

Custodial Operations Policy and Procedures

6.3 Inmate health needs

Policy summary

Justice Health and Forensic Mental Health Network (JH&FMHN) in consultation with the governor of a correctional centre will provide and arrange all basic health care services and medical attention for inmates in NSW correctional centres.

JH&FMHN will ensure that the same standard of health care is provided to all inmates regardless of their cultural or linguistic background.

Inmates may also receive assistance for diabetes, hearing or vision impairment, dental issues, cosmetic surgery and tattoo removal, and complementary therapies.

Management of Correctional Centres Service Specifications

Service specifications	Decency and respect
	Health services
	Rehabilitation and reintegration
	Safety and security

Scope

This section applies to all correctional centres and other facilities administered by or on behalf of Corrective Services NSW (CSNSW).

It also applies to all CSNSW employees, and where relevant to other personnel such as JH&FMHN, contractors, subcontractors, and visitors.

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1 JH&FMHN

1.1 Policy

JH&FMHN in consultation with the Governor of a correctional centre must provide or arrange for inmates to be provided with:

- all basic health care services and medical attention for inmates in NSW correctional centres at no cost to the inmates
- clinical services within the scope of JH&FMHN policies and procedures, its model of care and qualifications of the healthcare providers.

The Governor of the correctional centre is responsible for ensuring that the health centre provides essential medical services to inmates within the correctional centre. Inmates are responsible for making their own medical appointments with JH&FMHN.

2 Culturally and linguistically diverse backgrounds

2.1 Policy

JH&FMHN staff must ensure that the same standard of health care is provided to all inmates irrespective of their cultural and linguistic background, and that any cultural factors relevant to diagnosis, assessment and management of a clinical condition are taken into account.

Inmates that identify as being from a non-English speaking background, speak a language other than English at home, and have difficulties communicating in English must be provided with adequate communication resources.

The NSW Health Care Interpreter Service (HCIS) will provide assistance to inmates that have difficulty in communicating in English in relation to health care matters. This service must be made available to inmates of all ethnic groups (refer to COPP section 11.1 Language services).

Health care interpreters are to be used by JH&FMHN staff in all health care situations where communication is essential, such as during:

- admission
- obtaining consent
- conducting assessments
- counselling
- explanation of a treatment including associated risks and side-effects, health education and discharge planning.

2.2 Procedures

	Procedure	Responsibility
1.	Request assistance from HCIS if it is identified that an inmate requires assistance due to difficulties in speaking or understanding English.	JH&FMHN staff
2.	 Record communication difficulties: on the Health Problem Notification Form (HPNF) on the cover of the inmate's Health Record as an alert in the JH&FMHN Patient Administration System (PAS) so that this information is transferred to Offender Integrated Management System (OIMS). 	JH&FMHN staff

3 Diabetic inmates

3.1 Policy

CSNSW works in consultation with the JH&FMHN to provide diabetic inmates with required health care facilities and services.

CSNSW ensures that each inmate is provided with meals three times a day at times consistent with community standards. All meals provided by Corrective Services Industries (CSI) are suitable for inmates requiring a diabetic diet.

As diabetes and specifically diabetes related unconsciousness is a life threatening condition, the JH&FMHN policy 1.135 *Special diets – clinically recommended* applies in conjunction with this policy.

3.2 FreeStyle Libre

The FreeStyle Libre is a thin, flexible and sterile sensor that is inserted under the skin and is used to monitor Blood Glucose Levels (BGL) for individuals with diabetes. This monitoring system is designed to be worn for up to 14 days.

JH&MFHN is responsible for applying and removing a FreeStyle Libre to inmates assessed as requiring one for the purpose of managing their diabetes. These systems must not be applied or removed by anyone other than JH&MFHN staff.

This system allows diabetic inmates to monitor their own BGLs without the need to attend the Health Centre on a daily basis, unless there is an abnormal result.

A FreeStyle Libre must be charged approximately every 7 days. Charging cords will be retained in the Health Centre and **must not** be issued to inmates. Inmates must be able to charge this as required in the Health Centre.

3.3 Procedures

	Procedure	Responsibility
1.	Advise the Governor of the correctional centre of the names of any inmates with a diabetic condition using the HPNF.	JH&FMHN staff
2.	 has access to appropriate glucometer/equipment (FreeStyle Libre System) to monitor their BGLs may attend the Health Centre for appropriate application/removal of FreeStyle Libre when required, and for charging of the system by JH&MFHN staff attend the health centre for the administration of insulin as prescribed and outlined in the HPNF by JH&MFHN staff is provided with adequate supplies through the buy-up system and the Health Centre (for medical supplies only). 	Governor
3.	Assess inmates for diabetes and: • provide or remove the FreeStyle Libre when required • provide appropriate glucometer to those that require one.	JH&MFHN staff
4.	Ensure that the inmate returns every 7 days, or when required, for their FreeStyle Libre to be charged in the Health Centre.	JH&MFHN staff

4 Asthmatic inmates

4.1 Policy

Asthma is a significant health condition that affects the airways. When experiencing asthma, airways become narrower and breathing feels short and tight. The symptoms of asthma can worsen rapidly, it is crucial to act quickly. *Asthma Awareness* training is mandatory for all correctional officers (up to and including the rank of SAS).

