

Queensland Corrective Services

**Custodial Anti-Smoking Policy and
Implementation Plan 2009–2011**

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Foreword

Queensland Corrective Services (QCS) currently has one of the most robust correctional centre anti-smoking policies in Australia. During recent years the Agency has made significant advances in minimising the harm from environmental tobacco smoke in correctional centres. In October 2008 smoking was prohibited in all cells in correctional centres across Queensland. Smoking in secure facilities is prohibited in: air-conditioned buildings; food preparation and dining areas; QCS vehicles; within four metres of building entrances; and outdoor eating and drinking areas. Smoking is not permitted in the commercial industries areas.

The Queensland Corrective Services Custodial Anti-Smoking Policy and Implementation Plan 2009–2011 will strengthen Queensland’s position as leaders in corrections by further promoting the health and wellbeing of staff and prisoners. The policy and implementation plan is designed to transform attitudes to smoking within correctional centres and encourage staff and prisoners to stop smoking. The policy will promote a consistent message about the risks associated with smoking and guide the development of cessation support assistance for staff and prisoners who are ready to quit.

The QCS Anti-Smoking Policy will seek to reduce the cost to the community associated with smoking-related illnesses and contribute to the Queensland Government’s target of cutting smoking by one-third by 2020, as outlined in *Toward Q2: Tomorrow’s Queensland*.

Kelvin Anderson
Commissioner

Smoking in correctional centres

Although smoking rates have generally declined during recent decades, tobacco use remains the leading cause of preventable death and illness in Queensland. More than 3400 Queenslanders die each year as a result of smoking. Smoking-related hospital admissions in Queensland cost more than \$217 million per annum.

Smoking within correctional centres is significantly more prevalent than among the general public. It is estimated that about 80 per cent of prisoners within correctional centres smoke, compared to about 17.4 per cent of the general population. Anecdotal evidence suggests that the prevalence of smoking among custodial staff is also higher than the general population.

A number of reasons have been identified for the high rate of smoking within correctional centres. Aboriginal and Torres Strait Islander people are over represented in correctional centres. The Australian Institute of Health and Welfare has found that the rate of smoking among Indigenous Australians is about 50 per cent. People with mental health problems and substance use disorders have been found to smoke at much higher rates than the general population. There is a high rate of prisoners with mental health and substance use disorders.

Life in prison is potentially stressful and smoking can be seen to offer respite from these stresses. Sharing tobacco among prisoners and smoking together, can give a sense of being part of a group. This means that adopting a potentially isolating behaviour, such as not smoking or not wanting to be exposed to tobacco smoke, can be difficult.

For these reasons Queensland Corrective Services (QCS) is committed to a smoking reduction policy which applies multiple targeted strategies to change attitudes to smoking within correctional centres and encourage smoking cessation.

Policy

Policy statement

QCS is committed to improving the health and wellbeing of staff, prisoners and children who reside in correctional centres, by a reduction in the rate and prevalence of smoking within correctional facilities. This policy provides a framework to transform the social and cultural attitudes to smoking within correctional centres through support mechanisms, communication, environmental restrictions and price incentives.

Policy aims

The policy aims to:

- reduce the harm associated with tobacco use, including exposure to environmental tobacco smoke, for both smokers and non-smokers
- encourage and support staff and prisoners to quit smoking
- provide a clear and consistent message to staff and prisoners about the hazards of smoking
- position Queensland Corrective Services as a national leader in tobacco management within custodial facilities, and
- better align Queensland Corrective Services' anti-smoking policy with Queensland Government policy.

Policy components

The policy will be achieved through:

- education and communication
- cessation support
- environmental restrictions
- pricing and supply

Policy implementation

The policy will be implemented in three phases during 2009–2011. This will ensure that changes are effectively managed and will reduce the risk that the policy will impact negatively on the security and good order of correctional facilities. The implementation plan provides a guide to manage the introduction of policy components and outlines which areas in the Agency are responsible for different tasks.

