

# JUSTICE HEALTH

HEALTH SERVICES BROCHURE



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## INTRODUCTION

Justice Health provides health care in a complex environment to people in the adult correctional system, to those in courts and police cells, to juvenile detainees, to those within the NSW forensic mental health system and in the community. Even though our patients have come into contact with the criminal justice system, they are also members of the wider community and the vast majority spend only a short period of time in our care.

Justice Health fulfils a valuable role in improving the health status of this group while also minimising the health consequences of incarceration on individuals, their families and the general community. As unfortunate as an individual's interaction with the criminal justice system may be, it does provide unique opportunities to improve the health status of a group who on the whole experience poor health and generally have had minimal contact with health services in the community.

Since the mid 1970s when we were known as the Prison Medical Service, Justice Health has grown rapidly and expanded services both within and beyond the walls of NSW correctional facilities. The Service has incorporated projects that aim to divert those coming into contact with the criminal justice system and ensure continuity of care in the community after release, especially in the areas of mental health and drug dependence.

In all contexts, Justice Health must work closely with a variety of other organisations. Partnerships are therefore essential for the delivery of quality health services and the achievement of our values and objectives. Corrective Services NSW, Juvenile Justice, Area Health Services, Community Controlled Aboriginal Health Organisations, NSW Police, the Attorney General's Department, universities, community groups and advocacy groups are foremost amongst the organisations whose partnership we appreciate and seek to foster.

Our commitment to providing the safest and best possible health care to our patients remains our key focus. We are confident that through the efforts of our dedicated and professional staff we will continue to provide a service that leads the way in international best practice for those who come into contact with the NSW criminal justice system.

## THE HISTORY OF JUSTICE HEALTH



Bathurst Correctional Centre

Justice Health has its origins in the first European settlement established in Australia in 1788. The health of the penal colony was managed by the Colonial Medical Service, which remained responsible for the medical supervision of convicts until 1836. Subsequently the Prisons Act gave prison governors direct control over healthcare provided to inmates. This continued until 1968 when control of the Prison Medical Service was transferred to the NSW Department of Health.

In 1969 two nurses were employed to deliver healthcare to inmates at the Long Bay Correctional Complex. Gradually the Prison Medical Service grew to have a nursing presence at each of the correctional centres around NSW. In 1978 the Nagle Royal Commission made a recommendation that health services to inmates be provided by the NSW Health Department.

In the early 1990s, during a period of reform to healthcare delivery in correctional centres, the Prison Medical Service became the Corrections Health Service and in 1994, the Service was designated a statutory health corporation.

In 2003, Corrections Health Service took over the delivery of health services to juvenile detainees from Corrective Services NSW.

In 2004 the Service became known as Justice Health, in recognition of the work we do in the community and courts as well as in correctional centres.

In 2008 two new hospitals opened, the new Forensic Hospital, Malabar and the new Long Bay Hospital.



Convicts Arriving



Sick Convict



Parade in the 1970s

## MILESTONES

- 1994** The Corrections Health Service Board was convened
- 1997** The first Inmate Health Survey was published
- 1998** The Metropolitan Medical Transit Centre was established to accommodate patients meeting outpatient specialist care
- The Community and Court Liaison Service commenced, providing assessment to Courts for the diversion of mentally ill from gaol
- Justice Health commenced service delivery to NSW Police Cell complexes at four locations
- 2001** The Service achieved accreditation with the Australian Council on Healthcare Standards (ACHS)
- 2002** Approval was given to build the new Forensic and Long Bay Hospitals at Malabar
- The Correctional Centre Release Treatment Scheme was piloted in rural and metropolitan locations
- 2003** Justice Health assumed responsibility for the health care of all adolescent detainees in NSW
- The second Inmate Health Survey was published
- Young People in Custody Health Survey published
- Justice Health Mental Health Service gained accreditation from the ACHS Mental Health In-Depth Review
- Justice Health won a Gold Premier's Award for our Community and Court Liaison Service and the NSW Health Baxter Award in Continuity of Care for our Correctional Centre Release Treatment Program
- NSW Government approved funding to commence construction of the Forensic and Long Bay Hospitals at Malabar
- The Centre for Health Research in Criminal Justice was established
- 2004** The name of the service was changed from Corrections Health Service to Justice Health
- 2005** Adult Community Forensic Mental Health Service was established.
- Mental Health Screening Unit at the Silverwater Correctional Centre was opened
- 2006** The Adolescent Court and Community Team commenced operation
- Young People on Community Orders Health Survey published
- The Compulsory Drug Treatment Program commenced operation
- Construction of the Forensic and Long Bay Hospitals began
- 2007** Women's Mental Health Screening Unit at Silverwater Correctional Centre was opened
- Masters in Forensic Mental Health, a joint program with the University of New South Wales was officially launched
- Justice Health Strategic Plan – Towards 2010 was published
- Justice Health won a NSW Health Baxter Award in the category of Strengthen Primary Health and Continuing Care in the Community for the Juvenile Justice Release Treatment Scheme
- Justice Health successfully completed the Mental Health In-depth Review and received full Accreditation from ACHS
- The Connections Program commenced, which focused on improving release planning and linkage of patients on the Opioid Treatment Program back into the community
- 2008** Memorandums of Understanding were established with the Sexual Assault Services in 8 Area Health Services
- The first Aboriginal Health Worker positions were established as part of Health Centre staff profile at Wellington Correctional Centre
- The new Long Bay Hospital was opened with the smooth transition of staff and patients from the old Long Bay Hospital
- In November the new Forensic Hospital accepted its first patients from the Mental Health Rehabilitation Hostel
- 2009** Aboriginal History Awareness Training workshops for all Justice Health staff commenced
- High Risk Pregnancy In-Reach Clinics were established in partnership with Nepean Hospital Antenatal Services
- Aboriginal Chronic Care Program expanded from 8 to 16 sites, including two Adolescent locations.

## JUSTICE HEALTH PROFILE



Mid North Coast Correctional Centre, Kempsey, Administration Building

Justice Health cares for 30,950 (June 2009) inmates and detainees annually and is responsible for providing health services in over 80 locations in metropolitan and regional New South Wales.

Each year there are over 150,000 movements of adult inmates between correctional centres and court complexes.



Orana Juvenile Justice Centre

### ADULT FACILITIES

- 31 Correctional Centres
- 11 Periodic Detention Centres
- 10 Police Cell Complexes
- 21 Court Complexes
- The Forensic Hospital
- Long Bay Hospital
- Adult Drug Court Program
- Post Release Treatment Scheme
- State-wide Connections Program
- State-wide Community Forensic Mental Health Service
- State-wide Court Liaison Service
- Mental Health Screening Unit

### ADOLESCENT FACILITIES

- 8 Juvenile Justice Centres
- 1 Juvenile Correctional Centre
- Youth Drug and Alcohol Court
- Adolescent Community Integration Team
- Adolescent Court and Community Team
- 3 Children's Courts
- Juvenile Justice Post Release Treatment Scheme

## OUR PROFILE

### THE ADULT CRIMINAL JUSTICE SYSTEM

At the end of June 2009, Justice Health was providing a range of health services to a daily average of approximately 10,450 full-time adult inmates. This represents an annual increase of around 5.5% per annum over the last five years.

