



Public Health
England



European Monitoring Centre
for Drugs and Drug Addiction



REGIONAL OFFICE FOR

World Health
Organization

Europe

The health of prisoners: a focus on infectious diseases.

Dr. Éamonn J. O'Moore, MPH FFPH

National Lead for Health & Justice, Public Health England &
Director UK Collaborating Centre for WHO Health in Prisons Programme (European Region)

June 15th, Lisbon, Portugal.



WHO Health in Prisons Programme (WHO HIPP)

- In 1995, WHO (European Region) and the UK established a network for the exchange of experience in tackling health problems in prisons.
 - From this network emerged the WHO Health in Prisons Programme (WHO HIPP), which now includes 47 member states of the 53 from the WHO EURO region.
 - WHO Europe is the only Region to have a prisons programme so in many ways provides global leadership in the area of health & justice.
- WHO HIPP's main activity is to give technical advice to Member States on:
- a. the development of prison health systems and their links with public health systems;
 - b. technical issues related to **communicable diseases (especially HIV/AIDS, hepatitis and tuberculosis)**, illicit drug use (including substitution therapy and harm reduction) and mental health.



WHO HIPP UK Collaborating Centre (UK CC)

- As with other WHO programmes, the WHO HIPP is supported in its mission by a UK Collaborating Centre (UK CC), part of a multi-disciplinary specialist team within PHE which:
 - oversees, coordinates and delivers high quality professional input, technical support and advice to the WHO Regional Office in Copenhagen and European partners on a range of health and social care issues on prison health;
 - delivers an international conference on prison health annually (London 2013, Portlaoise, Republic of Ireland 2014 and Kyrgyzstan, 2015);
 - supports the coordination of work across the WHO EURO region through the Health in Prisons Programme Steering Group, whose membership includes representatives of Member States, the WHO UK CC (PHE), nongovernmental organizations and intergovernmental organizations, such as the United Nations Office on Drugs and Crime (UNODC) and **the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA).**



WHO HIPP Steering Group agenda for 2015–2016

- At the most recent meeting of the Steering Group in Copenhagen (May 28,29th), agreed WHO HIPP activities for 2015–2016 include:
 - **an international conference** in Kyrgyzstan in October 27-29, 2015;
 - development of a new **web-based platform** to serve as a clearinghouse for prison health information supplied by WHO and partner organizations;
 - and the development of a **new Minimum Public Health Dataset for Prisons in the WHO European Region**.
 - The meeting also endorsed a proposal by PHE to establish a new **WHO Europe Prison Health Research Network (WEPHReN)**.



Minimum Public Health Dataset for Prisons in Europe

- **The Minimum Public Health Dataset for Prisons** will cover the main areas of prison health, including prison health systems (such as financing and governance); the prison environment; risk factors for diseases; and the screening, prevention, treatment and **prevalence of communicable and non-communicable diseases**.
- In order to avoid overlap and ensure consistency in indicator definitions and key figures, the Steering Group has asked WHO **to collaborate with other organizations working in the field of data collection**, including PHE as UK CC, **EMCDDA, ECDC**, the **Council of Europe** and **European Commission-funded projects**.
- This indicator set for prisons allows health commissioners and providers to:
 - improve their understanding of the health needs of the population in prisons
 - inform health needs assessments and health service evaluation
 - plan services to meet national standards and local needs
 - performance manage health service providers
 - monitor the quality of services with an outcome focus
 - Allow comparisons across health & justice data between and within countries.



The Criminal Justice Estate in England & Wales

- **Prisons** (public and ‘contracted out’ estate) (114)
- **Immigration removal centres** (IRCs) (9)
- **Children and Young People’s Secure Estate (CYPSE)** (young offender institutions (4), secure training centres (3) and secure children’s homes (14))
- **Police Custody Suites** (40 separate police forces in England, 39 territorial forces and British Transport Police).



