

Mental Health Strategy 2022-2027

Year 1 Action Plan 2022-2023



Principals and Directions

1. PROMOTE SAFETY

We will create a safe environment for our staff and the people in our custody and care, informed by human rights, by improving access to appropriate supports and services for people in our custody and care living with mental ill health.

2. STRENGTHEN PARTNERING AND COLLABORATION

We will ensure a coordinated and responsive approach to supporting people in our custody and care living with mental ill health by collaborating and partnering with other government and non-government agencies.

3. REDUCING CRIME

We will contribute to reducing recidivism by using a trauma-informed, culturally sensitive approach and addressing the individualised rehabilitation and reintegration needs of people in our custody and care living with mental ill health.

4. EMPOWER A PROFESSIONAL WORKFORCE

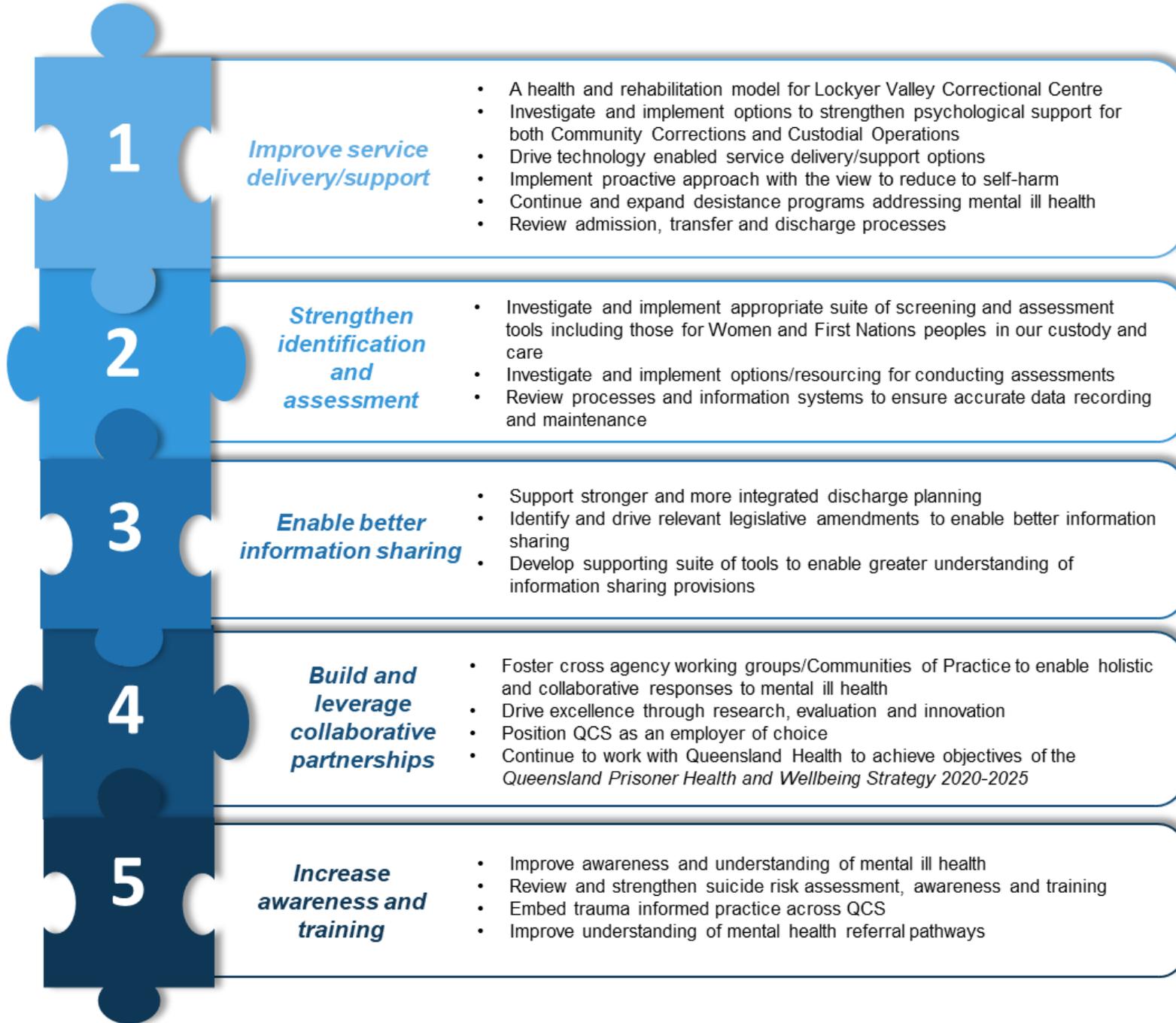
We will increase staff awareness and capability in understanding how mental ill health can affect individual behaviour including understanding cultural differences and supporting people in our custody and care living with mental ill health.