The window of opportunity for Justice Health to provide healthcare to individuals is usually brief, as only 10% of all receptions receive a sentence over six months. In addition, inmates rarely spend their entire sentence within the same correctional centre, with many movements annually between correctional centres and court complexes.

Inmates generally have a poor health status characterised by general neglect, substance abuse and mental illness. Justice Health fulfils a valuable role in improving the health status of this group while also minimising the health consequences of incarceration on individuals, their families and the general community.

### ADULT INMATE FACTS

**Demographics** (Source: 2008 DCS Inmate Census)

- Most inmates are male, with females only accounting for 7% of the population
- 20% of male inmates and 30% of female inmates are of Aboriginal and Torres Strait Islander Origin, compared with 2% of the general community in NSW
- The average age of inmates is 33 years for males and 31 years for females

### Health and socio-economic status

(Source: 2009 NSW Inmate Health Survey: Key Findings Report)

Description	Male inmates (%)	Females inmates (%)
Not finished year 10	49	39
Unemployed in the six months prior to incarceration	50	67
Had a parent in prison	18	17
History of juvenile detention	42	21
Previous incarcerated	64	46
Ever had asthma	26	40
Ever had heart problems	19	24
Current smokers	75	79
Drank alcohol at risky levels in the year before prison	62	38
Had ever used drugs	86	78
Had ever injected drugs	40	50
Hepatitis C positive	28	45
Ever had mental health treatment	47	54
Ever had depression	33	45
Ever attempted suicide	19	27
Head injury resulting in unconsciousness	52	35

### THE JUVENILE JUSTICE SYSTEM

Juvenile Justice manages young offenders by means of supervision within the community or within Juvenile Justice Centres under remand or control (sentenced) orders. Corrective Services NSW manages young offenders at the Juvenile Correctional Centre, Kariong.

Under the Children's (Criminal Proceedings) Act 1987 and associated legislation, young offenders are defined as aged between 10 and 18 years. Depending on the security and risk level, offenders can be transferred into the adult correctional system when they turn 18 years of age, though in special circumstances older offenders may remain in the care of Juvenile Justice until 21 years of age. Emphasis is given to diversion of young offenders from custody where appropriate.

The Justice Health Adolescent Court and Community Team assesses young people with the most complex psychiatric, behavioural and psychological problems who have had contact with the criminal justice system and reside within the community. Court liaison and diversion services are provided to the Children's Courts, as well as discharge planning for Juvenile Justice Centres and the Juvenile Correctional Centre. Post release, the Community Integration Team (CIT) offers continuum of care to recently released adolescents with serious mental health and drug and alcohol problems. The project provides a more holistic approach to post release health care of participants and their families. The CIT pilot project received an award in the Primary Health and Continuing Care in the Community Category at the 2007 NSW Health Awards.

Two landmark studies have been undertaken by Justice Health in partnership with academic institutions and other Government Agencies. These are the Young People in Custody Health Survey and Young People on Community Orders Health Survey. These studies of young offenders indicate an early engagement in risk behaviours affecting physical and mental health. The surveys show that these young people frequently come from severely disadvantaged backgrounds and are characterised by poor physical and mental health. They have limited educational attainment and risk taking behaviours are common. These young people experience higher levels of infectious disease, physical health problems and poorer mental health than in the community.

The revised Young People in Custody Health Survey will be completed in 2009.





## KEY FACTS ABOUT OUR YOUNG PEOPLE

### Young People in Custody Facts

(Source: 2003 Young People In Custody Health Survey)

Category	Percent
Identified as Aboriginal or Torres Strait Islander in detention	47.5
Ever been physically abused	42
Ever been sexually abused	10
Ever seriously considering suicide	20
Have parents with a history of imprisonment	43
Ever used cannabis	88
Ever used amphetamines	47
Have a severe range substance abuse disorder	26
Have a sexual transmitted disease	15
Have been suspended from school	89

## OUR SERVICES

Our range of services and levels of expertise are continuing to expand rapidly as we develop health interventions that allow us to improve the health and wellbeing of those affected by incarceration and detention. Health service provision has now evolved to extend far beyond the walls of the custodial setting. In addition to those in custody or detention, our consumers now include released individuals, the families of inmates and detainees, populations at high risk of incarceration and the mentally ill.

The endeavours of Justice Health are assisted by a comprehensive structure of support services, including Corporate Services, Finance, Workforce, Information Technology and Management, Executive Support and Planning and Governance Units.



## CLINICAL AND NURSING SERVICES

### SERVICE PROFILE

The Clinical and Nursing Services directorate is responsible for the planning, coordination and provision of clinical and nursing services to adult patients in correctional centres and police cells across NSW. The directorate has a matrix management structure that includes cooperative efforts between Clinical Streams and Clinical and Nursing Operations to set, implement and coordinate strategic directions.

The Clinical and Nursing Service directorate consists of the following service areas:

- Adult Clinical and Nursing Operations
- Primary Health
- Population Health
- Women's Health
- Aboriginal Health.

Each of these service streams is led by a Senior Clinical Manager who leads their team in service planning and determining clinical service requirements in each of the respective speciality areas.

The Executive Director Clinical and Nursing Services is responsible for the strategic direction of the directorate and leads the development and coordination of all clinical policies, practices and services including initiation of organisational wide strategies in clinical and nursing practices, education and research.

Health centres in adult correctional centres are typically composed of the following staff:

- Nursing Unit Manager who is overseen by a Cluster/Site Manager as appropriate
- Nursing staff (RN's, EN's, AIN's)
- Medical staff – including employed and visiting General Practitioners
- Aboriginal Health Workers
- Clerical staff.



The Pharmacy Department of Justice Health

### ADULT CLINICAL AND NURSING OPERATIONS

Adult Clinical and Nursing Operations has operational responsibility for the provision and coordination of clinical and nursing services and facilitates the development of best practice principles for clinical activities to ensure optimal clinical care with minimal risk. This includes benchmarking the delivery of services, auditing services provided and undertaking a range of quality improvement initiatives to ensure best practice. Adult Clinical and Nursing Operations also facilitates direct stakeholder input in both policy and strategic directions of the organisation and identifies organisational impacts.