Probation & Prisons Map





Public Health England Centres

- **PHE** is structured into a national centre, 4 regions and 8 centres plus London, which is an integrated region-centre.
- Each PHE Centre has a **Health Protection Team**;
- Each PHE Centre also has a **Health & Justice Public Health Specialist** and a **H+J Health Protection Lead** which together form the **Health & Justice Health Protection Network**.

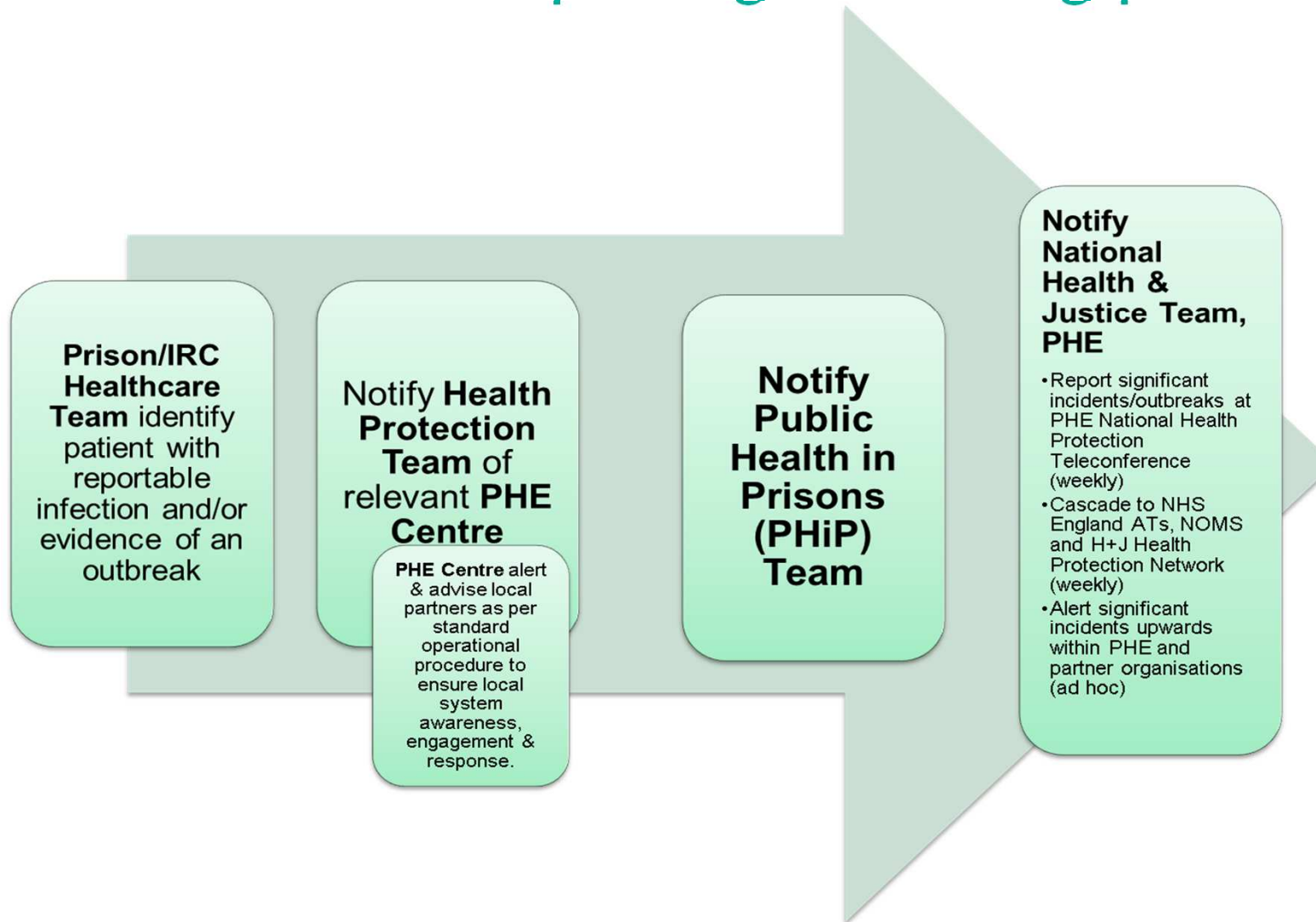




Public Health Intelligence for Prisons & Secure Settings Service (PHIPS)

