Similar to FNHA, PHSA covers the entire province of BC
Correctional Health Services

Reason for the Change – October 1\textsuperscript{st}, 2017

Health Services are previously delivered at 10 Correctional Centres by a for profit service provider.

- Poor health status of the inmate population
- Reviews, audits, reports calling for change
  - WHO report (2013)
  - BC Coroner’s Report (2014)
Provincial Health Service Authority

- BC Cancer Agency
- BC Centre for Disease Control
- BC Women’s and Children’s Hospital
- BC Emergency Health Services
- BC Renal Agency
- BC Transplant
- BC Mental Health and Substance Use Services (including Correctional Health Services).
BC Mental Health & Substance Use Services
An Agency of the Provincial Health Services Authority

- Burnaby Centre for Mental Health & Addictions
- Heartwood Centre for Women
- Forensic Psychiatric Services
- Correctional Health Services
- Provincial Specialized Programs (commissioned)

Continuum

- Research & Knowledge Translation & Exchange
- Provincial Planning & Strategic Networking
- Academic Teaching/Training
- MHSU Literacy (BC Partners)
Provincial Correctional Centres

**Lower Mainland**
- Alouette Correctional Centre for Women (ACCW)
- Ford Mountain Correctional Centre (FMCC)
- Fraser Regional Correctional Centre (FRCC)
- North Fraser Pretrial Centre (NFPC)
- Surrey Pretrial Services Centre (SPSC)

**Vancouver Island, Interior, Northern**
- Kamloops Regional Correctional Centre (KRCC)
- Nanaimo Correctional Centre (NCC)
- Okanagan Correctional Centre (OCC)
- Prince George Regional Correctional Centres (PGRCC)
- Vancouver Island Regional Correctional Centre (VIRCC)
CHS Strategic Direction: improve the quality of health care in provincial correctional centres

- Eliminate barriers to accessing health care for inmates
- Implement evidence-based clinical guidelines, standards and practices in Correctional Health
- Improve the continuity of care by improving transitions between correctional facilities and RHAs, primary care and community services
- Enhance the skills and clinical competencies of all correctional health disciplines
- Improve reporting and accountability by developing and tracking performance indicators
- Prepare and implement Accreditation in 2021
- Develop strong partnerships with BC Corrections and Ministry of Public Safety & Solicitor General, RHAs, community providers and other stakeholders
BC Coroners Service Death Review Panel: A Review of Illicit Drug Overdoses, March 28, 2018

• OD Deaths Jan 1-Dec 31, 2016
  – Northern, 52 deaths
  – Death rate per 100,000 = 18.5
• OD Deaths Jan 1-July 31, 2017
  – Northern, 31 deaths
  – Death rate per 100,000 = 18.0
• Indigenous persons represent 10% of overdose deaths
• PGRCC 60-80% indigenous population
• Sixty-six percent had involvement with BC Corrections
  – 10% died within 30 days of release
  – [OD risk 6-8 times higher than general population 1 week post release]
Recommendations for Correctional Population on Release
  – Take Home Naloxone
  – Access to drug checking services
  – Linkage to addiction services including opioid agonist treatment
Current State of Correctional Health Services
Response to Opioid Overdose Epidemic

• Current State at Correctional Health Services
  – Take Home Naloxone

  – Access and Transition Nurses, MHSU Nurse, OAT Nurse
    • Ensure clients have OAT prescriptions on release
    • Connect clients to community OAT prescribers
    • All BC Pharmacies notified of Correctional Health Services Clinic Telephone Numbers
      – Expanded OAT clinics
        • Currently 30-35% of population on OAT
        • Reduction in wait list to to zero
      – Matrix and Smart Recovery
Increase focus on transitions/continuity of care
Our Vision
Where we want to go with CHS

• Engage clients and internal and external supports in the health care system to increase the quality of primary, mental health, and substance use care in custody and enhance the continuity of care upon release.

• We want to be able to have established discharge plans so that we can do the “warm hand-off” and insure that our clients make it to their community physician, their pharmacy to pick up their medications, their mental health team, or treatment centre.
Questions