

Services to Prisoners and Young Offenders

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Health Priorities for Prisoners and Young Offenders Forum, 5 May 2011

Models for Health Care Delivery in Criminal Justice System

1. Funded and provided by the Justice arm directly
2. Funded by Justice but provided by contracted external provider
3. Funded by Health in-reach by local community health services
4. Funded and provided by specific Health entity

Justice Health Role

- Provision of health services to adults and adolescents who come into contact with the criminal justice system – custody, courts, community and hospitals (late 2008)
- Monitor the provision of health services
- Take preventative measures to minimise the spread of infectious diseases
- Provide advice to the Commissioner of Corrective Services NSW and the Chief Executive of Juvenile Justice in relation to the well being of adults and adolescents in the criminal justice system

Justice Health Locations



Correctional Centre
 Periodic Detention Centre
 Court & Police Complex
 Court Liaison Service
 Drug Court Service
 Juvenile Detention Centre

** Silverwater Complex
 Metropolitan Remand & Reception Centre
 Silverwater Womens Correctional Centre
 Silverwater Correctional Centre
 Mental Health Screening Units at MPRC and SWCC

*** Long Bay Complex
 Long Bay Hospital
 Malabar Special Programs Centre
 Metropolitan Medical Transitional Centre
 Special Purpose Centre
 Prison Hospital and Forensic Hospital
 due to be completed in 2009

Patient Numbers – 2010

O/N Census (May 2010)	Statewide	10,465	Adolescent	480
Throughput	Annual	30,500	Adolescent	3,950

Pre	Custody/Detention & Inpatient	Post
<ul style="list-style-type: none"> ▪ 21 Court complexes ▪ Adolescent Community and Court Team (ACCT) ▪ 3 Children’s Court ▪ Youth Drug & Alcohol Court ▪ Adult Drug Court 	<ul style="list-style-type: none"> ▪ 31 Correctional Centres ▪ 8 Juvenile Justice Centres ▪ 1 Juvenile Detention Centre ▪ 11 Periodic Detention Centres ▪ 10 Police Cell Complexes ▪ Long Bay Hospital ▪ Forensic Hospital 	<ul style="list-style-type: none"> ▪ Post release treatment schemes for adults and adolescents ▪ Community Forensic Mental Health Service (CFMHS) ▪ Community Integration Team (CIT) ▪ Connections Project

Length of Contact

Adult Length of Stay (2008 Inmate Census - CSNSW)

- 30% less than 6 months
- 16% 6 months to < 12 months
- 18% 1 year - < 2 years
- 36% longer than 2 years

Over 150, 000 movements per year

Adolescent Length of Stay (Juvenile Justice)

- 65% stay up to 1 week
- 18% stay between 1 week to 1 month
- 14.5% stay between 1 to 6 months
- Only 2.5% stay longer than 6 months

Demographics

Adults (2008)	Male (N=8,849)	Female (N=708)
% Aged <30 years	39	36
% Aboriginal	20	30
% Non-English speaking country of birth	16	20
% Born in Australia	74	70
% Never married	58	52

Source: 2008 Inmate Census, Corrective Services NSW

Adolescents (2009)	Male (N=448)	Female (N=32)
% Aboriginal	46	40

Source: Juvenile Justice

Socio-economic Status

Adults (2009)	Male (N=797)	Female (N=199)
% No school qualification	52	45
% Unemployed in 6 months before prison	50	67
% On pension/benefit before prison	63	78
% Placed in care as a child	30	32

Source: 2009 Inmate Health Survey

Adolescents (2009)	Male (N=272)	Female (N=40)
% Placed in care as a child	25	40
% Unsettled accommodation before prison	4	18

Source: 2009 Young People in Custody Health Survey

Offending History

Adults (2009)	Male	Female
% Previously incarcerated	64	46
% Sentenced	74	68
% Ever in juvenile detention	42	22
% Past parental incarceration	18	18

Source: 2009 Inmate Health Survey

Adolescents (2009)	Male	Female
% Previously in custody	70	80
% Past parental incarceration	44	48
% Current parental incarceration	10	10

Source: 2009 Young People in Custody Health Survey

Physical Health

Adults (2009)	Male	Female
% Current smoker	75	79
% Asthma	26	40
% Diabetes	4	5
% Any heart problem (murmur, etc)	19	24
% Illness/disability 6+ months	46	54

Source: 2009 Inmate Health Survey

Adolescents (2009)	Male	Female
% Current smoker or will smoke on release	43	68
% Asthma	22	30
% Mild to moderate hearing loss	18	24

Source: 2009 Young People in Custody Health Survey

Mental Health and Drug and Alcohol

Adults (2009)	Male	Female
% Hazardous/harmful alcohol	64	40
% Ever use illicit drugs	86	78
% Ever injected drugs	40	52
% Ever treated for mental health	46	53
% Ever attempted suicide	19	27
% Ever self-harmed	14	17

Source: 2009 Inmate Health Survey

Adolescents (2009)	Male	Female
% Ever considered suicide	14	28
% Ever attempted suicide	8	23
% Ever self-harmed	14	35