- Based within the national Health & Justice Team, the PHIPS Service is responsible for gathering evidence & intelligence to improve the health of people in prisons and other PPDs. This includes:
 - ✓ **data to support health needs assessments (HNAs)**
 - ✓ **health and justice indicators of performance (HJIPs)**
 - ✓ **MMR, seasonal flu & HepB vaccine coverage**
 - ✓ **Bespoke data requests.**
- The PHIPS Service receives reports of infectious diseases **directly** from Health Protection Teams within PHE Centres including alerts re: **outbreaks.**
- We **collect and disseminate surveillance data** on infectious diseases incidents & outbreaks, and develop national guidance for stakeholders within the field.
- Provides **real-time surveillance of infectious diseases in prisons** e.g. during 2009 pandemic flu- gathers data with NOMS on cases in prisoners & staff.

PHIPS Service reporting & alerting processes





Other data sources for infectious diseases in prisons

Health & Justice Indicators of Performance (HJIPs)

- The previous Prison Health Performance and Quality Indicators (PHPQIs) were replaced in April 2014 with HJIPs
- The new indicators are largely quantitative measures. NHS England Area Teams will work with their commissioned providers

PHE Sentinel Surveillance of BBV testing

- Reports on trends in **BBV** testing across England in the 24 participating laboratories

Genitourinary Medicine Clinic Activity Dataset (GUMCAD)

- Captures all **STI** diagnoses & sexual health service use in GUM clinics
- “Z” code introduced in 2011 to capture offender data

Survey of Prevalent HIV Infections Diagnosed SOPHID

- SOPHID is a cross-sectional survey of all persons who attend for **HIV**-related care at an NHS site in England



Health & Justice Indicators of Performance (H-JIPs)

- In April 2014, a new set of **Health and Justice Indicators of Performance (HJIPs)** were deployed by NHS England, PHE and NOMS.
 - Largely quantitative measures including data on infectious diseases.
 - Support effective commissioning of healthcare services.
 - Enable national and local monitoring of the quality and performance of healthcare.
 - Provide a tool for providers to review their performance and identify areas that need improvement.
 - Provide data for local health needs assessments (HNAs).and inspectorates.

Health and Justice Indicators of
Performance (HJIP):

Adult Secure Estate

User Guide 2014/15



Public Health England





HJIPs relating to Communicable Disease Control: Outbreak Plans and Pandemic Flu Plan

Key Performance Indicator/Information Measure	KPI Description	Monitored via:
Communicable Disease Control	Ensure the Prison / detention centre has an outbreak plan and pandemic flu plan developed in partnership with the local PHE health protection team and signed off by the prison governing governor, director of public health of the local authority and the deputy director for health protection (DDHP) of the relevant PHE Centre which has been tested in the last 12 months, and a pandemic flu plan tested in line with NOMS business continuity requirements	◇ ▼

Key:

- NHSE performance schedule
- ◇ Annual audit
- NDTMS statistics (PHE)
- ▼ Contractual requirement



HJIPs relating to communicable diseases: TB & Vaccination

Key Performance Indicator/Information Measure	KPI Description	Monitored via:
Tuberculosis (TB) Screening	The % of new receptions assessed for their TB risk by symptom screening within 48 hours of arrival including medication check	●
Tuberculosis (TB) Referral	The % of patients with signs of TB infection referred to a specialist service and assessed by the service.	●
Tuberculosis (TB) Treatment	The % of patients on treatment for TB receiving treatment via direct observed therapy (DOT) of the total number referred to specialist care	●
Childhood Imms / Vaccs Uptake	The % of patients accepting an immunisation/vaccination out of the patients that were offered during the reporting period. (Declines to be read coded)	●
Hepatitis B Vaccine Uptake	Hepatitis B vaccine coverage for completed course (3 doses) for all eligible patients received into the establishment within 4 weeks of reception	●

