



Department of Corrections Response and Action Plan to OPCAT Recommendations
from Otago Corrections Facility Inspection October 2020.

Criteria 1 – Treatment

Recommendations	Accept/Reject	Corrections' Response
<p>a. The Prison reduce the use of force, including the use of pepper spray.</p>	<p>Accept</p>	<p>Corrections accepts this recommendation on the basis that non-forceful alternatives for managing an incident are always preferable. The Use of Force (UoF) is a last resort, when de-escalation tactics have been unsuccessful, and the individual remains a threat to themselves or those around them. UoF can be necessary in response to dangerous and violent situations. Staff must be able to carry out their duties safely and protect themselves and others in a lawful manner. We acknowledge there is room for improvement in the skilful use of alternatives.</p> <p>Tactical Options training remains a priority for OCF to ensure staff build confidence in managing situations at the lowest possible level.</p> <p>The safer custody panel, and the reports it produces, is the main tool to monitor UoF incidents. Following each UoF incident, a review is initiated. The UoF review process requires documentation to be completed, detailing the circumstance of the UoF. This then goes through a sign off process, ensuring each UoF is reviewed in terms of its justification for use and any remedial action required. Where a UoF review finds alternative actions could have been used to de-escalate an incident, recommendations for refresher training in Tactical Options will be mandatory for the staff involved. Lessons from reviews will be shared with the wider team.</p> <p>We have invested significantly in training and tools to keep staff, and people in prison, safe. Corrections Officers receive regular training in tactical options which include de-escalation, communication, and disengagement techniques alongside training in the safe and appropriate UoF to support their work in the complex and challenging prison environment.</p>

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		<p>Corrections is currently undertaking work to strengthen the Corrections Regulations 2005 (Regulations) around the use of pepper spray. In October 2021, we received policy approval from Cabinet to amend the Regulations to explicitly define which pepper spray delivery mechanisms can be used. We have recently received feedback from your Office and the Human Rights Commission on the draft amendments. Your feedback has been noted in our Cabinet paper as requested. We intend to seek final Cabinet approval for the draft amendments in February 2022, with the new Regulations coming into force in March 2022.</p> <p>Statistics for use of pepper spray at OCF are relatively low for the size of the prison compared to other prisons. In 2020/21 up to 15 June 2021, there were 10 deployments of pepper spray and 14 instances where pepper spray was drawn but not deployed. In our response to the OCF OPCAT report in 2019, we reported 32 instances of pepper spray being drawn, which led to 17 instances of pepper spray being deployed in the 12 months prior to the report.</p>
<p>b. The Prison collect and analyse use of force data by demographic, including ethnicity, with a particular focus on the extent of use of force on Māori and Pacific peoples.</p>	<p>Accept</p>	<p>OCF has already established a new process to collect and analyse UoF data by demographic, including ethnicity, with a particular focus on the extent of use of force on Māori and Pacific peoples. The Safer Custody panel at OCF collect and discuss the information monthly to identify trends and opportunities for practice changes if indicated. Analysis of this data will be completed over the first half of 2022.</p> <p>We note that 37% of the prison population at OCF identify as Māori and 6% identify as Pacific people.</p> <p>Any example of Māori or Pacific overrepresentation in UoF incidents in prison needs to be considered within the context of overrepresentation in the Justice overall system. For example:</p>

