

ISSUE: SERVICES FOR REMAND PRISONERS

KEY LINES:

- Management of this complex prisoner cohort is challenging for agencies particularly around service provision.
- Rehabilitation programs do not usually target this cohort and limited throughcare is available.
- A range of AOD targeted assessments and management are co-ordinated through Health Services.

BACKGROUND ISSUES:

- The growth in prison population, in particular the increase in numbers of those in prison on remand, is a significant issue for Corrective Services.
- This unconvicted legal status and short or unknown duration of the remand period makes it difficult for remand prisoners to access programs, work, education, training and other pro-social programs in prison.
- Remanded prisoners' eligibility, attendance and engagement in programs is problematic, particularly if the program is offence specific.

THROUGH-CARE SERVICES:

- Corrective Services offer programs that assist with services immediately on entry to the prison, such as Centrelink support, maintenance of family connections, financial literacy and debt managements and connection with community AOD services.
- In addition, the contracted parenting and family support service provider delivers ongoing parenting programs to remand prisoners.

CLINICAL PROGRAMS:

- Remand prisoners are not eligible for treatment assessments so are not eligible to participate in the Department's current clinical interventions for AOD.

MENTAL HEALTH AND COUNSELLING SERVICES:

- The Prison Counselling Service (PCS) provides clinical interventions to support prisoners withdrawing from substances if requested.
- Suicide and self-harm risk assessment and interventions are also provided if the prisoner is considered at risk.
- Counselling is available for prisoners with a history of substance abuse and poor coping skills affecting them in prison.

HEALTH SERVICES - WITHDRAWAL MANAGEMENT:

- Health Services undertake an initial assessment and referral from reception and accept self-referrals from offenders.
- Clinicians will follow a standard withdrawal regime prescribed by Medical Practitioners for those who enter the prison on remand and deemed to be at high risk of withdrawal.
- Opiate Substitution Therapy (OST) will be offered either as a continuation of Community Program for Opioid Pharmacotherapy (CPOP) or commencement on the program if a remand prisoner displays objective opiate withdrawals and accepts this form of treatment.
- In the absence of eligibility for clinical treatment programs, Health Services provide an AOD Group called PAST Brief Therapeutic Intervention – AOD (outline attached).