- NHSE performance schedule
- ◇ Annual audit
- NDTMS statistics (PHE)
- ▽ Contractual requirement



HJIPs relating to BBVs: HBV, HCV, HIV



Key Performance Indicator/Information Measure	KPI Description	Monitored via:
Hepatitis B Testing	The % of patients offered hepatitis B testing, within 72hrs of reception	●
Hepatitis B - HBsAg	The % of new arrivals that underwent testing (HBsAg) within 4 weeks of arrival of the total patients eligible during the reporting period	●
Hepatitis B – Referral	The % of those testing positive for chronic hepatitis B being referred to a specialised service	●
Hepatitis B – 18 weeks	The % of those testing positive for chronic hepatitis B being initially assessed by a specialist who have a treatment plan developed, within 18 weeks.	●
Hepatitis C testing	The % of patients offered Hepatitis C testing, within 72hrs of Reception	●
Hepatitis C – HCV Ab	The % of eligible patients who have undertaken a HCV Ab test	●
Hepatitis C - HCV PCR	The % of patients HCV Ab positive patients who underwent HCV PCR testing	●
Hepatitis C - Referral	The % of those testing HCV PCR positive being referred to a specialised service	●
Hepatitis C – 18 Weeks	The % of those testing HCV PCR Positive being initially assessed by a specialist who have a treatment plan developed, within 18 weeks	●
HIV testing – Uptake	The % of patients that underwent testing of the total patients eligible population during the reporting period	●
HIV testing – 2 Weeks	The % of HIV positive patients seen by a secondary care clinician within 2 weeks of diagnosis	●



HJIPs relating to Sexual Health

Key Performance Indicator/Information Measure	KPI Description	Monitored via:
Sexual Health	Patients are given advice and information around BBV prevention and be able to access condoms, lubricants, disinfectant tablets and a range of preventative educational materials around BBVs. In addition patients are given advice about options for treatment and information on how to link up with community services on release	
Chlamydia Screening	The % of patients that underwent screening of the total patients eligible during the reporting period.	