The implementation plan also details broad performance measures to direct and monitor the policy implementation. The implementation plan should be viewed as a flexible document that can be adjusted to meet the changing needs of the correctional environment. The areas of QCS responsible for implementing specific parts of the policy will include these actions in their operational plans.

Education and communication

Education and communication are key components of a smoking reduction strategy. Education about the hazards of smoking and the benefits of quitting is a necessary and effective tool to encourage individuals to quit. Communication about the policy is essential to ensure that it is effectively implemented and to maintain the safety and good order of correctional facilities.

The education and communication strategies which are developed will aim to be culturally relevant to Indigenous prisoners. Indigenous people represent about 25 per cent of prisoners in Queensland correctional centres and it is estimated that in the general population up to 50 per cent of Indigenous adults smoke.

The education and communication campaign will include specific information for women in correctional facilities. Smoking among women is of concern because of the impact it has on their general health, maternal health and pregnancy outcomes. It is also recognised that environmental tobacco smoke causes many serious health complications in children.

Focusing on staff and incorporating them into the education program is also vital to effect broad attitudinal change throughout correctional centres.

In correctional centres education about smoking and communication about the anti-smoking policy may include:

- posters and brochures
- information in induction packages
- information sessions for staff and prisoners, and
- consultation with Queensland Health, Offender Health Services staff.

The policy will be implemented in a staged process. This means that communication and education will occur not only at the start of the policy but continuously during policy implementation.

Key outcomes

- Staff and prisoners will be provided with clear information about the Policy and Implementation Plan.
- Staff and prisoners will be provided with clear, consistent and ongoing information about the hazards of smoking, the benefits of quitting and options to access cessation support.

Cessation support

While the rates of smoking within correctional centres are high, research in Australia indicates that about three quarters of prisoners who smoke want to quit. However, smoking is a complex behaviour that can be difficult to stop. Nicotine is an addictive substance in tobacco, further, there are strong social norms related to smoking in correctional centres.

There are a number of side-effects associated with smoking cessation which have significant implications for prisoner management. Some of the symptoms of nicotine withdrawal include depressed mood, difficulty sleeping, anxiety, irritability, frustration, anger and restlessness. For these reasons, as part of the policy implementation, cessation support will be developed for both staff and prisoners.

Cessation support may include assessment, individualised cessation planning, brief intervention, regular follow-up contact with cessation counsellors and a one-off course of nicotine replacement therapy in any 12 month period. For prisoners, this support will be funded by gradual increases in the price of tobacco sold within correctional centres.

Patches will also be made available at cost price in all correctional centre canteens for those prisoners who attempt to cease smoking a second time within a 12 month period. Where appropriate, in consultation with Offender Health Services staff, and at their own expense, prisoners will also be able to access other cessation interventions such as prescribed medication.

Supporting prisoners on entry to a correctional facility is an important first step to encouraging smoking cessation. On reception to a facility, prisoners who indicate they smoke will be offered a short supply of nicotine replacement therapy if they do not purchase tobacco on entry. Information about longer term cessation support will be included in induction packages.

Key outcomes

- Staff and prisoners are able to access comprehensive support packages to help them quit smoking.
- Prisoners on reception who smoke and do not purchase tobacco will be supplied with nicotine replacement therapy and information about quitting smoking in prison.

Environmental restrictions

Environmental restrictions are an important component of an overall tobacco reduction strategy. Limiting the places where smoking can occur not only discourages smoking in general, but also limits the exposure of staff, prisoners, children and visitors to environmental tobacco smoke.

Queensland Corrective Services' secure facilities are exempt from the smoking in enclosed places restrictions under the *Tobacco and Other Smoking Products Act 1998*. While it is important to maintain this exemption due to the special environmental circumstances which exist in correctional facilities, the Agency is committed to reducing the places where smoking can occur. This commitment has been demonstrated by the ban on smoking in all cells from 1 October 2008.