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		<ul style="list-style-type: none"> • Māori and Pacific people constitute around 62% of the total prison population, but comprise 73% of people imprisoned for violent offences • 49% of Māori and 50% of Pacific people in prison are serving prison sentences for violent offences • Māori and Pacific people in prison constitute more than 85% of the prison population who are gang affiliated. Gang affiliation is a proven risk factor for in-prison violence as well as involvement in prison disorder incidents. <p>Over-representation in these areas may all contribute to any over-representation in UoF incidents in prison. As such, a response to reducing any Māori and Pacific over-representation in UoF needs to consider these broader issues. Violence in prisons and the community and gang affiliation are complex issues that Corrections cannot resolve or manage alone. Social and welfare support, employment, education, and support for families and communities all need to combine to address these issues.</p> <p>Corrections is committed to changing these statistics in collaboration with other agencies, iwi, providers and wider communities as part of our Hōkai Rangi strategy. We aim is to ensure every person who has an identified need - great or small - receives an appropriate intervention. Our interventions offer a pathway for people so they can enhance their wellbeing and move on to lead crime-free lives.</p> <p>We are working hard to reduce the need for UoF, reduce violence in prisons, reduce people's risk of re-offending and reduce Māori and Pacific over-representation in the prison system. We know there is still a lot of hard work ahead. Details of some of our ongoing work in this area are provided in our responses to 1a and 1h.</p>

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<p>c. Use of Force incidents are subject to timely and comprehensive review.</p>	<p>Accept</p>	<p>The Chief Custodial Officer's team is undertaking a review of the UoF review process. UoF incidents are always an area deserving of careful examination and reflection at our sites. This work is ongoing but has slowed slightly due to staff being redeployed to the COVID-19 response. Since the time of the preliminary report, the process for reviewing UoF incidents across all Corrections sites has been refined to include the following:</p> <ol style="list-style-type: none"> 1. Following all UoF debriefs, the unit Principal Corrections Officer or Security Principal Corrections Officer must ensure all UoF documentation is completed, along with the use of force check list. 2. All UoF documents must be reviewed by the Manager of the area where the incident has occurred. The Manager will ensure that UoF documentation has been completed to a high standard with all signoffs and comment sections completed. The Manager will submit the documentation to the Operations Support Manager before the close of business the following day. 3. The Operations Support Manager will register the UoF into the site database, attach the terms of reference, and assign a number. The review will then be allocated to an appropriate Principal Corrections Officer/Tier 5 Manager to complete within a week. 4. Once the review has been returned to the Operations Support Manager, they will complete their review within the week. The final review is then given to the Prison Director. 5. Prison Director reviews the Tier 5 recommendations and decides whether to accept/make extra recommendations/assign actions or request further investigation. <p>This five-step process will be completed within 15 working days of a UoF incident occurring.</p>

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d. The Use of force register and paperwork is accurate, completed promptly and in full, and reviewed in a timely manner.	Accept	Please see above response to recommendation 1.c.
e. Prisoners cannot be viewed, directly or via CCTV, while undressing, showering, or using the toilet, including in the Management Unit and ISU.	Partial Accept	<p>Corrections is legally required to observe certain individuals in prison (e.g. those who are identified as being at risk of harm). At this stage, we must therefore only partially accept this recommendation to the extent that it aligns with current legal obligations in the Corrections Regulations 2005. Work is still underway in this area, led by the Chief Custodial Officer's team in collaboration with other parts of Corrections including Information & Technology Security. It includes considering opportunities for improving CCTV usage and storage and the potential for implementing technology that pixilates CCTV footage.</p> <p>As we have previously acknowledged, balancing the dignity and privacy of prisoners in Intervention and Support Units (ISUs) with the preservation of life presents a unique challenge. There is other work being undertaken to enhance the privacy of people in prison, which is at a preliminary stage, including a review of the current regulatory framework for privacy screens. Initial decisions on any potential changes to the Regulations will be made in mid-2022.</p> <p>Corrections' custodial staff are supported to work in ways that are trauma-informed and people-centric to uphold the dignity of people in prison. Corrections' Learning and Development team have created 'Trauma Informed Care' workbooks to assist staff, this includes working with consideration of dignity and respect.</p>
f. Prisoners in the ISU are given the opportunity to contribute towards their management plan	Accept	OCF agrees that men in the ISU who are sufficiently stable will be included in the management plan process. This can also include attendance at weekly Multi-Disciplinary team (MDT) meetings. Where this is not possible