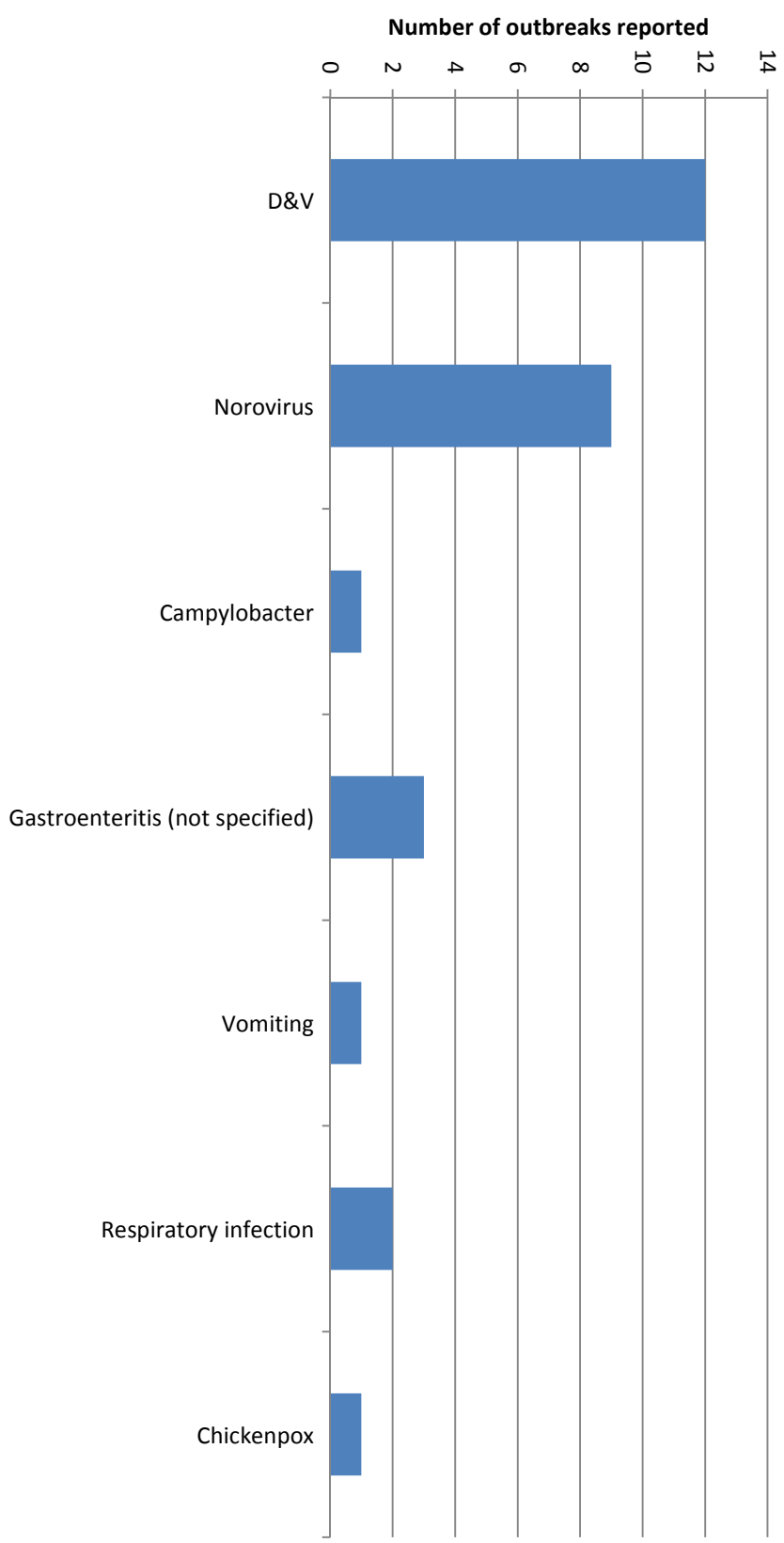
Notifications of reportable diseases during 2014

- Vast majority of reported infections among people in prisons & other PPDs in 2014 were **BBVs** (Hepatitis B and C);
- HIV cases are not captured by PHIPS surveillance but by SOPHID system;
- STIs are captured by GUMCAD data using 'z' code.
- TB (pulmonary & non-pulmonary) single most important bacterial infection reported.

Infection	2014
Campylobacter	<5
E Coli 0157	<5
Food poisoning	<5
Giardia	<5
H1N1	<5
Hep B and C chronic	<5
Hep B acute	<5
Hep B acute and hep C PCR+ve	<5
Hep B chronic	104
Hep B chronic and Hep C	<5
Hep C acute	<5
Hep C antibody+ve	526
Hep C antibody+ve / PCR-ve	63
Hep C PCR+ve	477
Herpes zoster (Shingles)	9
Invasive group A streptococcus (IGAS)	<5
Meningitis	<5
Mumps	<5
Methicillin-sensitive staphylococcus	<5
Salmonellosis (Salmonella enterica)	<5
Scabies	5
Staphylococcus aureus / PVL	<5
TB (site not specified)	<5
TB incident (pulmonary)	43
TB single case (non-pulmonary)	10
Varicella (chickenpox)	<5
Other	0
Grand Total	1,268