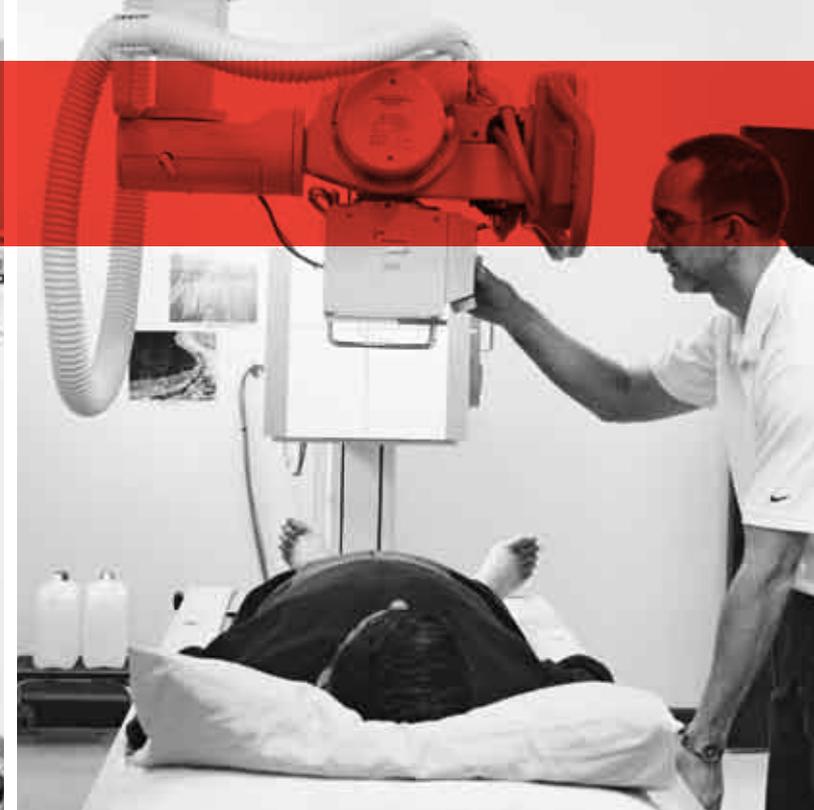
The Director Adult Clinical and Nursing Operations (DACNO) is a senior member of the Clinical and Nursing Services team and as such works closely with the Executive Director Clinical and Nursing Services in meeting the goals and strategic directions of the directorate. The DACNO assumes ultimate responsibility for all male adult facilities (including police cells and periodic detention centres) and reports directly to the Executive Director Clinical and Nursing Services. The DACNO has dual roles within Justice Health:

- operational management of all adult male correctional centres, periodic detention centres, police cells and court complexes where nursing staff are located and oversight of all clinical projects
- provision of nursing professional leadership and oversight of professional standards.

The primary roles and responsibilities of the DACNO include:

- provision of support to all Nurse Managers within the area of responsibility for operational issues including the promotion of quality, proper risk management strategies and sound fiscal management
- provision of support to the Executive Director Clinical and Nursing Services in planning, developing, coordinating and reviewing nursing services
- coordination of key projects in all aspects of service development and improvement
- coordination of responses to clinical incidents and operational service needs on collaboration with the Clinical Services Manager
- coordination and/or conducting investigations relating to professional and operational nursing issues
- oversight and interpretation of nursing resource utilisation and
- oversight and coordination of the State-wide After Hours Nurse Manager responsibilities.

The DACNO oversees the operations of the Rural and Remote and Metropolitan regions with the support of two senior Nurse Managers. The DACNO and the two Senior Nurse Managers play an active role in the development, implementation, monitoring and administration of the individual plans of the clinical streams ensuring compliance with identified and established targets. They are also responsible for the development and implementation of Cluster Business Activity Plans and reviewing performance against key performance indicators to improve the utilisation and effectiveness of resources.



## PRIMARY HEALTH

Primary Health staff deliver services in an ambulatory care setting within health centres located in correctional centres and periodic detention centres. The aim of primary health interventions is to identify and manage acute and chronic conditions through:

- The Reception Triage Process – a comprehensive risk assessment is conducted on all new inmates by Justice Health staff upon reception into one of the designated correctional reception centres: Metropolitan Remand and Reception Centre, Cessnock, Bathurst, Goulburn, Grafton, Mid North Coast, Wellington and Silverwater Women’s Correctional Centres
- Comprehensive Health and Assessment Plan (CHAP) – a plan for the continuing care of patients with identified need
- Referral to specialist medical services
- Implementation of health policy and programs in relation to special needs groups for example, the Framework for the Integrated Support and Management of Older People in the NSW Healthcare System 2004-2006 and the NSW Aboriginal Chronic Conditions Area Health Service Standards (2005).

Primary Health is responsible for setting the strategic direction of primary health services, the planning and coordination of primary health care, policy development, initiating service improvements, and the achievement of key performance indicators and targets.

Functions of Primary Health include:

- Risk assessment and risk management
- Emergency response
- Assessment, referral and treatment for common conditions
- Prevention, early detection and intervention
- Ongoing care for chronic conditions

Primary Health also provides the following special programs and support functions:

- Specific management for the frail aged
- Specific management for Aboriginal people with chronic conditions
- Dental services
- Pharmacy services
- Radiology services
- Medical appointments through the Medical Appointments Unit, including internal and external specialist medical services
- Physiotherapy service at Long Bay Correctional Complex

Primary Health provides healthcare services in most areas including rural, remote, and metropolitan correctional centres, and at police and court cell complexes. These services are provided by:

- General Practitioners
- Clinical Nurse Consultants
- Generalist Registered Nurses
- Dentists, Dental Assistants and Dental Therapists
- Radiographers and an Ultrasonographer
- Pharmacists
- Physiotherapists

### Current target population

Primary care is the health care a patient receives upon first contact with the health care system, before referral elsewhere. As such, there is no defined target population as in other Clinical Streams such as Population Health.

**JUSTICE HEALTH PROVIDES A WIDE RANGE OF GENERAL MEDICAL AND DIAGNOSTIC SERVICES**

## CLINICAL AND NURSING SERVICES



### POPULATION HEALTH

The Population Health clinical stream differs considerably to the functions of Public/Population Health Units within other Area Health Services. As well as the usual public and population health functions, the Population Health clinical stream has responsibility for the delivery of specialised clinical services across the state. These services reflect those of specialist HIV, hepatitis, sexual health and harm minimisation services in the general community. Clinical services encompass screening for and management of both blood-borne viruses and sexually transmissible infections, and the co-ordination of specialist Hepatitis and Immunology services. Clinical service provision also includes co-ordinating the management of clients who report sexual assault.

The Population Health Unit also provides services aligned with Public Health Units in the community and population-focused health improvement initiatives that are specific to the NSW correctional environment.

Service delivery is provided via a central team which currently includes a Service Director, and three Clinical Nurse Consultants with specific domains of practice in Sexual Health / Hepatitis C, Public Health and Infection Control respectively. This team provides clinical support to all staff. The team also includes a Public Health Surveillance Officer, Project Officer – Emergency Pandemic Planning and an Environmental Health Officer. Specialist medical services are provided by Visiting Medical Officers or through Memorandum of Understanding with Sydney Sexual Health Centre.

Across the state, a Public Health Network of designated nursing positions supports the provision of clinical services and acts as local resources for clinics regarding public health and population health clinical issues. This network also includes nurses working in single nurse clinics and all juvenile justice centres. The majority of the network has now completed the Population Health Clinical Accreditation Program (CAP) Screening and Management of Blood Borne Viruses in the Correctional Environment. This program was developed to ensure standardised best practice clinical skills and to acknowledge the specialist hybrid role that the network nurses perform – a combination of sexual health, public health, hepatitis and harm minimisation nursing that is unique to Justice Health. This program is accredited through the University of Technology (Sydney) and attracts six credit points towards a Master of Nursing.

