

Centre for Health Research in Criminal Justice
Strategic Plan 2010 – 2015



Preamble

The Centre for Health Research in Criminal Justice (CHRCJ) was formed in 2003 to establish a centre of excellence to research health matters connected with the criminal justice system. The CHRCJ is primarily funded by Justice Health and has an independent Board of Management which has an advisory function. The Board acknowledges the crucial role that Justice Health has played and continues to play in supporting the work of the CHRCJ.

The CHRCJ is one of the few research centres in the world specifically devoted to the study of the health issues of people who come into contact with the criminal justice system. Its work is recognised at the national and international level. The CHRCJ has a strong and long-term commitment to high quality health research.

People who come into contact with the criminal justice system are a transient population and of those who come into custody, most spend only a short time in prison before returning to the wider community, taking with them their health and social problems. As such, health care in the criminal justice system is of concern not only for people in custody and corrections staff but also for the wider community. People who come into contact with the criminal justice system are not typical of the general population with regards to their health needs, having a disproportionately higher prevalence of mental health problems and drug misuse compared to the general population. Health care in correctional centres therefore should promote the health of people in custody; identify offenders with health problems; assess their needs; and deliver treatment or refer to other specialist services as appropriate. Good health care and health promotion in custody should help enable individuals to function to their maximum potential on release, which may assist in the

reduction of recidivism, domestic violence, mental illness and blood borne virus transmission.

For these reasons, it is the aim of the CHRCJ to initiate, implement and support health research and evaluation of the health programs within the criminal justice setting (among both adults and adolescents). This research and evaluation will contribute towards addressing health care for this high-risk group, providing an evidence base to continually improve health services in the criminal justice system and thus have an impact on the health of the wider community.

It is also important that the research findings of the CHRCJ should be disseminated widely to facilitate the improvement of health and human services provided by a range of agencies to people who come into contact with the criminal justice system; and to build awareness in the community of the benefit of improving the health and well being of this population.

We would like to acknowledge the work of Siggins Miller in assisting us to develop this strategic plan. This plan was compiled after extensive consultation with current and former offenders and their families, Senior Executive staff in NSW Health, Justice Health Board members and staff, CHRCJ board members and staff, and with academic experts and community stakeholders.

This plan is a living document that will be monitored and regularly reviewed. It reflects the needs and expectations conveyed to us by our stakeholders, and aims to guide the activities of the CHRCJ over the next five years.

Julie Babineau
Chief Executive

Neil Wykes
Chair, CHRCJ Board

Background

The original vision for the CHRCJ was to build its reputation and external funding base in order to become a financially independent research centre. As a result of the consultations and planning workshop that have contributed to the development of this Strategic Plan, the original vision has been expanded. A longer term vision now encompasses the eventual development of the CHRCJ as an Australia and New Zealand centre of excellence in health research in the criminal justice system.

This, however, is a longer term vision, and the Strategic Plan for 2010 – 2015 has been developed to focus upon the immediate, short- and medium-term outcomes to be achieved in order to build towards attaining independent, bi-national status. It will be an iterative process and it is important to note the small size and current resources of the CHRCJ with which the process begins. In 2009, the CHRCJ consisted of 2 permanent FTE staff (the Head of Research and the Administrative Assistant) and approximately 8 FTE research staff contracted for a fixed term.

The flagship research of the CHRCJ in recent years has been epidemiological studies such as the Inmate Health Survey, the Young People in Custody Health Survey and the Young People on Community Orders Health Survey.

In preparation for the 2010 strategic planning process, stakeholder consultations were conducted by independent consultants Siggins Miller. The stakeholders were overwhelmingly supportive of the role of the CHRCJ and commonly stated that the population health surveys conducted by CHRCJ are important, well executed and extensively used by others to inform policy, budget submissions, teaching and further research.

At the same time, there was a general consensus that it is time for the CHRCJ to expand beyond epidemiological studies and to broaden the scope of its research. For people in custody and their families, systems-related issues are their main concern. For service providers, evaluation of their interventions, benchmarking against best practice and access to an evidence base are of primary importance. For agencies working with people pre- and post-custody, continuity of care is their priority.

The CHRCJ's Strategic Plan aims to accommodate the priorities of stakeholders, while at the same time supporting the strategic plans of Justice Health and NSW Health.