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<p>and attend the weekly multi-disciplinary meeting.</p>		<p>because the person is too unwell, OCF has developed a process for appointing an advocate to ensure that each person's viewpoint is put forward. The ISU PCO or lead custodial officer will inform the individual of the opportunity to attend the scheduled MDT. The men can choose to represent themselves or be represented by a staff member they trust. In these cases, the representative will prepare for the MDT with the relevant individual to ensure their perspective and needs are voiced. The management plan documents what engagement the men have had in creating their care plan. This new process was implemented in September 2021.</p> <p>As noted above, there are cases where men in the ISU have been deemed too unwell by mental health professionals to be engaged in their management plans. We will continue to work with DHBs to place severely unwell men in in-patient forensic health beds where they meet the legislative criteria within the Mental Health Act. For the men who remain in our management, the aim is to remove this barrier through appropriate treatment to ensure they can contribute to an MDT based approach at the earliest possible time.</p>
<p>g. Young people are accommodated in facilities that are suited to their needs.</p>	<p>Accept</p>	<p>For a brief time between November 2021 and January 2022, two 17-year olds were under our management in the weeks before they turned 18. Other than this timeframe, there have been no young people under the age of 18 in any Corrections facility since 12 January 2021. Following 1 July 2019 amendments to the Oranga Tamariki Act 1989, 17-year-olds are primarily dealt with in the Youth Justice jurisdiction. Some provisions remain which allow young people under 18 years of age to be escalated into Corrections' management under certain circumstances. Young people who are escalated into Corrections' management must be placed in a Corrections Youth Unit and, if first received from a Youth Justice Residence</p>

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		<p>at a site without a Youth Unit, must be transferred to a Youth Unit within 72 hours of reception.</p> <p>18- and 19-year-olds may also be placed in a Corrections Youth Unit if deemed suitable by the Assessment of Placement for Young Adults (APYA). The APYA is a holistic assessment used to identify the most suitable custodial placement for youth under 20 years of age. It explores how the youth can remain connected with whānau, be supported to access age-appropriate interventions and opportunities, and how their risk and/or vulnerability to others can be best managed through the appropriate custodial placement. While the initial placement for under 20-year-olds received at OCF is the site's ISU, the APYA is used to identify the most suitable placement at the earliest opportunity and reduce the amount of time spent in an ISU.</p> <p>OCF has identified the ISU as the initial placement option as it provides the most suitable environment for people under 20 years of age at this site, particularly upon entry when their needs are being assessed. While this is the initial placement, the APYA is used to identify the most suitable placement at the earliest opportunity to reduce the amount of time spent in the ISU. This unit has made some physical adaptations to be more responsive to youth, such as providing a television, access to the dayroom and a basketball hoop, and one on one gym sessions with an instructor. The staff in the unit are trained to work with people who present with more high and complex needs, which is common for this population. There is more consistency with the staff who work in the unit and good access to whānau.</p> <p>The alternative mainstream or management unit options at OCF risk exposing vulnerable under 20-year olds to harmful influences without adequate support and oversight. Given the very small numbers at any one</p>

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		<p>time (often only one, if any), it is not feasible to provide a dedicated unit for this population.</p> <p>We agree that the cameras in the cells for people under 20 years old in the ISU who are not at risk of self-harm or suicide must be addressed. We are committed to finding a solution to address this. We will first establish whether individual cameras can be isolated for discrete period while a person who is not at-risk resides in the cell. There is also further work underway, as noted in response to recommendation 1e.</p>
<p>h. ISU staff receive regular and comprehensive mental health awareness training.</p>	<p>Accept</p>	<p>Corrections carried out a workshop for ISU staff at OCF on 15 June 2021 as part of our three-year-programme of mental health training for staff. We have contracted Blueprint Learning to deliver `MH101' which is a package aimed at frontline staff who have limited or no experience of working with people experiencing mental distress. The workshop is tailored to the Corrections environment, with content based on everyday scenarios. Two workshops have been provided, one at OCF on 15 June 2021 and one at Invercargill Prison on 14 July 2021. The workshops were hosted by two facilitators, one of whom has lived experience of mental distress.</p> <p>Workshops will continue to be available to OCF and Invercargill Prison staff as the programme is rolled out.</p> <p>On 17 October 2021, a one-day training session on working with men with challenging and complex behaviours was organised for all ISU custodial staff in the Southern region.</p> <p>AOD101 (alcohol and other drugs) training, which aims to provide non-clinicians a basic understanding of additions-related challenges, is scheduled to be delivered in 2022.</p> <p>Suicide Prevention training will be provided at OCF in March 2022. This training has twice been rescheduled due to COVID-19 restrictions. This training will be delivered to our ISU and Management Unit staff. This</p>

