Managing Chronic Disease in the Custodial Environment

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Justice Health & Forensic Mental Health Network

- The Network is a statutory health corporation constituted under the NSW Health Services Act 1997.

- Specialty Network – providing healthcare for people in touch with the Criminal Justice System

- The Network cares for over
  - 31,000 inmates and detainees annually
  - 11,000 inmates in custody at any given time
  - 150,000 movements through Correctional Centres in NSW annually
Health Care Locations

Over 90 locations across metropolitan, regional and remote NSW

Legend
- Correctional Centre
- Juvenile Justice Centre
- Court & Police Complex
- Court Liaison Service
- Drug Court Service
- Inpatient Unit
- Community Integration Team
- Adolescent Court & Community Team
- Sobering Up Centre
- Health Services provided by GEO Group Australia Pty Ltd
- Medium Secure Forensic Unit operated by Karrakal Unit, Hunter New England LHD
- Macquarie Unit, Western NSW LHD
- Busya Unit, Western Sydney LHD

NSW GOVERNMENT
Health
Justice Health & Forensic Mental Health Network
Patient Journey

- Arrested
- Police Cells
- Reception and Remand Centre
Reception Screening Assessment

Comprehensive screen which includes

- Basic personal and medical history
- Chronic diseases and risk factors for chronic disease
- Mental health screen
- Drug and alcohol
- Population health screen
- Women's health screen
^ Ever had a head injury leading to unconsciousness (J&FMHN Inmate Health Survey, 2009)
Total Respondents: Men n= 797 (of whom 259 were Aboriginal), women n= 199 (of whom 53 were Aboriginal)
**Kidney disease**

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>NSW adult custodial population (Aboriginal)^</td>
<td>6.4%</td>
</tr>
<tr>
<td>NSW adult custodial population (Non-Aboriginal)^</td>
<td>4.8%</td>
</tr>
<tr>
<td>Australian population (Men and Women)*</td>
<td>0.8%</td>
</tr>
</tbody>
</table>

^ Diagnosed kidney problem (J&FMHN Inmate Health Survey, 2009)
Total Respondents: Men n= 797 (of whom 259 were Aboriginal), women n= 199 (of whom 53 were Aboriginal)
* Diagnosed kidney disease ABS (2012c)
Heart disease

<table>
<thead>
<tr>
<th></th>
<th>Men</th>
<th>Women</th>
</tr>
</thead>
<tbody>
<tr>
<td>NSW custodial population (Aboriginal)^</td>
<td>19.3</td>
<td>30.2</td>
</tr>
<tr>
<td>NSW custodial population (Non-Aboriginal)^</td>
<td>18.6</td>
<td>21.9</td>
</tr>
<tr>
<td>Australian population*</td>
<td>5.1</td>
<td>4.3</td>
</tr>
</tbody>
</table>

^ Heart problems (J&FMHN Inmate Health Survey, 2009)
Total Respondents: Men n= 797 (of whom 259 were Aboriginal), Women n= 199 (of whom 53 were Aboriginal)
Asthma

<table>
<thead>
<tr>
<th></th>
<th>NSW custodial population^</th>
<th>Australian population*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men</td>
<td>26.3%</td>
<td>9.5%</td>
</tr>
<tr>
<td>Women</td>
<td>40.4%</td>
<td>10.9%</td>
</tr>
</tbody>
</table>

^ J&FMHN Inmate Health Survey, 2009
Total Respondents: Men n= 797 (of whom 259 were Aboriginal), Women n= 199 (of whom 53 were Aboriginal)
* ABS, 2012c
Obesity

^ BMI of 25+ (overweight or obese). J&FMHN Inmate Health Survey, 2009
* ABS, 2012c

Total Respondents: Men n= 797 (of whom 259 were Aboriginal), Women n= 199 (of whom 53 were Aboriginal)
Ever attempted suicide

<table>
<thead>
<tr>
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<th>Women</th>
</tr>
</thead>
<tbody>
<tr>
<td>NSW custodial population (Aboriginal)^</td>
<td>22.7%</td>
<td>37.3%</td>
</tr>
<tr>
<td>NSW custodial population (Non-Aboriginal)^</td>
<td>17.3%</td>
<td>23.6%</td>
</tr>
<tr>
<td>Australian population*</td>
<td>2.1%</td>
<td>4.4%</td>
</tr>
</tbody>
</table>