Source: 2009 Young People in Custody Health Survey

Serology for Blood-borne Viruses

Adults (2009)	Male	Female
% Hepatitis C positive	28	45
% Exposed to Hepatitis B	23	34
% Hepatitis B immune (vaccine-conferred)	38	40

Source: 2009 Inmate Health Survey

Adolescents (2009)	Male	Female
% Hepatitis C positive	0	21
% Exposed to Hepatitis B	2	0
% Hepatitis B immune (vaccine-conferred)	67	61

Source: 2009 Young People in Custody Health Survey

Our Vision

International best practice health care for those in contact with the criminal justice system

Our Goals

- Identify the health care needs of our client group
- Provide high quality clinically appropriate services, informed by best practice and applied research
- Make health care part of the rehabilitative endeavor
- Facilitate continuity of care to the community
- Develop an organisational culture that supports service delivery
- Provide fair access to health services
- Provide strong corporate and clinical governance
- Employer of choice

Relationship – Role of Corrective Services NSW and Juvenile Justice

- Essential to achieving the goals and the objectives for the provision of healthcare for the population, within the necessary security framework
- Corrective Services NSW and Juvenile Justice provide the following services:
 - Welfare
 - Psychological – to assist persons to adapt to prison life and the varied social and psychological issues and stresses directly related to incarceration
 - Drug and Alcohol counselling
 - Closely linked with the provision of health services by Justice Health and some health promotion
 - Special Rehabilitation – Corrective Services NSW provides education and rehabilitative programs for inmates

What Defines Justice Health?

- Majority of service provided is in an ambulatory setting
- Specific model of health care
- Statewide service
- High level of need/short stay
- Constant movement with little notice
- Health Centres in Correctional & Juvenile Justice Centres = rural & remote practice
- Rapid growth
- Expansion of role and of program

Consumer and Community Group

- **Convened in response to:**
 - *Partners in Health – Sharing Information and Making Decisions Together*” Report (2001): health services to work with consumers and include them in decision making processes
 - The Auditor General’s Performance Audit Report (2001) which recommended the health system:
 - Enhance consultation with external stakeholders
 - Identify customer and stakeholder expectations and perceptions
 - Keep the broader community informed of progress, directions and plans

Justice Health Representatives

Include:

- Chair of Quality Council (Board member)
- Board member – staff representative
- Chief Executive
- Executive Director Governance
- Representatives from Clinical Directorates
- Representative from Operations

Consumer Representatives

- *Sources:* JH staff, Corrective Services NSW, Juvenile Justice, community organisations, call for Expressions of Interest
- *Attributes:* commitment to improving healthcare system; ability to attend bi-monthly; represent/respect views of other people who use healthcare system; relate own experience to broader consumer issues
- *Skills:* understanding of healthcare system within correctional environment; communication skills; frequent use of JH services in custody or community; background of consumer representation (eg IDC) desirable
- Reasonable expenses covered

Consumer Representatives

- Male consumer in custody (teleconference)
- Female consumer in custody (teleconference)
- Male consumer post release
- Female consumer post release
- Aboriginal representative (post release)
- Young people engaged via targeted approach

Community Representatives

Not exhaustive

- NSW Council of Social Services
- Community Restorative Centre
- Mental Health Coordinating Council
- NSW Users and Aids Association
- SHINE For Kids
- Hepatitis NSW
- Chaplaincy Services
- NSW Consumer Advisory Group – Mental Health Inc
- Public Interest Advocacy Centre

Membership to be reviewed – Forensic Mental Health Network

Priorities Management Framework

- Forum 2008 – priorities themed, focussing on systemic issues
- Need to align with the quality cycle – framework developed
- **Phase 1:** Information gathering, current policies and procedures
- CCG consult stakeholders, identify key questions and sources of evidence and nominate for focus group/scoping exercise
- **Phase 2:** Scoping exercise feeds information back to CCG. Proposed actions identified.
- **Phase 3:** Clinical Operations for endorsement/response
- Implementation of actions with key performance indicators (KPI's) to measure success, reported back to CCG

Priorities addressed to date:

- Access to health services during transport and transfer (including court and holding cells)
 - Action Plan commenced
- Continuity of health care for patients on release
 - Action Plan commenced
- Mental health awareness training
- Access to mental health services
 - Work in Progress
- Mapping of patient access to the complaints process

Remaining priorities from 2008

- The need to improve consumer engagement and the role of prisoners and young offenders in service planning and delivery across the organisation
- Service provision to patients with intellectual disability and Acquired Brain Injury
- Needle and syringe program
- Communication and information flow between consumers, the community and Justice Health, in regard to service available, processes and coordination
- Unmet demand for services (mental health, oral health, drug and alcohol etc)
- Culture and attitude of Justice Health staff

Sustainability

- Action plans/work in progress:
 - Access to health services during transport and transfer
 - Continuity of health care for patients on release
 - Access to mental health services
- Need to achieve progress
- Sustainability of new priorities work?

Justice Health website

www.justicehealth.nsw.gov.au