Context

The CHRCJ Strategic Plan links to the State Health Plan – A New Direction for NSW¹ by providing the evidence base to inform and assist the Seven Strategic Directions:

- 1 Make prevention everybody's business
- 2 Create better experiences for people using health services
- 3 Strengthen primary health and continuing care in the community
- 4 Build regional and other partnerships for health
- 5 Make smart choices about costs and benefits of health services
- 6 Build a sustainable health workforce
- 7 Be ready for new risks and opportunities

The CHRCJ Strategic Plan also supports the strategic goals of Justice Health², namely

- 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 endeavour
- Facilitate continuity of care to the community
- Develop an organisational culture that supports service delivery
- Promote fair access to health services
- Provide strong corporate and clinical governance.

Relationship of CHRCJ Strategic Plan with CHRCJ Annual Business Plans

This Strategic Plan is intended to identify key outcomes for the next five years, together with the objectives behind those outcomes, and strategies to achieve them.

Depending on the resources available and the priorities of the CHRCJ Board and other stakeholders, parts of the Strategic Plan will be given priority at different times during the next five years.

Every year, the CHRCJ will develop a business plan and budget. As part of the annual business planning process, the centre will identify particular outcomes, objectives and strategies in the Strategic Plan that will take priority over the next twelve months.

A Business Plan is a key implementation tool that uses the Strategic Plan as a living document and as a key point of reference in planning the work of the CHRCJ.

1 http://www.health.nsw.gov.au/pubs/2007/state_health_plan.html

2 *A New Direction for Justice Health, Health Service Strategic Plan towards 2010*, May 2007, p.4

Our Vision

The vision of the Centre for Health Research in Criminal Justice is to inform policy and practice and improve health outcomes through research into the health and well being of people who come into contact with the criminal justice system.

Research principles

All research projects conducted through CHRCJ should:

- have tangible benefits for both inmates and the wider community
- expand the evidence-base in order to inform health service delivery and policy development
- be methodologically sound
- meet appropriate ethical standards
- utilise health indicator data that is comparable with community and other criminal justice-based populations
- expand and develop new and existing partnerships within Justice Health and with key government and academic stakeholders
- communicate the findings of research through peer-reviewed publications, reports, conference and other presentations

To achieve our vision and carry out our purpose, we are committed to:

- maintaining the excellent reputation of CHRCJ in local, national and international criminal justice system population health studies
- establishing the CHRCJ as a centre of excellence in health program evaluation in the local, national and international criminal justice system
- providing support and guidance for staff undertaking research within Justice Health
- providing a supportive environment for undergraduate and post-graduate training in research

- Seeking peer-reviewed grants and other funding sources to expand the research and evaluation conducted
- Investigating strategies to move towards creating a financially independent Australian and New Zealand Centre for Health Research in Criminal Justice.

The areas of work where we will seek to achieve outcomes are:

- 1 Evaluating clinical interventions and programs
- 2 Measuring health outcomes
- 3 Understanding the determinants of health
- 4 Investigating health system performance
- 5 Disseminating research findings

Linkage to Justice Health Strategic Plan

The focus of effort within each outcome area will be informed by the Justice Health Corporate Strategic Plan 2006 – 2010 key areas of clinical performance which include:

- 1 Risk assessment and early intervention
- 2 Prevention and early detection of health problems
- 3 Managing the top 5 chronic diseases – cardiovascular, chronic obstructive pulmonary disease, diabetes, renal failure and cancer
- 4 Community mental health services
- 5 Programs that divert mentally ill offenders to treatment
- 6 Managing our ageing population
- 7 Post release care – continuity of care to the community

Key Outcome Areas

1 Evaluating clinical interventions and programs

- To support the development and expansion of clinical interventions and programs
- To evaluate the quality and uptake of clinical interventions and programs
- To evaluate the cost effectiveness of clinical interventions and programs

objective

Strategies to achieve these objectives will include –

- Supporting clinician-led research projects
- Maintaining a strong grasp of the literature about effective clinical interventions and programs
- Developing a process for identifying clinical and research priorities that includes clinicians, other key staff and consumers
- Developing research proposals for clinical trials, including randomised controlled trials
- Conducting economic analysis of the cost effectiveness, efficiency and benefit of clinical interventions and programs
- Fostering collaborations across government, academia and community-based organisations for clinical programs
- Building evidence and evaluation into service and strategic planning
- Evaluating the effectiveness of screening and intervention programs

strategy

Key Outcome Areas

2 Measuring Health Outcomes

- To improve mechanisms to identify health problems
- To identify and measure changes in health outcomes
- To understand the impact of incarceration on health