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		<p>suicide prevention training is 'aimed at helping staff understand the importance of inviting people to live as opposed to only looking for suicidality in folk'.</p> <p>We are currently reviewing the packages of training that has been provided to date. This will inform our decisions regarding further training and how this training is best delivered. Ongoing training will continue to have a focus on suicide prevention, MH101, AOD101, working with challenging behaviour and understanding complex personality disorders.</p> <p>We are working to develop a clear national annual training plan, however, this is a long-term project. The Director Mental Health and Addictions is considering a proposal for future training which will inform our next steps for developing a more comprehensive training programme.</p>
<p>i. Time prisoners spend in the Management Unit is as short as possible, and subject to ongoing assessment and review.</p>	<p>Accept</p>	<p>In February 2021 the OCF Management Unit began to introduce several tools to help create a more effective pathway for the men housed in the unit to return to the mainstream environment.</p> <p>This includes a process for setting expectations for the 'sending' unit (the unit where the individual resided prior to the Management Unit). In addition to the mandatory documentation, an Initial Segregation Notice has been drawn up to re-enforce the sending unit's understanding of the reasons for segregation, set out expectations for that unit's ongoing involvement in the individual's management, and to mandate regular discussions on their progress to enable their return as soon as possible.</p> <p>Effective from early April 2021, men in the Management Unit have been interviewed daily by the Unit Principal Corrections Officer (or the Senior Corrections Officer where the Principal Corrections Officer is not on shift), to gauge any changes in behaviour and possibilities for progression back to a mainstream unit.</p>

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		<p>Multi-disciplinary team meetings are held weekly with the unit Principal Corrections Officer, Residential Manager, Health Services, Improving Mental Health Services, Forensic Mental Health Services, and Programmes and Case Managers to discuss the management and support plans of men in the unit. These plans specify coping and interaction skills unit staff need to support the men in this unit. A new Clinical Nurse Specialist is being recruited at OCF and will also begin attending these meetings, although their main focus will be on those in the ISU.</p> <p>For people with mental health related vulnerabilities, risks, and challenging behaviour, Improving Mental Health Clinicians provide input and advice as well as share documentary resources to help improve staff knowledge on complex behaviours.</p> <p>For people with more personality-driven challenging behaviours and risks, Corrections' psychologists can be contacted to assist and provide behavioural management to support staff.</p>
<p>j. Management plans for prisoners in the Management Unit include clear, specific and achievable steps towards progression out of the Management Unit.</p>	<p>Accept</p>	<p>Since February 2021, staff have been working on creating achievable, clear and specific management plans that can be quickly adapted to suit an individual's changing needs and risk. OCF staff are using case notes more consistently as a tool to record the men's behaviour and frame of mind, both positive and negative, to assist with assessment of progression and appropriate management.</p> <p>As soon as segregation is recommended, the approval is signed off by the Deputy Prison Director or Prison Director. The Senior Advisor to the Regional Commissioner then reviews and signs off the recommendation. For a Management Plan where a person is on directed segregation, this is reviewed after the first 14 days to determine if it is required to continue the segregation. Every time the segregation is reviewed, the management plan is also reviewed, following the same sign off process mentioned</p>