The Population Health Unit manages all specialist hepatitis clinics, which are now available at a number of centres across the state. A Memorandum of Understanding with Sydney Sexual Health Service (South Eastern Sydney Illawarra Area Health Service) covers the provision of specialist HIV / Sexual Health services at on-site clinics and by the provision of ongoing clinical support and medical consultancy via telephone.



There is a close working relationship between Population Health, Corrective Services NSW and Juvenile Justice. Harm minimisation and health improvement education is shared between these agencies and provided to patients. Communicable diseases outbreaks are managed collaboratively and access to Sexual Health and Blood Borne Virus services are facilitated either locally or by transfer to the appropriate health service.

#### Current target population

- Patients with, or at risk of acquiring a communicable disease
- Patients with, or at risk of acquiring a blood borne virus
- Patients with, or at risk of acquiring a sexually transmitted infection
- Patients who allege being sexually assaulted
- Patients requiring immunisation
- Patients wanting to cease smoking or requiring information regarding smoking risks and cessation programs.

#### WOMEN'S HEALTH

The Women's Health clinical stream of Justice Health incorporates the activities of all Justice Health clinical programs, including Drug and Alcohol, Mental Health, Primary Health and Population Health to provide women in contact with the NSW criminal justice system comprehensive health services. The Women's Health clinical stream is responsible for the overall strategic planning for all women's health services state-wide, as well as the operational management of health services for the four major adult women's correctional centres.

There are approximately 650 adult females in fulltime custody. The women are accommodated at Silverwater Women's Correctional Centre, Emu Plains, Berrima and Dillwynia. Silverwater Women's Correctional Centre is the reception centre for women entering the criminal justice system. Approximately 13% of the total number of women are also accommodated in the predominately male correctional centres at Long Bay, Junee, Bathurst, Broken Hill, Grafton and Wellington. Women who are eligible for pre-release community programs may reside in Transitional Centres located at Parramatta and Emu Plains.

Generally women in custody are at a social disadvantage when compared to the general population. With this in mind the Women's Health clinical stream aims to target women when they come into custody and provide gender specific screening such as cervical and breast screening with referral to colposcopy or mammography as necessary.

The key issues highlighted in the NSW Health Women's Health Outcomes Framework include mental health, domestic violence, physical activity, smoking and pregnancy. These issues represent key focus areas for Justice Health.

Pregnant women are identified when they enter custody and a planned pathway is implemented with the aim of optimal care outcomes for mother and child. Antenatal and postnatal care is accessed through the Public Hospital system with all pregnant women attending the High Risk Pregnancy Clinics to ensure appropriate management. Pregnant women are also reviewed on a regular basis by medical practitioners and nursing clinicians to ensure continuity of care at the correctional centres.

Women's Health also provides Intensive Case Management that is dependent on the presenting condition i.e. acute or newly diagnosed condition requiring surgery or treatment for a period of time, a chronic disease process or aged / frail presentation.

An individualised management plan identifying requirements in terms of nursing follow up and review, medical officer review, external specialist (if applicable) and patient responsibilities is drafted in collaboration with the patient and other stakeholders. It will also identify that the external medical appointments need to be facilitated and this needs to be attended in consultation with Corrective Services NSW. There may be a need for other clinical streams to be involved in the care and this would be discussed in the plan i.e. Mental Health review.

## CLINICAL AND NURSING SERVICES

OUR DEDICATED AND PROFESSIONAL STAFF CONTINUE TO PROVIDE A SERVICE THAT LEADS THE WAY IN INTERNATIONAL BEST PRACTICE FOR THOSE COMING IN CONTACT WITH THE CRIMINAL JUSTICE SYSTEM.



## ABORIGINAL HEALTH

The principal responsibility of the Justice Health Aboriginal Health Unit is to establish, manage, monitor and evaluate existing and enhanced health service provision for Aboriginal people in custody both in NSW correctional centres and juvenile justice centres. To ensure that incarcerated Aboriginal people have access to the full range of services expected in the custodial environment, existing health care services are drawn from mainstream health centres and enhanced health care services and programs are provided through collaborative partnerships between Justice Health, Aboriginal Community Controlled Health Services (NSW and ACT) and Area Health Services.

Justice Health has a strong relationship with the Aboriginal Health and Medical Research Council of NSW (AH&MRC). The AH&MRC is the peak body for more than 60 Aboriginal Community Controlled Health Services (ACCHS) throughout the state. Presently, Justice Health has linkages with six ACCHS (Brewarrina, Bulgarr Ngaru, Durri, Western Sydney, Winnunga Nimmitjiah (ACT) and Tamworth) and three Area Health Services (Sydney South West, Hunter/New England, Sydney West) that provide enhanced health care services to eleven adult centres and one juvenile facility.

Frequency of services to custodial sites is dependent on factors including geographic location and the present organisational capacity of the partnering Aboriginal Community Controlled Health Service and Area Health Service to deliver services. Ensuring appropriate intervention and increasing access to care through firstly, dedicated health care services and secondly, with continuum of care planning assists in reducing the disparity in health between Aboriginal and non Aboriginal populations in the NSW adult and juvenile correctional environments. Justice Health is focussed on increasing its Aboriginal workforce within health centres with the successful recruitment of both female and male Aboriginal Health Workers at Wellington Correctional Centre.

The NSW Aboriginal Chronic Conditions Area Health Service Standards is being implemented by Justice Health for the prevention of chronic conditions in Aboriginal people who are cared for in the correctional environment. Justice Health is also involved in a state-wide responsive approach to addressing Aboriginal chronic care through contributing efforts towards the NSW Health Chronic Care for Aboriginal People Redesign Program, the 'Walgan Tilly Project'. Practical steps and solutions related to cultural sensitivity, communication and continuum of care linkages have been developed as a means to improving access for Aboriginal people with or at risk of chronic conditions in accessing mainstream health services whilst in custody.

### Current target population

- As at April 2008 there were 2016 Aboriginal people in full-time custody. This represents 20.9% of the total population
- 1823 (20.3% of total offender population) are Aboriginal males and 193 (28.1%) are Aboriginal females, in comparison to Aboriginal people representing just over 2% of the general community
- Over representation rate for Aboriginal people in full time custody is 16.5%
- Age specific imprisonment rates are predominantly 25-29 years
- There were 223 (51%) Aboriginal young people in Juvenile Justice Centres in March 2008 (male – 213, female – 10)
- 78% of Aboriginal males and 83% of Aboriginal females smoke compared to 27% of men and 20% of women in the general community.



The Aboriginal Health Unit of Justice Health

## ADOLESCENT HEALTH, DRUG & ALCOHOL AND MENTAL HEALTH

### SERVICE PROFILE

The Adolescent Health, Drug & Alcohol and Mental Health directorate is responsible for planning, coordination and setting the strategic direction in the areas of adolescent health, drug and alcohol and mental health. The directorate has strong working relationships with other Executive Directors of Justice Health, with senior staff of Juvenile Justice, Corrective Services NSW and with senior staff from other Area Health Services.