objective

Strategies to achieve these objectives will include –

- Continuing to conduct prevalence studies such as the Inmate Health Survey, Young People in Custody Health Survey and the Mental Health Survey
- Developing cohort and incidence studies, such as the Hepatitis C Incidence and Transmission Study
- Undertaking more data linkage studies, incorporating data collections held at NSW Health and the re-offending database at the NSW Bureau of Crime Statistics and Research
- Conducting more qualitative research studies, including engaging prisoners, ex-prisoners and their families in health issues of importance to them
- Optimising the design and use of existing and planned routine data collections (e.g. reception and assessment information, e-medical records)

strategy

Key Outcome Areas

3 Understanding the Determinants of Health

- To develop a greater understanding of the determinants of health for people in the criminal justice system
- To develop strategies for prevention and early identification of, and intervention for, health problems
- To inform policies and programs aimed at reducing recidivism and diverting offenders from custody

objective

Strategies to achieve these objectives will include –

- Utilising population health surveys such as the Inmate Health Survey and Young People in Custody Health Survey to assess determinants of health including education, employment, socio-economic status and cultural background
- Investigating health status of people from Aboriginal and Torres Strait Islander and culturally and linguistically diverse backgrounds
- Engaging in data linkage studies across government agencies to assess the impact of service provision on health status and recidivism
- Establishing surveillance programs for at-risk populations
- Developing an understanding of factors that influence access to healthcare in order to improve continuity of care
- Expanding partnerships and collaborations between government departments and agencies which impact on the determinants of health, such as Department of Housing, Department of Community Services, Department of Education and non-government agencies

strategy

Key Outcome Areas

4 Investigating Health System Performance

- To understand the factors influencing access to health services in custody and continuity of care post-release
- To evaluate the quality of health services in custody, including assessing patient satisfaction with healthcare
- To provide evidence to improve training and retention of the health workforce

objective

Strategies to achieve these objectives will include –

- Analysing and reporting on the findings of the Inmate Health Survey and other research proposals with regard to access to and patient satisfaction with healthcare
- Developing research cohort studies of prisoners in custody from reception to release for assessment of health system performance
- Contributing to the development of robust health system performance indicators, including appropriate benchmarking
- Collaborating with NSW Health and Area Health Services to monitor and support continuity of care post-release
- Supporting the conduct of regular surveys of the Justice Health workforce regarding training and retention needs
- Promoting clinician, consumer and management collaboration and good governance in the identification of key research questions and study design
- Engaging clinicians appropriately to design and develop health system level research to inform evidence-based practice

strategy

Key Outcome Areas

5 Disseminating Research Findings

- To communicate research findings to a range of key stakeholders using a variety of methods
- To utilise research evidence to influence policy development, service delivery and resource allocation
- To increase awareness of the impact of improved offender health and well being, for the individual, the wider community and on criminal justice system outcomes

objective

Strategies to achieve these objectives will include –

- Developing a communication strategy for key internal and external stakeholders
- Publishing peer reviewed journal articles and reports on research findings
- Presenting research findings at conferences and seminars
- Building linkages with key data agencies including the Bureau of Health Information in NSW Health
- Establishing a Research Consultative Advisory Council incorporating key stakeholders and/or relevant expertise

strategy

Monitoring our Performance

In the spirit of continuous quality improvement, we intend to monitor our performance as a Research Centre. This will be shaped by a research priority-setting committee established by the CHRCJ Board early in Year 1 to set targets such as those specified below.

Indicator	Example Targets*
Amount of research income awarded, with a breakdown by 1) competitive peer-reviewed sources; 2) NSW Health and other government agencies; 3) Justice Health internal sources	\$1 million/year (in total)
Number of senior research staff employed	At least 2 employed
Number of post-graduate research students supervised	At least 1 annually
Number of publications, with a breakdown by 1) peer-reviewed international journals 2) peer-reviewed national journals; 3) reports; 4) books and book chapters	5 peer-reviewed publications annually (at least two of which as first author)
Number of prizes, fellowships and awards from external sources	At least 1 application every two years
Number of collaborative research ventures with national and/or international partners	At least 3 annually
Number and examples of instances of translation of research findings into Justice Health policy and practice (including developing a monitoring system)	At least 3 annually
Number of times research findings used for applications for additional funding (and the proportion successful)	At least 2 annually
A system(s) of obtaining consumer feedback regarding quality and relevance of research undertaken is established	System developed and feedback secured annually
Number of presentations (including national and international conferences and local presentations to key stakeholders)	At least 2 conference presentations annually

Targets* for each indicator will be reviewed and set annually by the CHRCJ Board.

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