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		<p>above. This established process and levels of checking are measures in place to ensure the management plan meets the purpose of the segregation, including its adaptation to meet the changing needs of an individual.</p> <p>Multi-disciplinary team meetings are being held for those men whose segregation order is extended to identify a plan for progression back to their sending unit or to another unit that can best manage their needs. These meetings are intensive, making use of collected staff knowledge about the men and their unique needs and circumstances, and considering issues such as:</p> <ul style="list-style-type: none"> • Contact with whānau • Programmes • Education • Personal interests and motivators • Opportunities for engagement with staff • Physical and mental health needs • Goal planning <p>Transition Plans are created for men that have been in the Management Unit long term. These are drawn up in collaboration with the sending unit. The men will have the opportunity to be involved in their own plans in a meaningful and active manner, where appropriate and safe to do so, thereby gaining improved understanding and commitment before it is agreed to and signed.</p>
<p>k. Constructive and purposeful activities are increased for prisoners in the Management Unit.</p>	<p>Partially Accept</p>	<p>OCF acknowledges there are fewer constructive and purposeful activities available to men in the MU when compared with the mainstream units. There are barriers and challenges in providing access to activities in this environment due to the unique needs of the individuals residing there and</p>

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		<p>the variable duration of their time in the unit. Our focus is to assist men out of the Management Unit as quickly as possible.</p> <p><i>Access to visits and contact with friends and family</i></p> <p>Since the roll out of Hōkai Rangī, Ara Poutama Aotearoa strategy 2019-2024, greater connection with whānau and a focus on the greater wellbeing of the collective has become a strategic priority. In application, this means where possible placing people in regions close to whānau. Video calling for people in prison has rolled out nationwide. Corrections has implemented a process for people who are eligible to make video calls to family / whānau and friends who are approved visitors. In some cases, discretion to make video calls to people who are not currently approved visitors is also allowed. This has helped people stay connected even when visits have been suspended due to COVID-19 restrictions. The principles of video calling are to encourage contact, so far as is practicable within the resources available, and to the extent that this contact is consistent with the maintenance of safety and security requirements. Men in the Management Unit have access to this facility.</p> <p><i>Access to educational activities</i></p> <p>It is important to differentiate between what can be offered in voluntary segregation and managed or directed segregation. While on voluntary segregation, learners have access to education and training opportunities, self-directed learning can continue, and learners can be escorted to other learning opportunities at the discretion of custodial staff.</p> <p>All men on segregation have restricted mixing where safe to do so, this means they are not isolated and are able to mix with others and continue their rehabilitation programmes.</p>

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		<p>The following educational activities are currently available in addition to rehabilitation programmes for men in the Management Unit at OCF:</p> <ul style="list-style-type: none"> • Seasons for growth (programme for those experiencing change, loss or grief) • Self-directed learning • Learning Pathway conversations • Intensive Literacy and Numeracy <p><i>Access to constructive activities</i></p> <p>In recent months, our Programmes and Industries teams have worked to add to the constructive activities available men on long term directed protective custody within the Management Unit.</p> <p>One of the men on directed protective custody is now employed as the unit painter and is working with the Painting Instructor to learn new skills. The unit cell doors have been painted with blackboard paint, making a creative a space for men to draw and apply designs.</p> <p>Four of the men on directed protective custody that can mix attended the Seasons for Growth programme and all successfully graduated.</p> <p>Where this can be facilitated safely, men on directed protective custody are escorted to the programmes building to enable attendance at programmes.</p> <p><i>Access to offence-focused therapy</i></p> <p>Psychological Services provides assessment and individual offence-focused rehabilitative interventions to people we manage, who have been assessed as a high risk for reoffending, across the prison estate based on eligibility and position in the local service list (essentially a queue), regardless of</p>