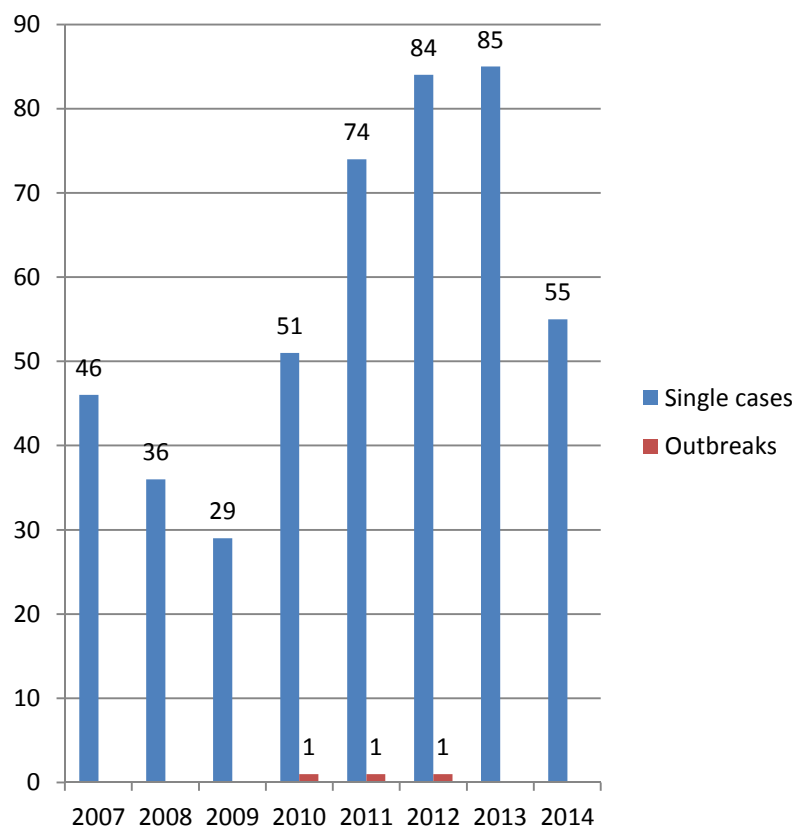
Outbreaks in Prisons & PPDs 2014

Source: PHIPS Service





TB surveillance in English Prisons



- In the **UK in 2013**, TB incidence in general population was **12.3/100,000** (Source: PHE, TB in the UK, 2014) .
- Using the standing mid-year prison population as the denominator and PHIPS reports as the numerator, the incidence rate for **TB in English prisons was 100.9/100,000 in 2013** and **64.3/100,000 in 2014**.
- Fewer cases reported in 2014 compared to previous years.



Number of new STI diagnoses among prisoners in England, 2011 to 2013 [Note: 2014 data will be published in June 2015]

	2011	2012	2013
All new STIs*	545	864	710

	2011	2012	2013
Chlamydia	114	183	163
Gonorrhoea	12	23	15
Herpes: anogenital herpes (1 st episode)	11	10	14
Syphilis: primary, secondary and early latent	<5	6	<5
Warts: anogenital warts (1 st episode)	249	424	341

pediculosis pubis, syphilis: primary, secondary & early latent, trichomoniasis, warts: anogenital warts (1st episode) Source: GUMCADv2