The directorate consists of the following service areas:

- Adolescent Health
- Drug & Alcohol
- Mental Health

Each of these service streams is led by a Service Director who leads in service planning and determining the service requirements in each of the respective speciality areas.

The Executive Director leads a team of highly skilled professionals with diverse but related portfolios. The team includes clinical leaders with the responsibility for developing best practice approaches in their areas of expertise to be implemented across the organisation as well as providing advice, through the Executive Director, to the Chief Executive on clinical issues.

The Executive Director is responsible for the consolidation and further development of the policy and planning activities in areas of portfolio responsibility. This policy and planning role includes services provided in the community and in custody. The directorate sets the strategic direction of Justice Health services in the areas of portfolio that are delivered in community settings.

The directorate also has the responsibility for developing and managing an integrated ambulatory, inpatient and community forensic mental health service for mentally ill adult offenders within NSW criminal justice system and ensuring effective provision of health services to young people in the juvenile justice centres and the juvenile correctional centre.

### ADOLESCENT HEALTH

Adolescent Health provides nursing, general practitioner, psychiatric, drug and alcohol, dental and optometry services to all juvenile justice centres and the juvenile correctional centre at Kariong. Adolescent Health clinicians are members of a multidisciplinary team which includes Juvenile Justice, Corrective Services NSW and the Department of Education and Training staff. Adolescent Health works closely with Justice Health clinical streams including Mental Health, Drug and Alcohol, Primary Health, Population Health, Women's Health and Aboriginal Health.

Adolescent Health has a health centre in each of the juvenile justice centres and the juvenile correctional centre and provides health services seven days a week. The registered nurses provide an initial risk assessment for all young people in custody within 24 hours of reception. This focuses on mental health, drug and alcohol and

sexual health. A further comprehensive health assessment is then conducted within five days of reception. Clinicians provide ongoing primary health care, including sexual health, immunisation, mental health and drug and alcohol services and health education on a variety of topics via individual counselling sessions, group work and structured health education modules. If a particular health care service is not available within a centre, care is sought from the local Area Health Service.

Adolescent Health provides services to the Youth Drug and Alcohol Court Program including physical, mental and drug and alcohol health assessments, working closely with Juvenile Justice, Department of Community Services and the Department of Education and Training.

Adolescent Health works in the community through the Court and Community team. This service is aimed at clients between the ages of 10 and 18 years who have come in contact or are at risk of contact with the criminal justice system and have an existing or emerging mental illness and/or drug and alcohol problems. The service comprises of four main components: community based assessments and linking to appropriate community services, court liaison and diversion, discharge planning for young people in custody and for some young people occupying mental health inpatient beds and case management of a small number of clients.

Adolescent Health also operates the Community Integration Team. This project involves assessing post release needs prior to release from custody and developing a post release care plan to assist with co-ordination between custodial care and community based health and welfare services. The aim of this program is to support young people to stay in the community for longer, support the re-integration back into their family network where appropriate and to enhance support to individuals with drug problems post release.

The population health model is used within Adolescent Health. This model features five major elements:

- Early detection and assessment
- Prompt and effective treatment equal to community standards
- Preventive measures
- Comprehensive health education
- Continuity of care planning – into the community.

### Current target population

The 2003 Young People in Custody Health Survey (YPiCHS) showed that 42% of young people in custody identified themselves as an Aboriginal or Torres Strait Islander person. This rate increased to 43.3% at the end of the 2004/05 financial year and to 45.2% at the end of the 2005/06 financial year. This represents a significant over representation compared with the community. Adolescent Health has an obligation to ensure that Aboriginal young people in custody have access to culturally sensitive and appropriate health care. Where this is not provided by the mainstream services available it is sought from other agencies such as local Aboriginal Community Controlled Health Services.

Adolescent Health provides healthcare to approximately 400 young people in juvenile justice centres and the juvenile correctional centre on any given day. In the community Adolescent Health provides a daily service to the young people in the Youth Drug and Alcohol Court Program. There are approximately 5,700 receptions a year. The breakdown of length of stay for young people in custody is as follows:

Length of stay in custody	Percentage %
Up to 1 week	65
1 week to 1 month	18
1 month to 6 months	14.5
Over 6 months	2.5
<b>Total</b>	<b>100</b>

## DRUG AND ALCOHOL

The Drug and Alcohol clinical stream operates on a medical model of intervention, which is different to other Area Health Services within NSW. This is largely due to the fact that Corrective Services NSW is funded to provide case management, health promotion and relapse prevention services within the correctional setting.

The Justice Health role primarily involves:

- risk assessment and management of intoxication and withdrawal from drugs and/or alcohol for all clients upon entry to the custodial system
- provision of Opioid Treatment Programs (OTP) such as Methadone; Naltrexone and Buprenorphine
- post release care arrangements for any client on an OTP to ensure continuity of care and
- referral to Drug and Alcohol services provided by Corrective Services NSW which includes individual and group counselling and life style education.

The Drug and Alcohol clinical stream works closely with community based Drug and Alcohol services providers and other relevant stakeholders to ensure continuity of care occurs for clients post release.

Drug and Alcohol service delivery is strategically developed and monitored via a central team which includes the following positions: Service Director, Clinical Director, three Clinical Nurse Consultants with specific roles in clinical support and education to all sites across the organisation and the state-wide post release care planning service known as the State-wide Connections Program which has staff based at each rural and metropolitan cluster of correctional centres across NSW.

In addition, there are specific projects that Justice Health provides significant clinical services to including the Adult Drug Court Program (ADCP) and the Compulsory Drug Treatment Program (CDTP).

The Drug and Alcohol clinical stream provides operational direction for all Justice Health sites on drug and alcohol clinical processes via a range of support methods. The Justice Health Drug and Alcohol Procedures Manual reflects international best practice and ensures that staff have access to appropriate documentation that reflects the expected clinical standard.

The Drug and Alcohol clinical stream provides telephone consultation and support via a specialist medical on call service provided to all Justice Health sites on a 24 hour basis.

### Adult Drug Court Program (ADCP)

The Adult Drug Court of New South Wales has been in operation since February 1999 and Justice Health has been involved since the inception of this innovative court diversion scheme. This scheme brings together the judiciary, Legal Aid, The Department of Public Prosecution, Probation and Parole and NSW Health with the aim of placing into treatment those drug dependent offenders who would otherwise be likely to serve a custodial sentence.

Justice Health provides integral services to those offenders who are found eligible to participate in the program. These services include: detoxification, assessment and treatment, liaison with Drug and Alcohol Services in Area Health Services, and assessment and referral to a variety of rehabilitation centres. There are specific Drug Court places at the Metropolitan Remand and Reception Centre, Parramatta and Silverwater Woman's Correctional Centres.

## OUR COMPREHENSIVE DRUG AND ALCOHOL SERVICE INCORPORATES A RANGE OF PHARMACOTHERAPY TREATMENTS

### The Compulsory Drug Treatment Program (CDTP)

The Compulsory Drug Treatment Program (CDTP) is an innovative interagency abstinence based program that commenced within the Parklea Correctional Centre in 2006.