Under the new anti-smoking policy smoking will be prohibited in all indoor areas in correctional centres from October 2009. As part of the policy implementation, each correctional centre will develop a local procedure which will detail where smoking can occur in outdoor places. These areas will be known as a nominated smoking place. An annual review of these procedures will be established and centres will be required to determine where reductions in nominated smoking places can occur, without compromising the security and good order of the facility.

Environmental tobacco smoke can have serious health consequences for babies and children. Currently, smoking is not permitted in the play area or residential area in mothers and babies units in Queensland correctional centres. As part of the policy implementation, children who reside at a centre and children who visit will not be permitted within four metres of nominated smoking areas inside a correctional centre (excluding visiting areas). Procedures will be developed to determine what arrangements need to be established to implement the policy.

Breaches of the Policy

Prisoners – breaches of the anti-smoking policy by prisoners should be managed in accordance with the procedure Breaches of Discipline.

Visitors – adherence to the anti-smoking policy is a condition of entry to a correctional facility. Failure to comply, either with the policy or upon the direction of staff, may result in the removal of the visitor from the facility, or in the case of repeat or continued breaches, suspension of access approval.

Staff – staff found to be smoking outside a nominated smoking place within correctional facilities, may be in breach of the Code of Conduct, specifically sections relating to standards of conduct including behaviour and workplace health and safety. If a member of staff wilfully fails to comply with the standards outlined in the Code of Conduct, they may be subject to disciplinary action under section 187 of the *Public Service Act 2008*.

Key outcomes

- Smoking will be prohibited in all indoor areas in correctional centres and the number of nominated smoking areas in outdoor spaces will be reduced.
- Staff, prisoners and children residing at, and visiting, correctional centres will be exposed to less environmental tobacco smoke.

Pricing and supply

Increasing the price of tobacco within correctional centres will encourage prisoners to quit smoking.

The price of tobacco will be gradually increased during the implementation of the policy. Prior to the commencement of the policy, tobacco is sold at 5 per cent on cost of tobacco purchased by the centre. From September 2009 the price of tobacco will increase by 1 per cent every six months to be capped at 10 per cent on the cost of tobacco purchased by the centre. The 10 per cent figure will bring tobacco in line with other products for sale in prison canteens. As well as discouraging smoking, the price increases will be used to fund the provision of cessation support for prisoners.

Exposure to specific products and brands has been shown to encourage smoking and loyalty to specific brand types. There is strong evidence to suggest that Queensland prisoners have strong ties to a particular brand of tobacco. As part of the policy implementation, research will be conducted into tobacco brand loyalty among prisoners and the possible outcomes of reducing access to specific brand types.

Key outcomes

- Tobacco will be more expensive which will increase the likelihood that prisoners will quit smoking.
- The additional revenue will be used to fund cessation support for prisoners.
- Information will be gathered about tobacco brand loyalty among prisoners and the possible outcomes of reducing access to specific brands.

Implementation plan

The Queensland Corrective Services Anti-Smoking Policy and Implementation Plan will be implemented in three phases during 2009–2011. This will ensure that changes are effectively managed and will reduce the risk that the policy will impact negatively on the security and good order of correctional facilities. The implementation plan provides a guide to effectively manage the introduction of policy components and outlines which areas in the Agency are responsible for different tasks.

The implementation plan also details broad performance measures to direct and monitor the policy implementation. The implementation plan should be viewed as a flexible document that can be adjusted to meet the changing needs of the correctional environment. The areas of QCS responsible for implementing specific parts of the policy will include these actions in their operational plans.

| Phase | Focus | Dates |
|-------|---|------------------------------|
| One | Initial policy implementation, program development and change management. | June 2009 – December 2009 |
| Two | Policy embedded and extended and initial assessment of successes and policy gaps. | January 2010 – December 2010 |
| Three | Continue implementation and commence planning for future policy development. | January 2011 – December 2011 |