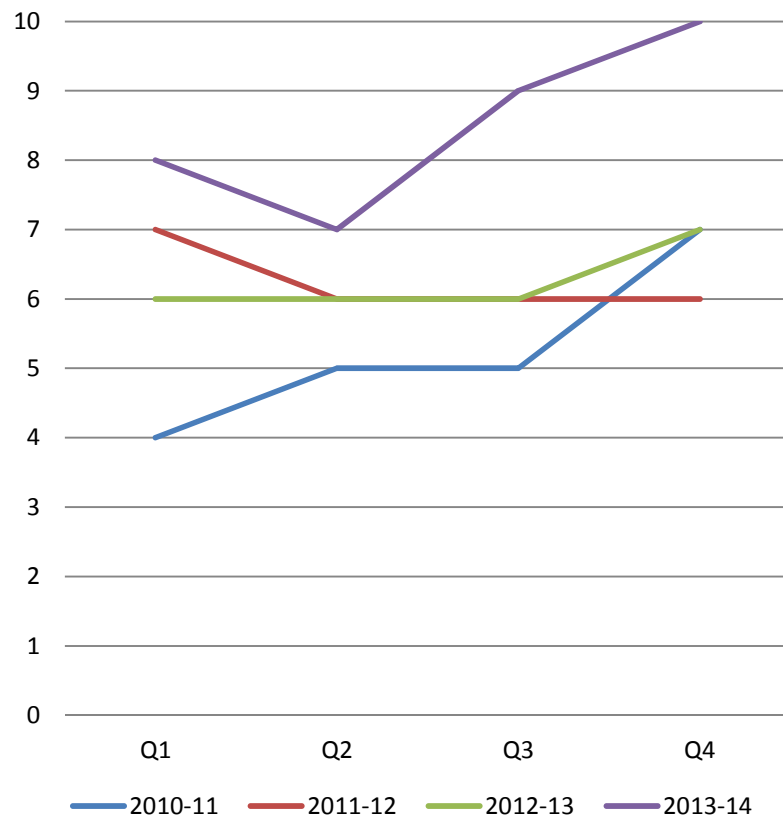
SOPHID Data on HIV in prisons 2013

[Note: **2014 data** will be published in **June 2015**]

- **Survey of Prevalent HIV Infections Diagnosed (SOPHID)** began in 1995 is a cross-sectional survey of all persons with diagnosed HIV infection who attend for HIV care at an NHS site in England, Wales and Northern Ireland.
- This data set provides information of the numbers of **individuals living with and diagnosed with HIV within PPDs.**
- **During 2013, there were 9 adults (aged 15 or above) that were diagnosed with HIV at a prison service in the UK.**
- Of the 74,159 adults living in England with a diagnosed HIV infection, **208 of them were likely to be prisoners.**
- There were also likely to be **22 adults from immigration removal centres (IRCs) .**



Impact of BBV opt-out testing on HCV



- **PHIPS data** shows a national **increase in hepatitis C tests being performed since 2010-11** where it has steadily increased from just 4% of new receptions in quarter 1 2010/11 to 10% in quarter 4 2013/14.
- This is likely to be largely attributable for the introduction of **opt-out BBV testing** across the estate.



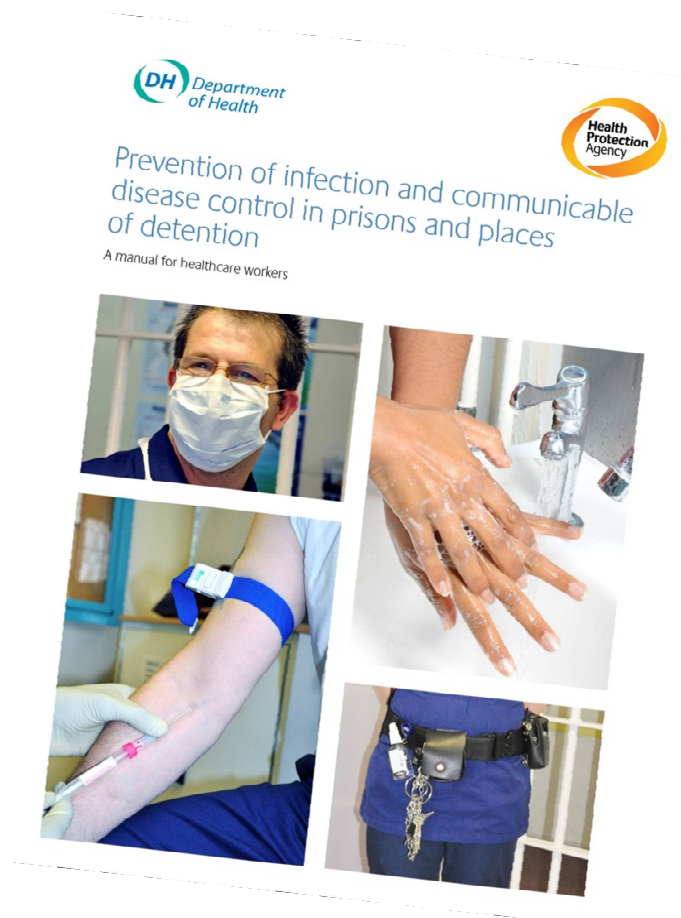
National Partnership Agreement Joint PH Priorities for 2015/16 NOMS, NHS England & PHE:

http://www.justice.gov.uk/downloads/about/noms/work-with-partners/national_partnership_agreement_commissioning-delivery-healthcare-prisons2015.pdf