This program targets up to 100 male offenders with long term drug dependence who have committed multiple offences over a long period to support their addiction. The program operates through the Drug Court based at Parramatta in NSW. The program is abstinence based.

For clients to be eligible for this court mandated program, the client must:

- have long term illicit drug dependency and have committed an offence which in the opinion of the Drug Court was related to dependency and the person's associated lifestyle
- have been convicted of at least two other offences in the past five years
- have been sentenced to full time imprisonment for their current offence and have at least 18 months to three years non parole left to serve at the time the Drug Court makes the order
- have not been convicted at any time of murder, manslaughter, sexual assault, any firearms offence, commercial drug trafficking or any offence in the opinion of the Drug Court that involves serious violence and
- have not a serious or violent mental illness that could prevent or restrict the person's active participation in the program.

## ADOLESCENT HEALTH, DRUG & ALCOHOL AND MENTAL HEALTH

Clients must be abstinent in order to move into Stage 2 – Semi Open Detention and Stage 3 – Community Custody. A participant who relapses in Stage 2 or Stage 3 will have their personal plan revised and/or regressed back to an earlier stage temporarily. If a participant continues to relapse the person's suitability for an abstinence-based program will need to be considered. In such cases the Drug Court may consider a revocation order and return the participant to mainstream custody.

### Current target population

Approximately 80% of clients entering adult custody in NSW have a drug problem. The custodial setting provides additional risk factors for transmission of blood-borne viruses and overdose.

All clients entering the correctional system with drug and alcohol issues have a risk assessment completed for any potential problems associated with withdrawal, intoxication and / or to ensure the ongoing provision of existing individual pharmacotherapy treatment.

### State-wide Connections Program

This program aims to improve continuity of care for recidivist clients of the correctional centres with drug and alcohol problems, who are being released to the community.

The Connections Program is a linkage model project that aims to link clients with relevant health and welfare service providers post release.

The project team:

- ensures that clients on Opioid Treatment Programs (OTP) have appropriate arrangements in place to continue treatment in the community post release and that their care is taken over by the external service provider in a timely manner
- ensure that where these clients have other ongoing health related needs, that these are identified and supported appropriately post release.

### FORENSIC MENTAL HEALTH SERVICES

The Forensic Mental Health Service provides comprehensive mental health care to offenders, young people and forensic patients in the NSW correctional system. This can occur in ambulatory, hospital, courts and community settings. All adult and juvenile offenders have a comprehensive assessment, including a mental health assessment, on reception into the correctional system. Referral to specialised mental health services such as specialist mental health nurses, psychiatrists and in-patient services is arranged through Justice Health Centres. A variety of models are used to provide mental health care, depending on demand, including: visiting psychiatrists, mental health nurses, videoconferencing (psychiatry) services and telephone advice to general health staff. A psychiatrist and a registrar are on-call (via telephone) for all correctional centres 24 hours per day. Mental health services are supplemented by a number of specialised units operated by Corrective Services NSW, including three acute crisis management units for offenders in the adult system.

### Inpatient Services

Long Bay Hospital provides for 40 high security mental health beds, which offer treatment and management for those with acute mental illness, in addition to some long stay rehabilitation beds.

### Mental Health Screening Units

A 40 bed adult male Mental Health Screening Unit at the Metropolitan Remand and Reception Centre (MRRC) and a 10 bed adult female Mental Health Screening Unit at Silverwater Women's Correctional Centre (SWCC), screens offenders identified with mental health problems. Where offenders are not appropriate for court diversion, these units provide treatment and a management plan to assist in determining custodial placement and in discharge planning to ensure continuity of care.

### Ambulatory Services

This service provides mental health care in correctional facilities around the state. There are currently 31 correctional facilities in NSW and Justice Health provides direct mental health services in 22 of these centres. Service provision is based on the population health model where varying levels of mental health services are provided in different correctional centres and patients are transferred within the system to ensure that their service needs are met.

Within this service there are two Mental Health Screening Units (MHSU), one male 40 bed unit and one female 10 bed unit.

All patients referred to mental health are comprehensively assessed and decisions made with regard to appropriate referral, treatment and placement. Those patients awaiting inpatient forensic mental health services are usually referred to a MHSU to enable closer observation. Within the correctional system Justice Health has in conjunction with Corrective Services NSW set up a number of Mental Health Accommodation Units (MHAU) which are staffed by specially trained Corrective Services NSW officers that work closely with Justice Health clinical staff. These units house patients with serious mental illness and aim to provide a safer environment for this vulnerable group. The combination of the Long Bay Hospital, MHSU and MHAU has enabled Justice Health to provide comprehensive mental health pathways of care for patients coming into custody and those correctional patients being admitted and discharged to the Forensic Hospital.

In addition to this, Justice Health offers Telehealth psychiatry service that increases availability of sessional and emergency psychiatric services to both rural and remote centres.

### State-wide Court Liaison Service

This service provides mentally ill offenders with court-based diversion options from the criminal justice system towards treatment in mental health facilities. There are Justice Health mental health practitioners in 21 courts across NSW.

In the 12 months to June 2009, 12,836 persons before the NSW Courts were screened for mental illness. Of these 2,050 had a comprehensive assessment and in 1,789 cases, a severe mental illness or disorder was identified. As a result 270 were diverted to hospital for treatment, 1,002 were diverted to community mental health care, and 517 were referred into custodial mental health services.

### Community Forensic Mental Health Service

This service provides specialist in-depth forensic mental health assessments, advice and reports to Area Health Services to assist in the ongoing safe management of forensic patients who are under 'conditional release' in the community.

The Community Forensic Mental Health Service (CFMHS) has expanded to provide in-depth psychiatric reports for 'high risk' mentally ill civil patients in the community. These patients are not subject to the same legal conditions as forensic patients and the CFMHS aims to assist Area Health Services to identify and manage the risk of this patient group for future violence and other offending.

The CFMHS also provides the Mental Health Review Tribunal (MHRT) with baseline assessment reports for forensic patients and regular six monthly reviews for these patients prior to their MHRT hearing.

A pilot program is currently running with Northern Sydney Central Coast Area Health Service in which clinicians from the CFMHS are allocated into the Area Health Service to work along side existing clinical teams to assist the teams to manage mentally ill individuals at high risk of re-offending and to provide specialist education to those clinical teams. The CFMHS also collaborates with Corrective Services NSW in the provision of treatment to sex offenders both in custody and the community.

### State-wide Clinical Risk Assessment and Management Training Program

This service was created in 2008 to deliver a state-wide training program for area mental health clinicians working with patients who may be at risk of violence towards others. To date, it has provided over 100 mental health clinicians with education and training in clinical risk assessment and management. The participants manual and training program sets out a framework for clinical risk assessment and management by focusing on information gathering, clinical aspects of risk assessment and formulating risk. It also describes how risk assessment and management can be incorporated into treatment programs and related care plans. Each trainee is offered three structured post training supervision sessions to consolidate skills within their clinical context to ensure that learning has been incorporated into clinical practice.