^ Ever attempted suicide (J&FMHN Inmate Health Survey, 2009)
Total Respondents: Men n= 797 (of whom 259 were Aboriginal), women n= 199 (of whom 53 were Aboriginal)
* Australian adults who have ever attempted suicide (Johnston et al, 2009)
Mental Health - inpatient admission

^ Ever admitted to a psychiatric unit or ward (J&FMHN Inmate Health Survey, 2009)
Men n= 797 (of whom 259 were Aboriginal), women n= 199 (of whom 53 were Aboriginal)
* Admitted to specialist mental health care or general hospital unit with a psychiatric diagnosis (Sara, 2012)
Reception Management

- Drug and alcohol – withdrawals/ detox
- Mental health – self harm/ suicide risk
- Acute physical health – fractures/ assaults
- Chronic Disease – medications and ROI
- Referrals made to specialty streams for ongoing management
Chronic Disease Screen

- Primary health focused and completed for
  - Patients with confirmed chronic condition
  - All Aboriginal and Torres Strait Islander patients over 45
  - All non-Aboriginal and Torres Strait Islander patients over 55
Chronic Disease Screen (cont’d)

- Physical assessment
- Screening focused on
  - Cardiovascular disease
  - Respiratory disease
  - Kidney disease
  - Endocrine disease
  - Neurological disorders
- Multidisciplinary care plan developed
Care Navigation Support Program

- JH&FMHN equivalent to Connecting Care Program
- Commenced 2010
- Enhance existing chronic disease management services, through the provision of care navigators to case manage patients with chronic disease and/or complex health needs
CNSP – Clinical Redesign Project

- Simplify the enrolment process
- Revise CNSP referral instructions and provide referral refresher training
- Develop and launch a CNSP enrolment guide advising the new changes
- Develop and introduce a measure to predict risk of hospitalisation – Risk stratification guide
# Risk Stratification Guide

<table>
<thead>
<tr>
<th>Assign CNSP Severe Alert if patient has:</th>
<th>Assign CNSP Chronic Alert if patient has:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Acute Symptoms / Unstable Condition</td>
<td>• Chronic disease that is stable/controlled</td>
</tr>
<tr>
<td>• Urgent Treatment Plan Required</td>
<td>• Patient understands how to self-manage</td>
</tr>
<tr>
<td>• Terminal Illness</td>
<td>chronic disease</td>
</tr>
<tr>
<td>• Multiple Co-morbidities</td>
<td>• Observations within normal range</td>
</tr>
<tr>
<td>• Aged and Frail / Unable to Manage ADL’s</td>
<td>• Able to manage ADL’s</td>
</tr>
<tr>
<td>• Hospitalisation in the last 6 months</td>
<td>• Childhood disease but stable</td>
</tr>
<tr>
<td>• Complex Health Needs</td>
<td></td>
</tr>
<tr>
<td>• Any Chronic Disease that is not controlled</td>
<td></td>
</tr>
</tbody>
</table>
Alignment with Whole of Health Program

Working together to provide the right healthcare for all communities in NSW everyday

– JH&FMHN unique opportunity to provide healthcare for a marginalised population

Improving partnerships and connectivity to create a seamless care experience

– Engaging stakeholders and forming partnerships is one of JH&FMHN strategic directions
– Integral to the continuity of quality care provided to this group of patients

NSW Government
Justice Health & Forensic Mental Health Network
Questions?
Section title

- This slide separates each Section.
- It is based on the TITLE MASTER.
- To insert a NEW TITLE SLIDE – choose Insert in the Menu - click New Slide – TITLE SLIDE is the first layout across.
Main body title

- This is the Main Body Slide.
- This slide is based on the SLIDE MASTER.
- To TURN OFF THE BULLETS - click on the Bullet Button in the Menu.
- To insert a NEW BODY SLIDE - choose Insert in the Menu - click New Slide – BODY SLIDE is the second layout across.