


Disability Services

Transitioning from Correctional Facilities.

Altering States: Reforming the System.


26 June 2009



Disability Services

Target Group

- Adult women and men who:
 - have a moderate to severe mental illness; and
 - are being released from a correctional facility into the community.
- Individuals will have agreed to work towards achieving their goals.
- Referral is via the Prison Mental Health Service.

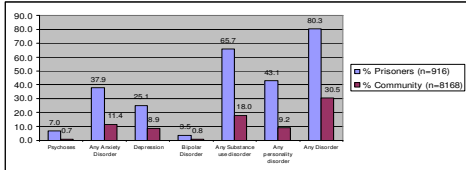


Disability Services

Why Transition from Correctional Facility Program?


High rate of mental illness in correctional facilities
Over a 12 month period, 74% of the NSW inmates, had a psychiatric disorder compared with 22% in the general community.

Butler and Allnutt (2003)



Disorder	% Prisoners (n=916)	% Community (n=8168)
Psychosis	7.0	2.7
Any Anxiety Disorder	37.9	11.4
Depression	26.1	9.9
Bipolar Disorder	8.9	2.8
Any Substance Use Disorder	55.7	18.0
Any Personality Disorder	43.1	9.2
Any Disorder	80.3	30.6


Mental Disorders in Australian Prisoners v Community (Butler et al, 2006)



Disability Services

Why Transition from Correctional Facility Program?


- **The mortality rates of individuals discharged from correctional facilities.**
 - heightened risk of suicide and overdose death - Karimina et al, 2007
 - heightened risk Death from all causes - White and Whiteford, 2006
- **Current gaps in non-clinical mental health service delivery between prison and the community.**



Disability Services

How the program operates.

- Pre-Release Planning and Support
- Post-Release Support




Disability Services

Aim of the program

To deliver a non-clinical service that supports eligible people to:

- Access appropriate accommodation/housing
- connect with the local mental health service and GP
- connection with alcohol and drug treatment
- link with employment agencies and work opportunities
- attend court hearings and meet parole requirements
- link to longer term formal and informal supports in the community
- improve their quality of life
- enhance their mental health and recovery.



Disability Services

Anticipated Outcomes and Benefits

- supports provided to individuals to integrate back into the community resulting in a reduced rate of recidivism.
- expanded opportunities for individuals to improve their mental health.
- reinforcement of the five common elements of recovery: hope, personal responsibility, active sense of self, connectedness and discovery
- promotion of recovery in local community
- reduction of stigma and discrimination

Queensland Government
Department of Communities

Disability Services

Current Locations


- South East Queensland
- Cairns
- Townsville

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Transition Support Service

- RFQ is part of an international movement founded in 1959 in Richmond, Surrey, England
- Established in Brisbane in 1974, RFQ is a specialist provider of community rehabilitation and support services for people who have moderate to severe mental illness
- RFQ is an independent non-profit company with cooperative links with other richmond fellowships in Australia and the wider Asia Pacific region
- RFQ successfully tendered to Queensland Health in 2006 to provide transition support for people leaving correctional facilities in South East Queensland (Gympie to the NSW border) and received funding in 2007
- RFQ's Transition Support Service has been operational for 2 years



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Service Structure

- RFQ's Transition Support Service office based in Woolloongabba
- Men's and women's programs under the supervision of one Coordinator
- 6 Support Worker positions
 - women's service 2 staff members
 - men's service 4 staff members
- Primary Worker Model
- Arthur Gorie, Brisbane Woman's, Woodford, Wolston, Borallon and Brisbane Correctional Centres


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Service Model

- Queensland Health's Prison Mental Health Service is the single point of referral
- Designed to engage the person one month prior to release date
- Support and follow up in the community for up to six (6) months post release or until the person declines the service

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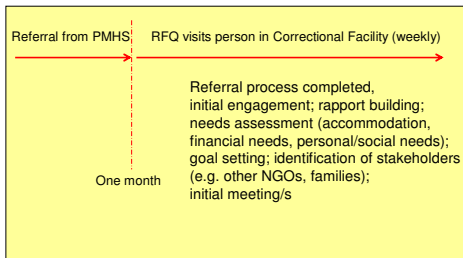
Eligibility

- People referred by Prison Mental Health Service (PMHS), and
- Have a mental illness and are leaving a correctional facility in South East Queensland and are:
 - Receiving Transition Care Coordination from PMHS
 - Willing to participate in the TSS program

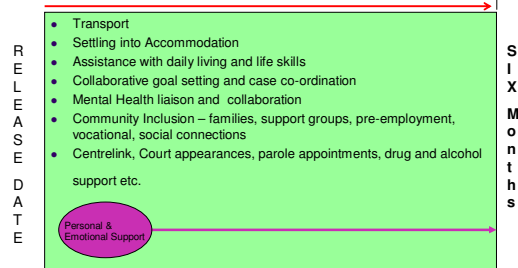
Referral Profile

- PMHS 'open' case load of approx 1200 people (at any given time)
- Approx 5% receive Transition Coordination from PMHS based on:
 - Significant mental health needs (.e.g active illness)
 - High and complex support needs
 - Need for case management
 - Lower chances of successful 'transition of care'
- Subset of clients who receive TC service are referred to RFQ (approx 80% of clients who receive TC)

Service Model – Pre release



Service Model – Post Release



RFQ's TSS service provides:

- personal and emotional support;
- assistance with daily living and life skills;
- collaborative goal setting;
- liaison and information sharing with district and forensic mental health services in relation to clinical needs and issues.
- case coordination, linking and liaison with community agencies and resources including: housing, employment, drug and alcohol support, legal, financial and social support systems.

