ❑ One to One Maths Project

# Post release support

---

- Safer Living Foundation



- Social support to reduce isolation
- Probation supervision
- Police involvement – Sex Offender Register (MOSOVA)
- Accommodation – Approved premises and beyond



# Protective Factors – Strengths based model



- ❑ Good Lives Model (Ward and Gannon 2006)
- ❑ Protective Factors Developed, Social Interpersonal and Environmental as well as Psychological and Behavioural Features (De Vries et al 2015)
- ❑ Importance of Focusing on a Personal Strength rather than Defects (Farmer, McAlinden, Maruna 2016)
- ❑ Risk needs and Responsivity (Andrews and Bonta 1998)  
Treatment Programmes and Risk Assessments based on his theoretical base.

# MAPPA – Multi Agency Public Protections Arrangements – The process



- ❑ Criminal Justice Act 2003. MAPPA designed to protect the public including previous victims of crime from serious harm by sexual and violent offenders.
- ❑ Multi-agency work (police, probation, prison)
- ❑ Level One – low and medium risk supervised by a single agency
- ❑ Level Two – more complex higher risk cases with inter-agency risk managers
- ❑ Level Three – high risk cases managed directly by MAPPA

# Conclusions



It is possible to provide appropriate treatment interventions for people in prison to reduce reoffending and to help people to live better lives in the community.

Thank you for listening.

[lynn.saunders@hmprisons.gsi.gov.uk](mailto:lynn.saunders@hmprisons.gsi.gov.uk)

0044 1949 803300