## SERVICE DEVELOPMENT



The Forensic Hospital, Malabar – A First for New South Wales

### THE FORENSIC HOSPITAL

The Forensic Hospital is a 135 bed stand-alone high security mental health facility located at Malabar, adjacent to the perimeter of the Long Bay Correctional Complex. It is the first of its kind in New South Wales. It was built and operates as a Public-Private Partnership (PPP). Justice Health provides the health care services and those aspects of security management that impact on patient clinical care. PPP Solutions Inc provides security systems, perimeter security and domestic maintenance services.

The Forensic Hospital admits forensic and correctional patients, as defined in the Mental Health (Forensic Provisions) Act 1990 and a limited number of civil patients from Area Health Service facilities who cannot be managed in conditions of lower security. The Forensic Hospital consists of four units and the Long Stay Unit. The Long Stay Unit provides rehabilitation services to forensic patients, some of whom will progress towards conditions of lower security. Within the acute units, there is provision for women and adolescents.

The Forensic Hospital works in close collaboration with the Justice Health Mental Health Screening Units at the Metropolitan Remand and Reception Centre (MRRC), Silverwater Women's Correctional Centre (SWCC), the Mental Health Unit of Long Bay Hospital and the forensic units at Cumberland and Morisset Hospitals to provide a range of care options for forensic patients.

### LONG BAY HOSPITAL

Like the Forensic Hospital the construction of the new Long Bay Hospital was also the result of a collaborative public private partnership arrangement between Justice Health, Corrective Services NSW and PPP Solutions Inc. The Hospital is an 85 bed facility located within the Long Bay Complex site operated by Corrective Services NSW with all health services provided by Justice Health. The hospital has three distinct units, the Mental Health Unit – 40 beds, the Medical Surgical Unit – 30 beds, and the Aged Care and Rehabilitation Unit – 15 beds.

The Mental Health Unit works in close collaboration with the Mental Health Screening Units at the MRRC, SWCC and the Forensic Hospital. The Mental Health Unit acts as a step-down unit for patients who require comprehensive assessment and who may require treatment at the Forensic Hospital.

### WHY DID WE BUILD THE NEW HOSPITALS?

The numbers of forensic patients and mentally ill inmates in NSW has been steadily increasing in recent years. The two new hospitals have dramatically increased our capacity to deliver best practice models and better clinical pathways for these patients.

The major benefits of the new hospitals are:

- more options for mentally ill inmates and young people involving better clinical pathways
- an increase in hospital bed numbers from 120 in 2008 to 220 in the two new hospitals
- patients with serious mental illness coming into contact with the criminal justice system will be cared for in a healthcare environment in line with international best practice.



## FORENSIC PATIENTS

A forensic patient is one who has been found not guilty by reason of mental illness, unfit to be tried because of mental illness or who is awaiting trial for a serious offence where mental illness is thought to be a factor. Inmates or young people already in custody who become mentally ill and require compulsory treatment may also be classified as forensic patients.

The principle focus of the new Forensic Hospital is on mentally ill patients within the criminal justice system, but it also has the capacity for mental health patients with challenging behaviour from across NSW whose management requires a high level of security and a high clinician to patient ratio. The hospital provides 135 beds that cater for both male and female patients and young people.

The mentally ill in the Forensic Hospital are cared for in a manner which integrates a static and dynamic security model for both patients and staff. The Forensic Hospital is surrounded by a perimeter wall equal to a maximum-security correctional centre and is equipped with the latest electronic security and monitoring equipment.



The Official Launch of The Forensic Hospital, Malabar

**GOVERNANCE UNIT**

The Justice Health Governance Unit incorporates a variety of corporate and clinical governance functions and provides support for frontline staff as well as high-level support for senior management.

Major functions of the Governance Unit include:

- client liaison and complaints management
- quality improvement including ongoing involvement in the accreditation cycle
- patient safety and clinical risk management
- legal advice and coordination
- support of Board activities
- coordination of internal audit
- coordination of medical and dental staff appointment processes.

Justice Health is a unique service in NSW making health care a part of the rehabilitative endeavour of the criminal justice system. Justice Health staff have the capacity to work in many specialist areas and in a variety of settings including juvenile justice centres, police cells, court complexes, correctional centres and the community. Our continually expanding service means that satisfying our staffing requirements is a key component of planning for sustainable growth.

There are many benefits in working for Justice Health:

- we are a growing and dynamic organisation
- there are many opportunities for advancement and secondment
- opportunities to conduct research
- support and access to education and specialist training for all staff
- an environmental allowance for clinical staff
- professional supervision for staff
- a safe and secure working environment.

At Justice Health it is important that our staff continue to develop new skills and opportunities during their employment. Justice Health dedicates approximately 2% of our total salaries budget towards staff development and training and actively supports this policy through granting study and conference leave. The development of core professional capabilities and opportunities for excellence are specific strategies to attract and retain excellent staff. The majority of our employees (approximately 73%) are nursing professionals and as a result Justice Health has in place many programs aimed at improving the skills and training of our nurses. This includes the provision of ongoing education from within the organisation or funding for training with external educational facilities. Justice Health maintains strong links with universities for medical, nursing and allied health undergraduate placements. Our Masters in Forensic Mental Health is a collaborative program between NSW Health, Justice Health and the UNSW School of Psychiatry to provide recognised specialist training on the clinical and legal aspects of Forensic Mental Health. We also have a graduate placement program to assist newly registered nurses in their first year of practice.

Contrary to many perceptions associated with working in a correctional setting, Justice Health is one of the few health services that can provide a secure working environment for all patient interactions. Custodial staff from Corrective Services NSW and Juvenile Justice are present at all times when staff are treating patients within correctional and juvenile justice centres and security is a key part of our orientation and training process.

OUR JUSTICE HEALTH HAS OVER 1,200 EMPLOYEES WORKING AT LOCATIONS ACROSS METROPOLITAN, REGIONAL AND REMOTE NEW SOUTH WALES



Masters in Forensic Mental Health Graduates – 2009

Justice Health has in recent times been the proud recipient of several awards that recognise the achievements and innovation of our staff. These awards have included:

- Our Adult Drug Court Program won the 2000 Baxter Quality Health Care Award in the Innovation Category
- Our Community and Court Liaison Service won the 2003 Gold Premier's Award in the Social Justice Category
- The Correctional Centre Release Treatment Scheme (CCRTS) won the 2003 NSW Health Baxter Award in the Continuity of Care Category, and the Juvenile Correctional Centre Release Treatment Scheme won the 2007 Award in the same category.
- Our work in providing challenging and relevant experiences, senior level support and mentoring to management trainees from the Australian College of Health Service Executives was recognised, with Justice Health being awarded the honour of Best Trainee Placement in NSW in 2004
- In 2004 our Inmate Access Survey Capturing Perceptions won the Baxter NSW Health Encouragement Award for its use of patient feedback to guide service planning
- Improving Access for Mental Health Services at the MRRC won the Minister's Award at the Baxter NSW Health Awards, 2005. Justice Health also won an Excellence Award at this event for improving our reception treatment protocols
- The Justice Health Aboriginal Vascular Health Project won the Innovation in Chronic Care Award at the 2007 NSW Aboriginal Health Awards
- The Juvenile Justice Centre Release Treatment Scheme won the Primary Health and Continuing Care in the Community Award at the 2007 NSW Health Awards
- Innovation in Chronic Care Award was awarded to the Aboriginal Chronic Care Program Murr-roo-ma Dhun-barn 'To Make Strong' at the 2009 Aboriginal Health Awards
- Gail May Award was awarded to the Aboriginal Health Education Officer at the 2009 Aboriginal Health Awards
- In 2009 Justice Health won the NSW Health Award for Best Health Service Performance – To Manage Services Well.