- 1. Review & align NHS England & NOMS' commissioning systems** & strategies to ensure quality services which support health and justice outcomes;
- 2. Strengthen integration of services and continuity of care** between custody and the community, including through development of liaison and diversion services;
- 3. Improve the proactive detection, surveillance and management of infectious diseases** in prison and improve capability to detect and respond to outbreaks & incidents
- 4. Reduce levels of smoking amongst prisoners;**
- 5. Review the management of medicines and the impact of New Psychoactive Substances (NPS)** in prisons to address risk of misuse and resultant harms;
- 6. Strengthen multi-agency approaches to managing prisoners and learning** from services and pathways at serious risk of harm and further **embed shared learning to continuously improve practice;**
- 7. Undertake joint priority services reviews to ensure that best practice** is being adopted and promoted;
- 8. Introduce integrated health and social care services for prisoners** in line with the **Care Act 2014.**



Useful resources developed by PHE



- PHE's Health and Justice Prison Network, Health Protection have produced a range of resources for stakeholders about infectious diseases in prisons and other secure settings. All these are available at:

<https://www.gov.uk/government/collections/public-health-in-prisons>

- Specific guidance has been developed around the management of outbreaks of communicable diseases in prisons including the '**Multi-agency contingency plan for the management of outbreaks of communicable diseases or other health protection incidents in prisons and other places of detention in England, 2013**' and '**Prevention of infection and communicable disease control in prisons and places of detention , A manual for healthcare workers**'.

The screenshot shows a web browser window with the URL <https://www.gov.uk/government/collections/public-health-in-prisons-and-secure-settings>. The browser's address bar and menu bar are visible. The GOV.UK logo is in the top left, followed by a search bar and navigation links: Departments, Worldwide, How government works, Get involved, Policies, Publications, Consultations, Statistics, and Announcements.

Health protection – collection

Public health in prisons and secure settings

From: [Public Health England](#)
First published: 27 May 2014
Last updated: 20 August 2014, [see all updates](#)
Part of: [Services, Health protection, Prisons healthcare and Prisons and probation](#)

Resources to track, treat and prevent single infections and outbreaks in prisons, secure settings and health services.

Contents

- [Infection control in prisons and secure settings](#)
- [Reporting single incidents and](#)

The Public Health Intelligence for Prisons and Secure Settings Service (PHiPs) works with [National Offender Management Service \(NOMS\)](#), NHS England and the Public Health England Centres to support healthcare staff



Other resources include

- **Ebola:** risk assessment guidance for different PPDs
- **Management of tuberculosis in prisons:** Guidance for prison healthcare teams
- **TB: Information for prison staff**
- **Seasonal flu** in prisons and detention centres in England: guidance for prison staff and healthcare professionals
- **Chickenpox and shingles:** infection control in prisons and other places of detention
- **Measles in prison:** vaccination and infection control for staff and prisoners



Public Health
England



World Health
Organization

REGIONAL OFFICE FOR
Europe

Contact details:

- **E-mail:** Health&Justice@phe.gov.uk
- **PHIPS web pages:**

<https://www.gov.uk/government/collections/public-health-in-prisons>

- **Twitter:** @ejomoore #PHEprisonhealth



Public Health
England



World Health
Organization
REGIONAL OFFICE FOR Europe

References

Public health in prisons and secure

<https://www.gov.uk/government/collections/public-health-in-prisons>

Health & Justice Report 2014

<https://www.gov.uk/government/publications/prison-health-health-and-justice-annual-report>