5. DRIVE INNOVATION

We will implement innovative and evidence-based practices to deliver a person-centred and culturally appropriate service to people in our custody and care living with mental ill health.



Priorities and Initiatives



Priority 1 – Improve Service Delivery and Support						
Key Initiatives	Enabling Actions	Year 1 Activity	Lead Area	Support Area	Comments	Success Measures
1.1 A health and rehabilitation model for Lockyer Valley Correctional Centre	1.1.1 Continue to design LVCC	<ul style="list-style-type: none"> Complete next phase of design and construction, consistent with agreed health and rehabilitation principles. 	LVCC PMO	QH		<ul style="list-style-type: none"> Reduction in recidivism Reduction in self-harm and suicide incidents Reduction in time spent under observations
	1.1.2 Consider appropriate workforce requirements to support health and rehabilitation model	<ul style="list-style-type: none"> Continue to scope workforce requirements for LVCC, including psychological and allied health staff. 	LVCC PMO	PCC		
1.2 Investigate and implement options to strengthen psychological support for both Community Corrections and Custodial Operations	1.2.1 Strengthen psychological support in Correctional Centres	<ul style="list-style-type: none"> Trial Service Delivery Support Officer positions at select sites to provide administrative and service delivery support to Psychology teams. 	PSU	Custodial Operations		
	1.2.2 Strengthen psychological support in Community Corrections	<ul style="list-style-type: none"> Investigate options for a state-wide community-based referral system for support services. 	ESG			
1.3 Drive technology enabled service delivery/support options	1.3.1 Continue development of in-cell technology model	<ul style="list-style-type: none"> Develop the model and business case for the implementation of in-cell technology. 	SFC, IIG	IASMCW		
	1.3.2 Enable technology options for staff	<ul style="list-style-type: none"> Explore technology options for Psychologist staff to reduce administrative burden. 	PSU	DSITC		
		<ul style="list-style-type: none"> Finalise the detailed project plan for the IOMS Evolve project to modernise the interface and allow for the use of mobile technology. 	DSITC			
1.3.3 Enable technology solutions for people under community supervision	<ul style="list-style-type: none"> Progress work to implement an online interface for those under community supervision to have digital access to their Order details and receive individualised support resources from Supervising Officers. 	Community Operations	DSITC			
1.4 Implement proactive approach with the view to reduce self-harm	1.4.1 Investigate in-cell use of assistive technology to support emotional regulation	<ul style="list-style-type: none"> Identify and amend relevant processes to facilitate the introduction of weighted blankets in Correctional Centres. 	CDC	PSU		
	1.4.2 Implement a procedure to empower custodial staff to proactively engage safely with prisoners displaying a higher level of risk (to others and themselves)	<ul style="list-style-type: none"> Implement the new Safer Engagement Strategy (SES) COPD. 	CDC			
1.5 Continue and expand desistance programs addressing mental ill health	1.5.1 Increase programs that support social and emotional wellbeing' for First Nations Peoples	<ul style="list-style-type: none"> Continue the roll-out of the Sisters for Change program at Townsville Correctional Centre and conduct cost benefit analysis. 	ORMS			
		<ul style="list-style-type: none"> Continue to roll-out the Indigenous Mental Health Intervention Program, expanding the social and emotional wellbeing model into Northern QLD. 	PMHS			
	1.5.2 Implement DBT adaptive program	<ul style="list-style-type: none"> Develop an implementation plan for the RUSH (Real Understanding of Self Help) program at identified trial sites. 	Specialist Operations			
1.6 Review admission, transfer and discharge processes	1.6.1 Conduct review of processes	<ul style="list-style-type: none"> Continue the external review that is underway as part of the Reintegration Renewal Project. 	ORMS			