Phase one: June 2009 – December 2009

| Action area | Action | Lead | Support | Performance measure |
|-----------------------------|---|-------------------------------|---|---|
| Education and communication | Publish the Policy and Implementation Plan (completed by June 2009). | Strategic Policy and Services | Media and Communication | The policy and implementation plan is available on the intranet. QCS and Queensland Health staff are aware of the Policy. |
| | Provide information to staff and prisoners about the Policy and Implementation Plan (completed within June–September 2009). | Custodial Operations | Media and Communication Queensland Health (Offender Health Services) | Information sessions have been held. Information is displayed throughout custodial facilities. |
| | Promote non-smoking messages and provide information about cessation support (completed within June–September 2009). | Custodial Operations | Media and Communication Queensland Health (Offender Health Services) | Information is displayed throughout custodial facilities. Culturally relevant information is provided. Information specific to women and women with children is provided. Information is supplied to prisoners on reception. |

Phase one: June 2009 – December 2009

| Action area | Action | Lead | Support | Performance measure |
|-------------------|---|--|--|---|
| Cessation support | Develop and roll-out cessation support program for staff (completed by December 2009). | Human Resource Services Branch | Queensland Health (Alcohol, Tobacco and Other Drugs Branch) Custodial Operations | A pilot cessation support program for staff is developed. Staff are accessing cessation support program. |
| | Develop and roll-out cessation support program for prisoners funded by price increases in tobacco products (completed by December 2009). | Queensland Health (Offender Health Services) | Custodial Operations Finance and Administrative Services | A cessation support program for prisoners is developed. Prisoners are accessing the cessation support program. |
| | Conduct research into the feasibility of access to Quitline through the Arunta system as a community number (completed by December 2009). | Strategic Policy and Services | Custodial Operations Queensland Health (Offender Health Services) QCS Intelligence Group | A report on the feasibility of incorporating Quitline into the cessation support program for prisoners is submitted to the Director-General. Quitline is incorporated into the cessation support program for prisoners if appropriate. |

Phase one: June 2009 – December 2009

| Action area | Action | Lead | Support | Performance measure |
|----------------------------|---|--|---|---|
| Environmental restrictions | Update “Smoking” procedure to reflect new policy (completed by July 2009). | Strategic Policy and Services | Custodial Operations | Procedure is updated and published on the intranet. |
| | Smoking is prohibited in all indoor areas and a local procedure is developed for each correctional facility which details all outdoor nominated smoking places (completed by October 2009). | General Managers, correctional centres | Custodial Operations | Procedures are developed and published on the intranet. Smoking is only occurring in nominated smoking places. |
| | Develop local procedure to ensure children residing in centres and children visiting centres for playgroup are not permitted in nominated smoking places (completed by August 2009). | General Managers, Women’s correctional centres | Custodial Operations Strategic Policy and Services | Local smoking procedures ensure children are not permitted in nominated smoking places. |
| Tobacco pricing and supply | Increase price of tobacco by one per cent from September 2009. | Finance and Administrative Services | Custodial Operations | The price of tobacco is increased by 1 per cent on cost of purchase (6 per cent total on cost). |

Phase two: January 2010 – December 2010

| Action area | Action | Lead | Support | Performance measure |
|-----------------------------|---|--|---|---|
| Education and communication | Continue to promote non-smoking messages and provide information about cessation support. | Custodial Operations | Media and Communication Queensland Health (Offender Health Services) | Information is displayed throughout custodial facilities. Culturally relevant information is provided. Information specific to women and women with children is provided. Information is supplied to prisoners on reception. |
| Cessation support | Continue to roll out a cessation support program for staff (completed by December 2010). | Human Resource Services Branch | Queensland Health (Alcohol, Tobacco and Other Drugs Branch) Custodial Operations | Staff are accessing a cessation support program. The outcomes of the cessation support pilot are assessed. A model for continuing cessation support for staff is developed and implemented. |
| | Continue to roll out cessation support program for prisoners funded by price increase in tobacco products. | Queensland Health (Offender Health Services) | Custodial Operations | Prisoners are accessing the cessation support program. |
| | Supply prisoners who do not purchase tobacco on reception with nicotine replacement therapy (completed by December 2010). | Custodial Operations | Queensland Health (Offender Health Services) Strategic Policy and Services | On reception to a facility a short supply of nicotine replacement patches is provided to prisoners who smoke and do not purchase tobacco. |