2009 Aboriginal Health Awards

Justice Health maintains a strong focus on research and in 2003 established the Centre for Health Research in Criminal Justice (CHRCJ). The CHRCJ is a division of Justice Health with a mission to inform policy and practice and improve health outcomes through research into the health and well being of people who come in contact with the criminal justice system.

The work of the CHRCJ has developed along four streams:

- the analysis and reporting of research data, such as the Inmate Health Survey, Young People in Custody and Young People on Community Orders Health Surveys
- increasing the research capacity of Justice Health through the encouragement of staff to engage in research
- the submission of grant applications for research projects
- nursing and medical teaching through undergraduate, graduate and postgraduate courses and placements.

The findings generated by the CHRCJ are invaluable to the Justice Health planning processes for future health service provision and have also supported numerous funding and advocacy initiatives of the organisation.

### RESEARCH PROJECTS

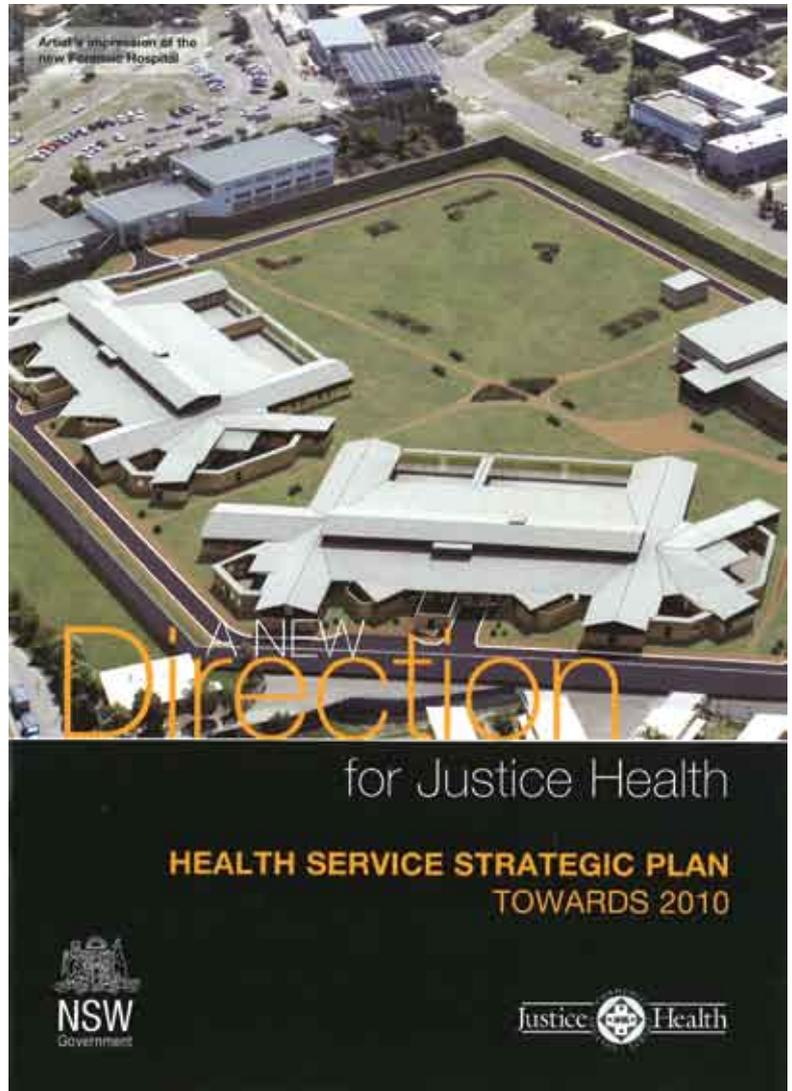
- 2009 Inmate Health Survey
- 2009 Young People in Custody Health Survey
- 2008 Young People in Custody Blood Borne Virus Survey
- 2007 National Blood Borne Virus Prison Entrants Survey
- Smoking Cessation Clinical Trial
- Sexual Health and Attitudes of Australian Prisoners (SHAAP)
- Hepatitis C Incidence and Transmission Study (HITS)
- Mental disorders among young people in custody or on community orders in NSW
- Impulsivity project using a Selective Serotonin Reuptake Inhibitor (SSRI)
- Evaluation of Court Liaison Service
- Mental Health Disorders and Cognitive Disabilities in the Criminal Justice System.

### KEY CHALLENGES FOR JUSTICE HEALTH

- Small 'window' of opportunity to improve health status of patients as only 10% of adults stay more than 6 months and only 2.5% of young people who come into contact with the criminal justice system stay for longer than 6 months
- Frequent movement of patients between correctional centres and courts
- Over representation of Aboriginal people compared to the general community
- Provision of care for an increasing number of patients over 45 years of age
- Emerging mental illness in young people who come into contact with the criminal justice system
- Increase in presentations in correctional facilities of amphetamine related withdrawal and intoxication
- Availability of sufficient numbers of appropriately skilled staff working where they are needed
- Increased focus on information management, performance reporting, and information security
- Increasing pressures on the cost of services
- Impact of Garling and Wood Inquiry Implementation.

## JUSTICE HEALTH STRATEGIC PLAN – TOWARDS 2010

The Justice Health Strategic Plan – Towards 2010 has been formulated to reflect the seven strategic directions of NSW Health and the goals of the NSW Government's State Plan. The plan will act as a guide to navigate Justice Health through the many challenges to be faced by the organisation in the coming years. The strategic plan will direct our service provision and growth over the coming years, allowing us to provide a world-class service that has a significant role in improving the health of the people of NSW. The successful carrying out of our duties is reliant upon partnerships with other agencies and the importance of these relationships have been reflected in the goals of the plan.



## NSW CORRECTIONAL AND JUVENILE JUSTICE CENTRES

The NSW Government continues to open new facilities to meet increasing demands. The new and upgraded facilities include the following:

<b>Cooma</b>	50 additional beds	Opened June 2007
<b>Wellington</b>	New Correctional Centre – 650 beds	Opened September 2007
<b>Tabulam</b>	New Transitional Centre – 70 beds	Opened May 2008
<b>Emu Plains</b>	New Juvenile Justice Centre	Opened March 2009
<b>Orana</b>	15 additional beds	July 2009
<b>South Coast</b>	New Correctional Centre – 600 beds	Due for completion 2010
<b>Cessnock</b>	250 additional beds	Due for completion 2011

# JUSTICE HEALTH – HEALTH CARE LOCATIONS MAP





**JUSTICE HEALTH**

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