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		<p>their unit of residence or segregation status. People in the Management Unit have the same access to individual psychological intervention as people in other units.</p> <p>Although group programmes are generally delivered in the low-medium or high-medium units, people residing in the Management Unit can also attend the group-based rehabilitative activities. This could occur, for example, where a person has been engaged in a medium or high intensity programme and then is subsequently placed on directed segregation and moved to the Management Unit. Every effort would be made to support that person to complete the programme, where custody staff could facilitate the person's movement between units to attend the programme for the time he is on the restricted regime.</p> <p>Restricted interactions amongst those residing in the Management Unit on directed segregation would not support the commencement of group-based, offence-focused interventions within the Management Unit. Likewise, due to the nature and purpose of voluntary segregation, group-based interventions in the Management Unit would be difficult. A number of those on voluntary segregation will likely be awaiting transfer to one of the sexual offending programmes which also operates like a queue and they will be offered a spot on the programme according to their place in the service list.</p> <p>Due to the above, we consider this recommendation has been met.</p>
<p>I. The Prison Director ensures that prisoners understand how to raise safety concerns, particularly those relating to double bunking, and such concerns are documented and responded to.</p>	<p>Accept</p>	<p>All men at OCF are provided with an induction book which sets out the complaints process. The site will review the induction book and identify opportunities to improve the information provided and make the contact numbers for external complaints agencies more prominent. The review will be completed by 31 March 2022. Acknowledging the comment in your report that this document is not always sufficiently explained, staff are</p>

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		<p>encouraged to talk individuals through induction material more thoroughly, ensure their understanding, and answer questions where needed. This is an ongoing focus of the Business Coach to educate and ensure staff are completing a robust induction. With more effective signposting, we expect that new arrivals at OCF will be have greater confidence in referring to the induction book to clarify processes when needed.</p> <p>In your report you note, 'The Prison Manager told my Inspectors the Prison has a specific panel for reviewing double-bunking assignments when prisoners feel unsafe, additional to the Shared Accommodation Cell Risk Assessment (SACRA) on induction. However, prisoners did not have wide awareness of this panel, nor how to engage with it.'</p> <p>OCF advise there has been a misunderstanding on this point. When a Health or Mental Health Clinician is considering NTDB (not to double bunk), a discussion must be held with the Residential Manager and Principal Corrections Officer of that unit to ensure they are fully informed and in agreement. In some cases, there can be alternate options available. Where a Mental Health Clinician or Nurse recommends not to double bunk based on a health matter, that recommendation is adhered to wherever possible.</p> <p>The Prison Director acknowledges that OCF could provide more information on how to raise safety concerns as well as emphasising there are various people on site who can address different concerns such as Improving Mental Health Clinicians, Health Services staff, Case Officers, Case Managers, Principal Corrections Officer, Residential Manager, or any staff member that the individual feels comfortable with. This will be considered as part of the induction book review.</p>

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		<p>Corrections currently have two brochures relating to the reception and induction process (including at risk and health assessments) with Translation Services at the Department of Internal Affairs. Information provided in these brochures is initially being translated into six languages, including Te Reo Māori. Once translation of the material is complete, we will trial the brochures at four sites to test that we have covered all the necessary information and have conveyed the information in a user-friendly way to the intended audience.</p> <p>As your office is aware, in line with the Minister of Corrections' letter of expectation, an independent review of Corrections' complaints process is underway. The review has involved input from a variety of different groups, including prison advocates, prisoners and Corrections Officers.</p>

Any other comments:

Criteria 2 – Reception into prison

Recommendations	Accept/ Partial/ Reject	Corrections' Response
<p>a. Prisoners being processed in the receiving office are afforded privacy, including when using the toilet. This is an amended repeat recommendation.</p>	<p>Accept</p>	<p>Please see above response to recommendation 1e.</p> <p>In relation to Risk Review assessments, OCF will explore the feasibility of one staff member doing all risk assessments in a separate office. If this is not feasible, we will consider infrastructure options through our capital planning process.</p>

Any other comments:

Criteria 3 – Decency, Dignity and Respect

Recommendations	Accept/ Partial/ Reject	Corrections' Response
<p>a. All yards are kept clean.</p>	<p>Accept</p>	<p>The importance of good cleaning practices is recognised by the site. The OCF Offender Employment team work hard to keep the yards and buildings in a clean and tidy state.</p> <p>However, there is room for improvement and a schedule has been put in place to ensure that all yards are cleaned regularly to the expected high standard. This will continue to be reviewed by Southern Region staff to ensure the process is working appropriately.</p>

Any other comments:

Criteria 4 – Health and wellbeing

Recommendations	Accept/ Partial/ Reject	Corrections' Response
<p>a. There is a separate health service-specific complaint system that protects patient confidentiality.</p>	<p>Accept</p>	<p>If men at OCF wish to make a health specific complaint, there is the option to use a Health Request Form (HRF) or a Prisoner Health Complaint Form (HS 2.4.4) and place this in the locked box reserved specifically for health requests. Complaints submitted in this way are collected by a registered nurse and handed to the Team Leader or the Health Centre Manager who will address the issue directly with the complainant. Details of the complaint and the response are documented in MedTech. Additionally, a complaint can be made verbally with any member of the health team.</p> <p>Corrections acknowledges that to achieve a confidential and effective complaints process for our Health Services further work is required (in terms of both the process and having a centralised mechanism to capture complaints and responses).</p> <p>There is ongoing work at a National level to revisit the complaints process both for custodial and health services potentially using the kiosks within each unit as a mechanism to submit a complaint. However, we accept that we need to consider how to improve the privacy of health complaints in the short term as well.</p> <p>The new Feedback Policy: Compliments, Complaints and Suggestions has been developed to replace the Patient Complaint's Policy. Posters were created to explain the process for health complaints. The forms for complaints, acknowledgement of complaints and communication regarding outcomes have been updated. The format of the forms now makes it clear to custody staff that a complaint is health related so they can provide it directly to the health team via the Health Request Form box. This box is locked and cleared by the health team daily. This ensures the privacy of the complaint and removes the risks of information being entered into IOMs.</p>

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		<p>A memorandum detailing this new policy was sent to both custodial and health staff, via the Prison Directors and the Health Centre Managers, on 14 December 2021. The new policy was also uploaded onto our intranet to replace the previous interim policy and a notice was included in Frontline, our staff newsletter, on 20 December 2021.</p> <p>A review of this process will be undertaken by end of June 2022. Until then, we will be able to track the number of forms received by this process and the number of PC.01s about health services. We would anticipate a decrease in PCO1s and an increase in the Health Form.</p> <p>As noted earlier in this response, an independent review of the Correction's Complaint System (including healthcare complaints) is underway.</p> <p>The newly created feedback policy detailed above aligns as much as possible with the changes suggested from the independent review.</p>
<p>b. The Reception Health Screening process protects prisoners' privacy.</p>	<p>Accept</p>	<p>Health and custodial staff work together to determine the level of risk presented by an individual at a Reception Health Screening. If the risk is deemed minimal then the door is closed, and a Corrections Officers will remain on standby. If there is uncertainty, the alternative option will be to keep the door ajar and have a Corrections Officer present/on standby.</p> <p>This recommendation reflects a wider infrastructure and design issue as, while we agree that a patient's right to privacy must be respected, an immediate and safe exit point for the registered nurse conducting the health screening is critical. Changes to room layout to ensure safety in the future will be factored into our capital planning process. We are always concerned for confidentiality, privacy and staff safety, and are working to strike a better balance between these two imperatives.</p> <p>The issue will be raised with Health, Safety and Wellbeing governance group as well as Health Senior Leadership Team for further consideration. In the</p>