We help people to:

- Find a place to live.
- Maintain contact with mental health services.
- Access financial support (crisis payment etc)
- Attend Court and Parole appointments
- Seek assistance with substance abuse issues
- Settle back into the community
- Reconnect with family
- Access other services.
- Find meaningful things to do

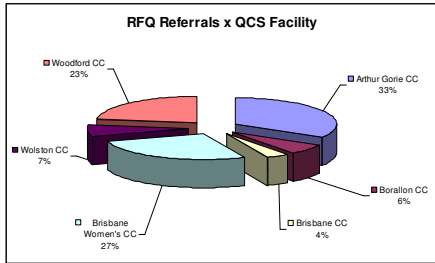
Referral Profile

- Average 34 years of age
- Most people:
 - Are single
 - Have no fixed address
 - Are previous clients of a District Mental Health Service
 - Have a history of alcohol and/or drug mis-use
 - Have low levels of formal education
 - History of not being able to engage relevant services

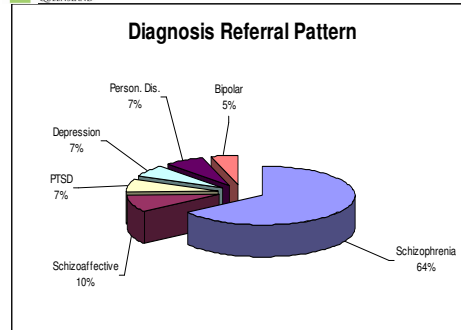
Our experience thus far...

- The service has received 152 referrals from the Prison Mental health Service to date – 113 (74%) males 39 (26%) females (av.6-7 per month)
- Unpredictability of release dates and times (57% sentence – 43% remand).
- People who are referred inside one month prior to release (short notice clients) are often the most difficult to engage
- Most people have little or no experience of receiving services and support
- Suitable accommodation a major barrier -majority of clients have 'no fixed address'.

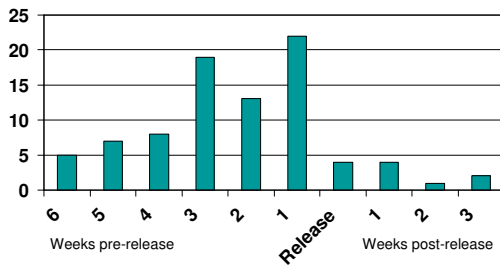
RFQ Referrals x QCS Facility



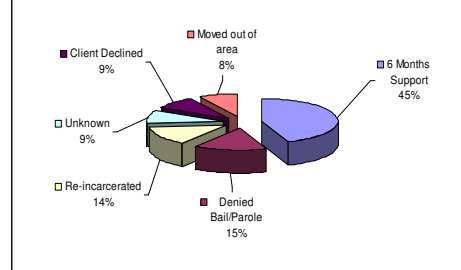
Diagnosis Referral Pattern



Referral Percentage



Client Exit Pattern





Case example



- 37 yr old male
- History of Schizophrenia, Acquired Brain Injury, memory and cognitive problems, possible mild intellectual disability
- Heavy i/v drug user since early teens
- Extensive criminal history robbery and drugs charges, some history of violence and aggression
- Literacy issues - left school in year 9

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Case example (cont.)



- Parole application 'catch 22'
- Hostel accommodation
- Release day: Transport and support to:
 - Centrelink
 - Make arrangements for bank account
 - Accommodation
- Mental Health appts.
- Application for DSP (Newstart \$100 f/n short of costs of hostel)
- Dept. of Housing appts (bond loan)
- Negotiate with Parole Officer for move to local town to be closer to partner

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Case example (cont.)



- New hostel (more food, friendlier staff)
- Visits to Parole
- Physical health and dental needs support
- Mental health appointments
- Support to attend Drug Arm ('clean' reports to parole office)
- Move to another town to live with mate (with increase in disposable income)
- Fishing trip with friends
- Friend gives a lift to dentist in Brisbane
- Began work fruit picking

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Case example (cont.)



- Spending increasing time with his family
- Applying for a driver's license
- Planning to become a truck driver
- Planning to move to another town to live with family member
- 6 months support reached
- Client happy to finish up with the service

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Strengths & Weaknesses



- Excellent working relationship with PMHS
- Great support from QCS
- Positive feedback from people before and after exiting the service
- Finding decent affordable accommodation remains the biggest challenge
- 'Transitional' challenge – achieving sustainable outcomes for people in 6 months of support especially given people's profile, complex needs, social isolation and isolation from services

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Questions?

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