Priority 2 – Strengthen identification and assessment of mental health						
Key Initiatives	Enabling Actions	Year 1 Activity	Lead Area	Support Area	Comments	Success Measures
2.1 Investigate and implement appropriate suite of screening and assessment tools including those for Women and First Nations people in our custody and care	2.1.1 Identify appropriate screening and assessment tools for mental health including those for Women and First Nations peoples	<ul style="list-style-type: none"> Conduct a jurisdictional scan of available assessment tools to identify best practice options for QCS. 	REG	PSU		<ul style="list-style-type: none"> Increased proportion of people in our custody and care who are screened as having a potential mental health concern receiving a subsequent comprehensive mental health assessment Adoption of appropriate screening and assessment tools for Women
2.2 Investigate and implement options/resourcing for conducting assessments	This initiative has been placed on hold for Year 1 and will be progressed in Year 2 following the outcome of Initiative 2.1.					<ul style="list-style-type: none"> Adoption of appropriate screening and assessment tools for First Nations Peoples
2.3 Review processes and information systems to ensure accurate data recording and maintenance	2.3.1 Standardise internal record keeping for the psychological file	<ul style="list-style-type: none"> Initiative to be progressed in Year 2 Action Plan. 				<ul style="list-style-type: none"> Proportion of people in our custody and care, assessed as having a mental health need, with an active plan
Priority 3 – Enable better information sharing						
Key Initiatives	Enabling Actions	Year 1 Activity	Lead Area	Support Area	Comments	Success Measures
3.1 Support stronger and more integrated discharge planning	3.1.1 Review discharge planning to identify opportunities to support short notice releases	<ul style="list-style-type: none"> Complete the review of discharge planning. 	ORMS			
3.2 Identify and drive relevant legislation amendments to enable better information sharing	3.2.1 Amend the Corrective Services Act 2006 to provide clear legislative authority for information sharing to a health practitioner.	<ul style="list-style-type: none"> The <i>Corrective Services (Emerging Technologies and Security) and Other Legislation Amendments Bill 2022</i> was introduced on 29 November 2022. The Bill includes amendments to section 341 of the <i>Corrective Services Act 2006</i> to provide clear legislative guidance to support the sharing of confidential information about a prisoner with a health practitioner, including proactively where appropriate. The Bill was passed on 2 June 2023. 	Legislation Group			<ul style="list-style-type: none"> Proportion of QCS staff trained in information sharing frameworks Proportion of MoUs that are current and up to date Proportion of those in custody identified with a mental health need released to community with a mental health discharge plan
3.3 Develop supporting suite of tools to enable greater understanding of information sharing provisions	3.3.1 Increase interagency information sharing	<ul style="list-style-type: none"> Continue to negotiate the Information Sharing Agreement (MoU) between QCS and QH. 	PSEG	QH		This initiative is on hold dependent on the outcome of 3.3.1
	3.3.2 Develop resources to support staff understanding of information sharing	<ul style="list-style-type: none"> Finalise and publish Operating Guidelines for QCS and QH Information Sharing Agreement (MoU) 				



