

15 September 2017

C87695

Ti Lamusse
fyi-request-6291-8d6c60af@requests.fyi.org.nz

Dear Ti Lamusse

Thank you for your email of 28 July 2017, requesting information about prisoners in at-risk units (ARUs) or on directed segregation. Your request has been considered under the Official Information Act 1982 (OIA).

The Department is committed to preventing unnatural deaths and life threatening incidents of self-harm in prisons. As you may be aware, prisoners have a higher prevalence of mental health disorders and illnesses than the general population. In order to understand and address a prisoner's mental health, we conduct health screenings when a prisoner is received into prison, and when they are transferred between prisons. We have also introduced a specialised mental health screening tool and developed a framework to support the review of practice and reduce the risk of self-harm and suicide by prisoners and community based offenders.

If a prisoner is screened as 'positive' during the mental health screening tool they will be referred to forensic services for further specialised assessment of their mental health needs. Prisoners assessed by forensic services as having mild to moderate mental health needs are referred back to the prison health centre where a decision is made to refer the prisoner to a medical officer, a registered nurse or to a contracted provider for a package of care.

Packages of care are interventions offered to prisoners, which can include self-guided tools, group sessions or individual sessions. The content of the packages include education about healthy lifestyles, mental illness, medications, recovery and resilience. Additionally, they may include advice about mental health wellbeing, problem solving strategies, solution focused therapy, and cognitive behavioural therapy. Prisoners who are assessed as having serious mental health issues receive treatment directly from forensic services.

All prisoners who are identified as being at risk of self-harm are housed in designated ARUs. Prisoners who are not initially deemed at risk may be reassessed at any time if mood, behavior, or situational change gives rise for concern. These units are set up to ensure that prisoners are managed in the safest environment possible.

Staff in ARUs are experienced in managing prisoners who are undergoing a period of crisis, and in identifying the warning signs of suicidal behaviour and ideations. We have reduced opportunities for self-harm by replacing ventilation grilles in ARUs and introducing new clothing for prisoners considered to be at risk of suicide.

You may also be aware that in 2016, the Department received Justice Sector Funding of \$13.8 million over two years to pilot four initiatives to support offenders. These are:

- **More clinicians working with offenders and staff:** Teams of contracted mental health clinicians will work with prisoners and community offenders across 15 prisons and four Community Corrections sites. These clinicians will work directly with individuals to stabilise and address their mental health needs and will support Corrections staff in their work with these same individuals. The clinicians will provide and support links with existing community services for community-based offenders and prisoners on reintegration
- **Support for women in prison:** Counsellors and social workers will work with female prisoners at Auckland Region Women's Corrections Facility, Arohata Prison and Christchurch Women's Prison to address the female-specific needs around trauma, victimhood, and family which many women entering prison struggle to deal with.
- **Supported Living:** This contracted service will enable a small number of offenders with high and complex mental health needs or cognitive impairment to reside temporarily in supported accommodation upon release from prison. This will be provided within the community for women and men in Auckland and Hamilton. A Supported Living service provider will help these individuals to link into a range of community agencies to support their exit from Corrections' oversight and transition into the wider community.
- **Wrap Around Family/Whanau Support:** This service will support families/whanau of offenders who are engaged in mental health services during their imprisonment or while serving a sentence or order in the community. It will connect children and families of prisoners with community services to improve their social, health and education outcomes. Families will be supported to reunite with offenders following a term of imprisonment or stay united while the offender is in the community, in turn, supporting the progress made by the offender whilst in prison or with Community Corrections. The services will initially be available at four selected community sites.

With regard to directed segregation, the Department operates prisons that are safe for prisoners, staff, visitors and the general public. Corrections has policies and operational procedures in place to support all prisoners and segregation is one of many mechanisms available to manage safety for all.

The Department has a zero tolerance policy toward offences against the good order of prisons. Our staff recognise the importance of knowing and understanding prisoners, and actively engage with them to reinforce positive behaviour. Staff anticipate and attempt to resolve problems through the active management of prisoners.

Our staff recognise the importance of knowing and understanding prisoners, and actively engage with them to reinforce positive behaviour. Staff are trained in de-escalation techniques, and interpersonal and tactical communication skills. The goal is always to manage a potentially volatile situation in a manner that minimises the likelihood of provoking an aggressive response.

Prisoners can be segregated for a variety of reasons in line with the Corrections Act 2004. These include where there is a need to do so:

- a. for the security or good order of the prison (section 58(1)(a))
- b. for the safety of another prisoner or person (section 58(1)(b))
- c. for the purpose of voluntary protective custody (section 59(1)(a))
- d. for the purpose of directed protective custody (section 59(1)(b))
- e. to assess or ensure the prisoner's physical or mental health (section 60).

Prisoners are typically segregated within a single unit within a prison. Prisoners who have sought segregation have contact only with other prisoners similarly segregated, while those whose segregation has been imposed may have little or no contact with other prisoners. As far as possible, however, segregated prisoners are subject to the same rules, routines and privileges as apply generally to prisoners.

When prisoners are segregated, a segregation management plan will be developed to reflect and to identify any special needs that may be relevant due to the segregation. This ensures that prisoners are not impeded in any way by their segregation. A plan may include ways in which the prisoner can address their behaviour or concerns that have led to the segregation, and the measures that will be undertaken by the prison to assist with their return to the general prison population. A copy of the segregation management plan is provided to the prisoner.

Further information regarding the segregation of prisoners as contained within the POM, can be found on the Department's website via the link below:

<http://www.corrections.govt.nz/resources/Prison-Operations-Manual/Movement/M.01-Movements-internal,-directed-and-specified/M.01-3.html>

In response to your request, I have addressed each of your specific queries below. For the purpose of context, when reviewing the information provided, it is important to note that between 31 December 2009 and 29 August 2017, the prisoner population increased from 8,244 to 10,478. This represents an increase of approximately 2,200 people, and is reflected in an increased number of prisoners in ARUs and on directed segregation.

1. *The snapshot number of people on directed segregation in New Zealand prisons. Please break this down by quarterly snapshot since December 2009.*
2. *The total number of directed segregation starts broken down by year since 2009.*
3. *The total number of individuals starting directed segregation broken down by year since 2009.*

Please find the requested information attached as Appendix One (in response to question 1), Appendix Two (in response to question 2) and Appendix Three (in response to question 3).

As advised above, the increasing general prison population has affected the number of prisoners that have been on directed segregation.

4. *The snapshot number of people in ARU's in New Zealand prisons. Please break this down by quarterly snapshot since December 2009.*
5. *The total number of ARU starts, broken down by year since 2009.*
6. *The total number of people who spent time in ARU's broken down by year since 2009.*

Please find the requested information attached as Appendix Four (in response to question 4), Appendix Five (in response to question 5) and Appendix Six (in response to question 6).

As with the number of prisoners on directed segregation, the number of prisoners accommodated in ARUs has increased with the general prison population. Additionally, the increase may be attributed to strengthened mental health screening processes upon prisoners' reception into prisons (and transfer between prisons).

I trust the information provided is of assistance. Should you have any concerns with this response, I would encourage you to raise these with the Department. Alternatively you are advised of your right to also raise any concerns with the Office of the Ombudsman. Contact details are: Office of the Ombudsman, PO Box 10152, Wellington 6143.

Yours sincerely



Rachel Leota
Acting National Commissioner

Appendix One – Quarterly snapshot of prisoners on directed segregation

Quarterly snapshot of prisoners on directed segregation since December 2009											
Date of snapshot	2009	2010	2011	2012	2013	2014	2015	2016	2017		
31 March	N/A	71	54	73	75	55	81	108	141		
30 June	N/A	66	94	93	74	90	61	93	118		
30 September	N/A	56	86	51	78	73	91	92	N/A		
31 December	56	52	70	94	50	83	76	141	N/A		

Appendix Two – Directed segregation starts, since 2009

Year	Number of starts
2010	991
2011	1,140
2012	1,256
2013	1,601
2014	1,593
2015	1,850
2016	2,837

Note: An individual may commence multiple periods of directed segregation in a single year. Each instance is counted individually.

Appendix Three – Individuals that commenced a period of directed segregation, since 2009

Year	Number of individuals
2010	676
2011	761
2012	798
2013	1,042
2014	1,025
2015	1,153
2016	1,718

Appendix Four – Quarterly snapshot of prisoners in At-Risk units

Quarterly snapshot of prisoners in At-Risk units since December 2009										
Date of snapshot	2009	2010	2011	2012	2013	2014	2015	2016	2017	
31 March	N/A	109	118	87	74	96	112	119	105	
30 June	N/A	100	105	88	92	101	78	130	118	
30 September	N/A	112	81	71	93	85	90	100	N/A	
31 December	88	90	71	108	77	91	71	97	N/A	

Appendix Five – At-Risk Unit starts, since 2009

Year	Number of starts
2010	5,437
2011	5,018
2012	4,498
2013	4,390
2014	4,301
2015	4,467
2016	5,303

Note: An individual may commence multiple periods in At-Risk Units (based on the differing levels of risk the individual is presenting with) in a single year. Each instance is counted individually.

Appendix Six – Individuals that commenced a period in an At-Risk Unit, since 2009

Year	Number of individuals
2010	3,276
2011	3,031
2012	2,662
2013	2,538
2014	2,509
2015	2,765
2016	3,217