

Justice Health & Forensic Mental Health Network  
feedback on the Full House: The growth of the inmate population NSW prepared by the Inspector of Custodial Services

| No | Recommendation   | Page    | JH&FMHN comments   | Timeframe for implementation (if applicable) |
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| 10 | The Inspector recommends that JH&FMHN prioritise staffing all positions in their approved establishment.                                   | Page 51 | <p><b>Recommendation 10</b> is supported by JH&amp;FMHN</p> <p>JH&amp;FMHN acknowledges that there are ongoing challenges in recruiting to certain specialities across the health sector. JH&amp;FMHN adheres to Ministry of Health requirements for the recruitment of staff to established positions.</p>  | Implemented                                  |
| 11 | The Inspector recommends that JH&FMHN ensure a standardised ratio of health centre staff to inmates across all like centres.               | Page 51 | <p><b>Recommendation 11</b> is supported by JH&amp;FMHN</p> <p>JH&amp;FMHN advises that staff to patient ratios have been developed and agreed between the Ministry of Health and the New South Wales Nursing and Midwives Association for inpatient units but, at present, no agreed ratios exist for community or custodial settings.</p> <p>JH&amp;FMHN and New South Wales Nursing and Midwives Association have undertaken a series of consultations and agreed on guidelines for staffing and patient numbers. These guidelines have now been implemented and guide current decision making around staffing in respect to patient numbers.</p> | Implemented                                  |
| 12 | The Inspector recommends that GEO and JH&FMHN ensure that the satellite health centres at Parklea CC are utilised to their full potential. | Page 51 | <p><b>Recommendation 12</b> is supported by JH&amp;FMHN</p> <p>JH&amp;FMHN reports that refurbishment work has commenced on the satellite health centre at Parklea Correctional Centre to ensure it is fit for purpose.</p>  | September 2015<br>Partially implemented      |

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|    |  |         | <p><u>September 2015 update</u>: There is a new floor covering to be attended on 1 September 2015 but the room can nevertheless be used. There is reluctance from some clinicians to utilise the satellites giving their reasons such as “safety concerns” or that the temperature in the satellite is too cold. The NUM is working with the Service Directors to try and allay concerns. Generally, the Satellites are being utilised much more than previously.</p>  |  |
| 14 | <p>The Inspector recommends that CSNSW and JH&amp;FMHN work together to implement processes which allow for the distribution of ‘over the counter’ medications by nurses when it is required.</p>              | Page 54 | <p><b>Recommendation 14</b> is supported by JH&amp;FMHN</p> <p>JH&amp;FMHN has implemented processes where patients may attend the health centre to request ‘over the counter’ medications without undergoing a face to face assessment in the health centre.</p> <p>Note that JH&amp;FMHN Medication Guidelines only permit nurses to initiate limited doses of Schedule 3 medications (also known as ‘over the counter’ medications). As current guidelines do not impact on patient care, JH&amp;FMHN will not review these guidelines.</p> | Implemented                                  |
| 15 | <p>The Inspector recommends that CSNSW and JH&amp;FMHN ensure that when an inmate is too sick to work, they are issued with a medical certificate as a matter of priority so their wages are not affected.</p> | Page 54 | <p><b>Recommendation 15</b> is supported in principle by JH&amp;FMHN</p> <p>‘Matter of priority’ needs to be negotiated with CSNSW, to enable that sick certificates are issued as part of the days clinical activities (within 24 hours so as not to affect patients wages) and not at the expense of patients with booked appointments and/or higher levels of acuity.</p> <p><u>September 2015 update</u>: Wellington CC has developed a robust</p>   | December 2015<br><u>Work in progress</u>     |

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|    |  |         | sick in cell protocol which may be able to be duplicated in other centres. Currently canvassing managers across the state to ascertain if a generic protocol would address issues in centres that are experiencing problems with the number of patients requesting sick in cell and the resulting disruption to primary health clinics.  |  |
| 16 | The Inspector recommends that JH&FMHN and CSNSW work together to allow the health centres to continue to operate during lunchtime lockdowns in order to maximise the number of inmates who can be treated. | Page 54 | <p><b>Recommendation 16</b> is supported by JH&amp;FMHN</p> <p>JH&amp;FMHN agree that this recommendation should be standard practice across all Correctional Centres and mandated by a Commissioner's memorandum or similar direction for custodial staff to be made available for lunchtime clinics to be held, as it is in some correctional centres.</p> <p>JH&amp;FMHN note that CSNSW is in consultation with relevant industrial associations regarding this recommendation.</p> <p><u>September 2015 Update:</u> CSNSW has advised that this recommendation is being explored as part of a structural review being undertaken at MSPC, MRRC and Goulburn. This will require industrial negotiation, with an expected timeframe of 2-5 years.</p> | 2-5 years as advised by CSNSW.<br>Work in progress |
| 17 | The Inspector recommends that GEO work with JH&FMHN to ensure inmates are returned to their cell within 60 minutes of arriving back at Parklea CC from court.  | Page 56 | <p><b>Recommendation 17</b> is supported in principle by JH&amp;FMHN</p> <p>A nurse is assigned to review all new transfers into the centre and all patients returning from court. This function is separate to the nurses assigned to undertake new reception health assessments and therefore 60 minutes is adequate. However,</p>   | Implemented  |

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|    |  |         | <p>this recommendation must not result in additional costs to JH&amp;FMHN and shift time must align with service demands.</p> <p><u>September 2015 Update:</u> CSNSW have advised that “the cause for these extended periods is custodial staff shortages due to unscheduled medical escorts occurring after hours (i.e. after 4.00pm). Governance and Continuous Improvement Branch will continue to monitor and report on the time frames for inmates returning to Parklea CC from Court.</p>  |  |
| 19 | The Inspector recommends that CSNSW and JH&FMHN work together to develop policies and procedures that improve inmates’ access to health services when there are staff shortages and lockdowns. | Page 57 | <p><b>Recommendation 19</b> is supported by JH&amp;FMHN</p> <p>JH&amp;FMHN has internal systems in place to direct activity when short staffed. The Network agrees to work with CSNSW at both a strategic and operational level in individual correctional centres to improve patient access to health centres.</p> <p>The Network is happy to work with CSNSW to support allocation of CSNSW officers to health centres when CSNSW are short staffed and/or during lock downs, which would further enhance patient access to health services.</p> <p><u>September 2015 Update:</u> CSNSW have advised that they are committed to ensuring procedures for essential services such as medical continue to be provided during lockdowns.</p> | Implemented                                  |
| 20 | The Inspector recommends that CSNSW and JH&FMHN work together to develop strategies to reduce the number of medical  | Page 58 | <p><b>Recommendation 20</b> is supported by JH&amp;FMHN</p> <p>JH&amp;FMHN agrees to work together with CSNSW to develop strategies to reduce the number of medical escorts, such as a</p>   | Implemented                                  |

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|    | escorts.       |      | <p>system of health classification related to specific health conditions, and restrictions on transfers to centres with lower staff to patient ratios. However, this would need to be achieved via minimal or cost-neutral measures for JH&amp;FMHN.</p> <p><b>September 2015 Update:</b> CSNSW has advised that strategies to reduce the number of medical escorts are being reviewed and monitored through a permanent agenda item on a regular CSNSW and JH&amp;FMHN Interagency meeting. This is in conjunction with JH&amp;FMHN medical bookings review. JH&amp;FMHN is advancing proposals to improve availability of outpatient services at Long Bay and is also committed to increase use of telemedicine.</p> |   |