Priority 4 – Build and leverage collaborative partnerships						
Key Initiatives	Enabling Actions	Year 1 Activity	Lead Area	Support Area	Comments	Success Measures
4.1 Foster cross agency working groups/Communities of Practice to enable holistic and collaborative responses to mental ill health	4.1.1 Establish cross agency working groups	<ul style="list-style-type: none"> Re-establish the Suicide Prevention Working Group in conjunction with QFMHS and QMHC 	PSU and CO	QFMHS	Murrighagun to be represented on Working Group	<ul style="list-style-type: none"> Number of newly established collaborative partnerships including cross agency working groups, non-government organisations and First Nations community Number of identified evidence-based best practices for people in our custody and care living with mental ill health implemented across QCS Number of student placements with Offender Development Team Number of identified local level initiatives evaluated for state-wide roll out
		<ul style="list-style-type: none"> Re-establish the interdepartmental PMHS Steering Committee 	QFMHS	QCS representatives from all three directorates as per ToR.		
		<ul style="list-style-type: none"> Continue representation on Justice Health Victoria's Interstate Community of Practice 	ESG			
4.2 Drive excellence through research, evaluation, and innovation	4.2.1 Conduct research into suicide deaths in custody and deaths in community under community supervision	<ul style="list-style-type: none"> Conduct research into individual and operational characteristics of suicide deaths in custody and disseminate findings 	REG			
		<ul style="list-style-type: none"> Conduct preliminary work regarding a research paper into deaths in community for those released from custody and/or under community supervision. 	REG			
4.3 Position QCS as an employer of choice	4.3.1 Improve attraction and retention of psychologists	<ul style="list-style-type: none"> Review and standardise approach to clinical supervision across all centres, including peer supervision for psychologists with general registration 	PSU	PCC/Custodial Ops/Financial Services		
		<ul style="list-style-type: none"> Leverage exit interview feedback to support future staffing retention strategies for psychologist workforce. 	PSU	PCC		
	<ul style="list-style-type: none"> Review recruitment attraction strategies to increase psychologist staff workforce 	PSU	PCC			
	4.3.2 Increase professional development offerings for clinical psychological services staff	<ul style="list-style-type: none"> Continue professional development activities with Psychologists, Counsellors, Clinical Practitioners and Senior Psychologists and explore opportunities to increase offerings and modes of delivery. 	PSU	Custodial Ops		
4.4 Continue to work with Queensland Health to achieve objectives of the Queensland Prisoner Health and Wellbeing Strategy 2020-2025	4.4.1 Implement PHW Strategy	<ul style="list-style-type: none"> Continue to participate in the Prisoner Health and Wellbeing Leadership Group to implement the agreed actions in the PHW Strategy 	CDC	ESG		
Priority 5 – Increase awareness and training						
Key Initiatives	Enabling Actions	Year 1 Activity	Lead Area	Support Area	Comments	Success Measures
5.1 Improve awareness and understanding of mental ill health	5.1.1. Staff trained in mental health awareness	<ul style="list-style-type: none"> Increased number of trainers to deliver Aboriginal Mental Health First Aid training courses to staff 	Murrighagun			<ul style="list-style-type: none"> Proportion of QCS staff who have completed mental health training Proportion of QCS staff who have completed the Aboriginal and Torres Strait Islander Mental Health First Aid training Proportion of QCS staff completed suicide/self-harm awareness training Proportion of custodial staff responsible for conducting risk assessments, trained in suicide risk assessment
		<ul style="list-style-type: none"> PMHS will deliver the Mental Health and Wellbeing training to QCS staff, and in consultation with QCSA and PSU will review and update the training package 	PMHS	QCSA and PSU		
5.2 Review and strengthen suicide risk assessment, awareness and training	5.2.1 Increase capability of staff involved in managing self harm and suicide risk	<ul style="list-style-type: none"> Roll out Risk Assessment Training (RAT) and After Hours At Risk Management training to all staff involved in the RAT process and After-Hours Supervisors 	PSU	Custodial Ops		
		<ul style="list-style-type: none"> Identify clinical training packages for clinical staff involved in risk assessments and seek approval for implementation 	PSU	PMHS/QCMHL/Custodial Ops		
5.3 Embed trauma informed practice across QCS	5.3.1 Implement trauma informed practice training	<ul style="list-style-type: none"> Finalise development of face-to-face trauma informed practice module to be implemented across Community Corrections in the 23/24 FY 	QCSA			
		<ul style="list-style-type: none"> Finalise development of mandatory online trauma informed practice and gender responsivity modules for Community Corrections 	QCSA			



		<ul style="list-style-type: none"> Finalise unique-role training for Practice Leaders including a module on vicarious trauma and burnout. 	QCSA			
5.4 Improve understanding of mental health referral pathways	5.4.1 Standardise engagement with PMHS and IMHIP to support consistent referrals	<ul style="list-style-type: none"> Review PMHS inter-agency meetings at centre locations to work towards standardisation and improvement of referral processes and information sharing 	PSU	QFMHS/PSEG		