5 Other JH&FMHN services

5.1 Complementary therapies

Inmates may make a request to receive complementary therapies to the JH&FMHN Network Director of Nursing & Midwifery Services (NDNMS). The inmate will be responsible for payment for complementary therapies other than basic clinical, dental and optical services provided by JH&FMHN. Complementary therapies include:

- chiropractic
- iridology
- naturopathy
- homoeopathy
- aromatherapy.

5.2 Hearing aids

JH&FMHN must meet the cost of a first hearing aid for any inmate who:

- has a non-parole period of three years or more; or
- has been diagnosed as hearing impaired during the course of his/her trial where a hearing aid would be of assistance in the proceedings.

JH&FMHN must meet the cost of a replacement hearing aid when the old unit has exceeded its useful life or the hearing aid has been lost or damaged in reasonable circumstances.

Where it appears that the loss or damage to a hearing aid is intentional or the period of sentence is less than a non-parole period of three years, the inmate should be asked to cover part or all of the cost.

In conjunction with this policy, JH&FMHN policy 1.080 Clinical services provided by JH&FMHN applies.

5.3 Optometry

JH&FMHN provides basic non-prescription reading glasses (magnifying glasses) free of charge to inmates to provide short-term relief.

If the non-prescription reading glasses are insufficient or the inmate has a previous history, medical requirement or problem/trauma to their eye, they will be assessed by an optometrist for prescription requirements.

In conjunction with this policy, JH&FMHN policy 1.303 Optometry services applies.

5.4 Dental

JH&FMHN provide general dental services to inmates in line with Local Health Districts. The JH&FMHN policy 1.130 Dental services applies in conjunction to this policy.

5.5 Cosmetic surgery and tattoo removal

JH&FMHN clinical staff may only make recommendations for inmates to undergo cosmetic surgery or tattoo removal under specific and exceptional circumstances. The circumstances for the approval of these procedures are limited and it is expected that recommendations are thoroughly clinically assessed and relevant documentation provided (refer to COPP section 9.5 Requests for private medical practitioners).

In consultation with the Governor of a correctional centre, JH&FMHN may arrange for private health services for inmates where requested and at the inmate's expense (refer to COPP section 9.5 Requests for private medical practitioners).

This policy applies in conjunction with JH&FMHN policy 1.100 Plastic cosmetic surgery or plastic reconstructive and tattoo removal.

5.6 Artificial reproductive technology

Inmate applications for artificial reproductive technology procedures including:

- in-vitro fertilisation (IVF)
- artificial insemination (AI), or
- any other reproductive technological processes

are <u>not</u> to be approved. The application must be marked "not approved" and placed on the inmate's CMF.

If an inmate's partner or any other person or agency requests that an inmate participates in an IVF, AI or other reproductive technological processes, the Governor must respond in writing formally refusing the application as contrary to CSNSW policy. A copy of the request and any subsequent correspondence must be placed on the inmate's CMF.

5.7 Storage of sperm or ova

Only inmates who are to undergo a medical procedure that may adversely affect their fertility (e.g. chemotherapy) may make an application to store sperm or ova.

Such applications must be referred to JH&FMHN for advice. Upon receipt of advice from JH&FMHN, the Governor must refer all such applications to the Commissioner (via the respective Custodial Director, and the respective Assistant Commissioner, Custody) for determination. A copy of the application must be placed on the inmate's Case Management File (CMF).

6 Quick links

- Related COPP
- Forms and annexures
- Related documents

7 Definitions

ACC	Assistant Commissioner, Custody	
BGL	Blood Glucose Level	
COPP	Custodial Operations Policy and Procedures	
CSI	Corrective Services Industries	
CSNSW	Corrective Services NSW	
CD	Custodial Director	
HPNF	Health Problem Notification Form	
HCIS	NSW Health Care Interpreter Service	
JH&FMHN	Justice Health & Forensic Mental Health Network	
NDNMS	Network Director of Nursing & Midwifery Services	
OIMS	Offender Integrated Management System	
PAS	Patient Administration System	
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8 Document information

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Business centre:		Custodial Operations
Approver:		Kevin Corcoran
Date of effect:		16 December 2017
EDRMS container:		18/7155
Version Date		Reason for amendment
1.0		Initial publication (Replaces section 7.3.3.1, 7.3.3.2, 7.3.6, 7.3.8, 7.3.9, 7.3.10 of the superseded Operations Procedures Manual)
1.1	19/11/19	Inclusion of section 4.6 Storage of sperm or ova and 4.7 Artificial reproductive technology
1.2	12/03/20	General formatting update and improvements
1.3	03/06/20	Clarification in part 4.7 that <u>only</u> inmates who are to undergo a medical procedure that may adversely affect their fertility (e.g. chemotherapy) may make an application to store sperm or ova.
1.4	28/07/22	Asthma awareness inclusion
1.5	18/08/23	Updates in line with CSNSW restructure: deletion of reference to S&I renaming of Assistant Commissioner Custodial Corrections (ACCC) to Assistant Commissioner, Custody (ACC); and renaming of Director of Custodial Operations to Custodial Director (CD).