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		<p>coming months, Southern Region staff will review the room and further discuss process suitability with health staff.</p> <p>Corrections Officers are mindful of the need to respect the privacy of the men while completing their Reception Health Screening - while remaining sufficiently close to respond to any security issue as required.</p>
<p>c. Processes for administering and changing medication comply with Corrections' Medicines Management Policy.</p>	<p>Accept</p>	<p>People in prison carry a high burden of physical and mental health conditions where medications are an important part of creating their treatment or management plans. The prison environment presents some unique challenges when prescribing medications. We agree it is important that prescribing practices within Health Services are safe and aligned to best practice.</p> <p>Corrections' Chief Medical Officer has recently released Health Services Safer Prescribing Guidelines - endorsed by the Royal College of General Practitioners. These guidelines support clinical decision-making regarding prescribing and also outline expectations for medical officers around face to face consultations when changing or stopping medications.</p> <p>A reminder will be sent to all Health Services staff (inclusive of medical officers, dentists and contracted providers) about adherence to our Medicines Management Policy.</p> <p>The National Audit Schedule includes a medication management focused audit. All sites are expected to complete the audit. Internal Clinical Event Reviews and Death in Custody reports will identify if compliance with medication management does not meet the required standard. Any recommendations related to medication management that come out of these reports and reviews are noted and followed up to ensure that the required standard has been met</p>

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		<p>We note the Medicine Management policy review occurred in October 2021. The reviewed policy will be finalised by 31 March 2022.</p> <p>Additionally, we have an e-medication project which will allow electronic recording of medications given, at the time they are given. This project is expected to be rolled out across Corrections sites by the end of 2022. This initiative will reduce error and ensure compliance with prescribed medications. Increased reporting ability will allow us to monitor trends and react quickly where there is a need to do so.</p>

Any other comments:

Criteria 5 – Protective Measures

I have not made recommendations in relation to this criteria.

Any other comments:

Criteria 6 – Purposeful activity and transition to the community

Recommendations	Accept/ Partial/ Reject	Corrections' Response
<p>a. Case Management Standards of Practice are met.</p>	<p>Accept</p>	<p>Our response to COVID-19 indicated that some Standards of Practice would be stopped during lock downs and times of limited access to people. During the past year, that operational response to the pandemic has impacted the outcomes displayed in our normal reporting cycle. Lower than normal outcomes were expected during the most recent outbreak of the Delta variant and may continue through Omicron.</p> <ul style="list-style-type: none"> Initial Contact: Initial contact occurs within 20 days of a person arriving to site. A population shift from another prison to OCF caused a larger than normal number of people to be seen. This, coupled with the inability to make contact with people due to COVID-19 isolation and management practices to prevent the spread of COVID-19 in prisons, has caused a reduction in the percentage of people receiving initial assessments within the agreed timeframes. OCF's year to date result for initial contact is 46.8%. This does not reflect the good work done by custodial officers at the prison to ensure people are supported until a case manager can make contact. OCF is currently recruiting case managers and remote working solutions are being put in place should access to people be limited again in the future due to COVID-19 restrictions. Planned Contact: The year to date result for planned contact is 90.2%, indicating that case managers are making contact with people when they say they will. Risk Assessment: Overall average for risk assessments is increasing with a year to date result of 85.2% and January recording a 100% result to date.

Recommendations	Accept/ Partial/ Reject	Corrections' Response
		<ul style="list-style-type: none"> • Offender Planning: We are making improvements to remand offender plans. These include a Release Plan for remandees, and a rehabilitation plan for convicted or sentenced individuals. These changes will be implemented following a planned IT update in April 2022. The update will include the new Release Plan page, designed to support all people receiving plans in a timely manner: <ul style="list-style-type: none"> • Parole Report: NZPB Report Timeliness has increased to 98.2% • Release Planning: The previously mentioned IT update will also impact release planning. The Release Plan will offer an opportunity to measure a Release Plan being completed in its entirety, rather than piecemeal. <p>The administration tasks for release planning are under review, as the system focuses on tasks rather than the quality of the plan. Corrections is committed to ensuring that standards of practice are reflective of good case management reintegration work and not simply administrative compliance. The National Office Practice Team is continuing to support OCF to work toward achieving Standards of Practice and quality practice overall.</p>

Any other comments: