

Department of Justice and Community Safety

Secretary

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Our ref: EBC 22055434 Your ref: COR 2016 2558

Coroner Caitlin English Coroners Court of Victoria 65 Kavanagh Street SOUTHBANK VIC 3006

Dear Coroner English

I refer to your findings and recommendations delivered on 4 April 2022 about the death of Mr Naser Vukovic at the Melbourne Assessment Prison (the MAP) on 8 June 2016.

The Department of Justice and Community Safety (DJCS) has considered your recommendations, and accepts recommendations 1, 2, 4, 5 and 6.

Recommendation 3 is not accepted, as detailed below.

<u>Recommendation 1</u> – Corrections Victoria and Justice Health ensure Risk Review Teams, when considering Risk Management Plans, document consideration of access to means (in addition to hanging points) for example, razor blades, when requiring prisoners to be placed in a BDRP compliant cell. This is to occur for all Melbourne Assessment Prison prisoners required to be placed in a BDRP compliant cell as part of the Risk Management planning process in the Risk Review Teams.

Recommendation 1 is accepted and actions to acquit the recommendation have been completed.

All cells at the MAP are now Cell and Fire Safety Guideline compliant (previously referred to as Building Design Review Project, or BDRP, compliant).

The Risk Review Team (RRT) will maintain documented evidence of discussions and decisions relating to the placement, risk and restricted access to potential means of self-harm such as razor blades via *Schedule 1.02 (8a) Modified Risk Management Plan*.

The Schedule 1.02 (8a) Modified Risk Management Plan will then be endorsed by the MAP, Correct Care Australasia (CCA) and Forensicare representatives in attendance at RRT meetings. Where a prisoner has an active Case Management Plan, it will be updated to reflect any changes/modifications.



On completion of RRT meetings, the Prison Intelligence Unit (PIU) will be notified of which prisoners are cleared to a mainstream/protection unit to increase intelligence focus on these prisoners, with the objective to identify intent to self-harm. Where intent has been identified, PIU will inform the MAP's Operations Manager / Supervisor for further action (for example, at-risk, change of observations, or alternate placement).

The MAP has instituted a process to conduct regular audits for quality assurance of *Schedule 1.02 (8a)*, further strengthening its compliance of RRT.

<u>Recommendation 2</u> – Corrections Victoria and Justice Health, in consultation with Forensicare, update the Melbourne Assessment Prison 'At Risk' Local Operating Procedures that makes provision for Risk Management Plans to specify 'modified' cell conditions, including removal or supervised use of sharps, razors and other suicide and self-harm means, to remove the reference to cell modifications including restriction on access to sharps and razors, as this cannot be practically implemented or achieved.

Recommendation 2 is accepted.

The MAP's *Local Operating Procedure (LOP) 1.02/1 At Risk* has been updated and refined on numerous occasions over the almost six years since Mr Vukovic's death, to strengthen local procedures and compliance of the management of at risk prisoners. At the time of Mr Vukovic's death, the MAP was non-compliant with *LOP 1.02/1* in relation to placement of prisoners assigned both a P1 psychiatric risk rating and an S3 or S4 suicide/self-harm risk rating due to the limited beds in the Acute Assessment Unit (AAU) and high volume of P1 rated prisoners.

The MAP will update *LOP 1.02/1* in response to the recommendation, and will liaise with Justice Health and Forensicare. Any changes to the LOP will be consistent with Corrections Victoria's *Deputy Commissioner's Instruction 1.02 At Risk Procedures* and approved by the Deputy Commissioner, Custodial Operations.

Action to acquit this recommendation is in progress and is anticipated to be completed by the end of August 2022.

<u>Recommendation 3</u> – Given eliminating access to means is recognised as a significant suicide prevention method, Corrections Victoria and Justice Health, in consultation with Forensicare investigate and, if possible, develop and implement an 'in between' unit within the Victorian prison system in which access to suicide or self-harm means, such as razors and sharps, can be practically restricted where necessary, for example where a prisoner has a history of self-harm by that method, to manage and reduce suicide and self-harm risk.

DJCS considered the possibility of developing an 'in between' unit, but concluded it is no longer necessary given other changes that have been implemented in the correctional system since Mr Vukovic's death which seek to reduce suicide and self-harm risk:

• The opening of Ravenhall Correctional Centre (Ravenhall) in late 2017 saw the addition of 75 forensic mental health beds and services to the Victorian corrections system.



• Justice Health, in consultation with the MAP, has established a bed flow process to ensure the appropriate care and management of P1 risk rated prisoners. As noted, the number of P1 risk rated prisoners held at the MAP continues to be a challenge due to the limited number of beds in the AAU and Thomas Embling Hospital.

At the MAP, the current process remains for restricted access to razors and sharps for prisoners accommodated on Level 5. Restricting access to these items for prisoners in the mainstream population is not practicable.

<u>Recommendation 4</u> – Corrections Victoria and Justice Health implement a system to ensure prisoners are aware of their right to consent to disclosure of their health information. Such a system should include a provision for information and consent forms at key stages, for example, on reception to prison. Consent forms should also be available for family and friends when visiting a prisoner. Whilst it will always remain the prisoner's right to provide or decline consent, those who would most benefit from permitting a supporter to be involved in their health care will likely need assistance to navigate a system for providing their consent.

Recommendation 4 is accepted.

Corrections Victoria's *Commissioner's Requirement (CR)* 2.4.3 – *Disclosure of Prisoner/ Offender Information* refers to the authority to exchange information. This policy was in place prior to Mr Vukovic's death.

Consent forms are available to prisoners, and family and friends can express concerns/raise at risk concerns and liaise with the prison or Corrections Victoria, head office. This process was in place prior to Mr Vukovic's death.

Justice Health has existing processes for the sharing of health information with nominated persons – where the prisoner consents to the sharing. Specifically, prisoners, their families and legal representatives can make a request for health information under the *Freedom* of *Information Act 1982*. Requests are managed by DJCS's Freedom of Information Unit.

Legal representatives and families wanting a copy of a prisoner's health information are required to have the prisoner's written consent to release the information prior to making the request.

Justice Health is currently reviewing its Health Information sharing policy to reflect the recommendations arising from the Royal Commission into Victoria's Mental Health System that relate to the same. It is anticipated that this will be completed by the end of August 2022.

<u>Recommendation 5</u> – As part of the above system for the provision of consent to disclose health information, Justice Health should work with Forensicare to develop a system whereby prisoners who require mental health care and treatment can nominate a support person to provide non-legal advocacy for prisoners experiencing mental ill health. Consideration should be made to implementing a system similar to the nominated person provisions in the Mental Health Act 2014.



Recommendation 5 is accepted.

As noted in response to recommendation 4, Corrections Victoria's *CR 2.4.3 – Disclosure of Prisoner/Offender Information* refers to the authority to exchange information and consent forms are available to prisoners. Prisoners' family and friends can express concerns/raise at risk concerns and liaise with the prison or Corrections Victoria, head office.

DJCS notes that a similar action has arisen from the Royal Commission into Victoria's Mental Health System, and Justice Health will review its Health Information sharing policy to address recommendation 5.

Justice Health is considering how best to implement this recommendation in consultation with Corrections Victoria, and Forensicare (and other mental health services) will also need to consider appropriate processes for implementation.

It is anticipated that Justice Health's Health Information sharing policy review will be completed by the end of August 2022.

<u>Recommendation 6</u> – The Department of Justice and Community Safety review the mental health resources available at the Melbourne Assessment Prison where all male prisoners with a serious psychiatric condition requiring intensive and/ or immediate care (P1 rated) in Victoria are generally housed. Given the shortfall for forensic mental health beds is a systemic issue, the review should include:

(a) the resources required to provide contemporary mental health assessment and care in a high volume, high acuity custodial setting be it bed-based assessment beds or clinical teams that have the time to undertake comprehensive assessments and reviews; and

(b) the impact on the Melbourne Assessment Prison of the demand for finite Thomas Embling Hospital beds, and how it influences decision-making on the housing of prisoners with a mental illness.

Recommendation 6 is accepted and actions to acquit the recommendation have been completed.

DJCS acknowledges the number of mental health beds across the system will continue to be a challenge. The length of stay for P1 psychiatric risk rated prisoners requiring a bed at the Thomas Embling Hospital has reduced since the opening of Ravenhall with its 75 forensic mental health beds.

In 2017, a review was conducted into the placement of prisoners who are at risk or have recently self-harmed and to consider alternative options, where those prisoners could not be accommodated in the AAU or Level 5 at the MAP. An options paper was developed to strengthen the management of prisoners with an S3 and P1 risk rating. In consultation with Forensicare and the current bed flow process established for the movement of P1 risk rated prisoners through the system, the MAP will review the original document to identify any



further areas to strengthen for the management and care of P1 risk rated prisoners now that Ravenhall has opened.

Throughout the COVID-19 pandemic, Forensicare has introduced an additional staff member on Level 3 at the MAP to provide immediate support for any prisoner identified as not coping. Due to the success of this initiative, Forensicare is seeking ongoing funding for this resource.

The MAP has also strengthened its process for those prisoners being transferred from the AAU into mainstream accommodation with the implementation of a discharge plan to assist the receiving unit to manage any potential or known triggers/risks to reduce the likelihood of further incidents.

The MAP will continue to work with Forensicare to ensure the MAP's resources, that is the AAU and Unit 13, are maximised.

Should you require any further information, please contact the Office of the General Counsel at ogc@justice.vic.gov.au

Yours sincerely

Rebecca Falkingham Secretary