Phase two: January 2010 – December 2010

| Action area | Action | Lead | Support | Performance measure |
|----------------------------|---|--|----------------------|--|
| Environmental restrictions | Review and amend local procedures for nominated smoking places in all correctional facilities (completed by July 2010). | General Managers, correctional centres | Custodial Operations | <p>Local procedures are reviewed and amendments are made where possible to ensure the minimum number of operationally necessary nominated smoking places are available in correctional centres.</p> <p>A report is submitted to the Director-General detailing where reductions in nominated smoking places have occurred.</p> <p>Smoking is only occurring in nominated smoking places.</p> |
| Tobacco pricing and supply | Increase price of tobacco by 1 per cent from March 2010. | Finance and Administrative Services | Custodial Operations | The price of tobacco is increased by 1 per cent on cost of purchase (7 per cent total on cost). |
| | Increase price of tobacco by 1 per cent from September 2010. | Finance and Administrative Services | Custodial Operations | The price of tobacco is increased by 1 per cent on cost of purchase (8 per cent total on cost). |

Phase three: January 2011 – December 2011

| Action area | Action | Lead | Support | Performance measure |
|-----------------------------|---|----------------------|---|---|
| Education and communication | Continue to promote non-smoking messages and provide information about cessation support. | Custodial Operations | Media and Communication Queensland Health (Offender Health Services) | Information is displayed throughout custodial facilities. Culturally relevant information is provided. Information specific to women and women with children is provided. Information is supplied to prisoners on reception. |

Phase three: January 2011 – December 2011

| Action area | Action | Lead | Support | Performance measure |
|-------------------|--|--|---|---|
| Cessation support | Continue to roll-out cessation support program for staff. | Human Resources Services Branch | Queensland Health (Alcohol, Tobacco and Other Drugs Branch) Custodial Operations | Staff are accessing a cessation support program. |
| | Continue to roll-out cessation support program for prisoners. | Queensland Health (Offender Health Services) | Custodial Operations | Prisoners are accessing the cessation support program. |
| | Conduct evaluation of cessation support programs for staff and prisoners (completed by December 2011). | Strategic Policy and Services | Custodial Operations Queensland Health (Offender Health Services) Queensland Health (Alcohol, Tobacco and Other Drugs Branch) | A report is completed and submitted to the Director-General on uptake and outcomes of the cessation support programs and the overarching policy. Recommendations for future policy development are made as part of the report. |

Phase three: January 2011 – December 2011

| Action area | Action | Lead | Support | Performance measure |
|----------------------------|---|--|----------------------|--|
| Environmental restrictions | Review and amend local procedures for nominated smoking places in all correctional facilities (completed by July 2011). | General Managers, correctional centres | Custodial Operations | <p>Local procedures are reviewed and amendments are made where possible to ensure the minimum number of operationally necessary nominated smoking places are available in correctional centres.</p> <p>A report is submitted to the Director-General detailing where reductions in nominated smoking places have occurred.</p> <p>Smoking is only occurring in nominated smoking places.</p> |
| Tobacco pricing and supply | Conduct research into tobacco brand loyalty among prisoners (completed by December 2011). | Strategic Policy and Services | Custodial Operations | A report is submitted to the Director-General including the potential outcomes of reducing access to specific brands and recommendations for future policy development. |
| | Increase price of tobacco by 1 per cent from March 2011. | Finance and Administrative Services | Custodial Operations | The price of tobacco is increased by 1 per cent on cost of purchase (9 per cent total on cost). |
| | Increase price of tobacco by 1 per cent from September 2011. | Finance and Administrative Services | Custodial Operations | The price of tobacco is increased by 1 per cent on cost of purchase (10 per cent total on cost). |



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