



Transforming governance of healthcare in British Columbia's correctional facilities

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Governance

01

Policy and
Strategic Plans

02

Generating
Intelligence for
decision-making

03

Coalition-
building

04

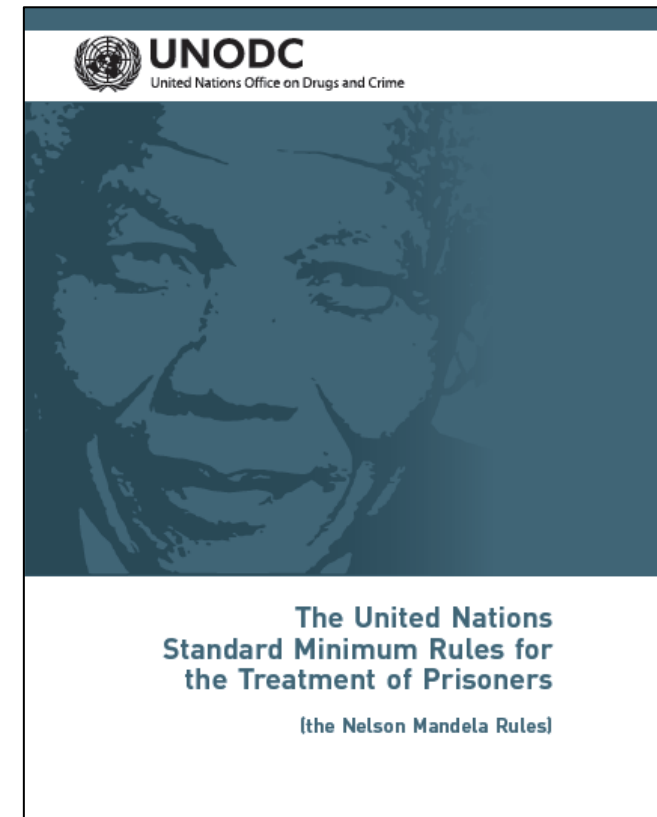
Implementation
& oversight

05

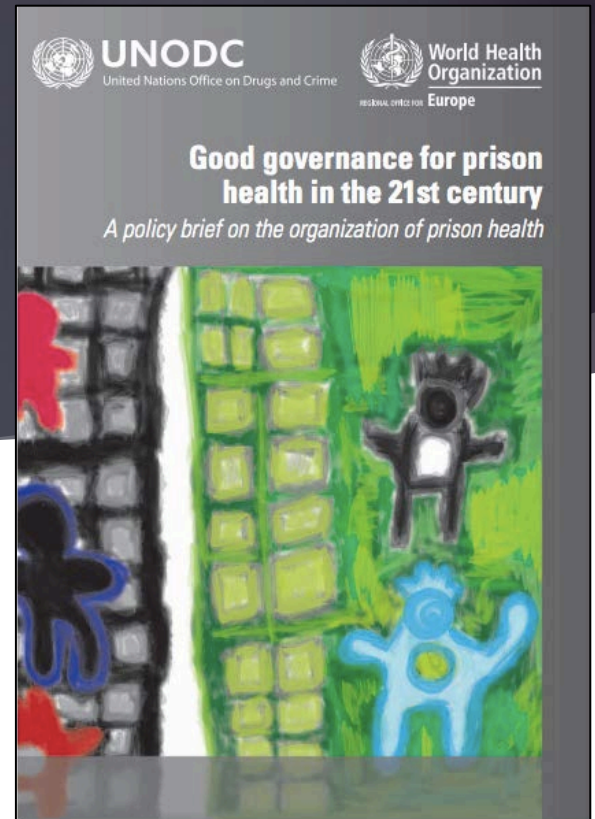
Accountability

Prison Health Governance


- ▶ Human Rights
- ▶ Public Health
- ▶ Economics



“Health ministries should provide and be accountable for health care services in prisons and advocate healthy prison conditions”





Country	MOH or Public Health Authority	Shared MOH/MOJ or MOH in some jurisdictions
Albania		X
Argentina		X
Armenia		X
Australia		X
Canada		X
Cyprus	X	
Czechia		X
Denmark		X
Estonia		X
Finland	X	
France	X	
Iceland		X
Italy	X	
Kosovo	X	
Lithuania		X
Malta		X
Montenegro		X
Norway	X	
Slovakia		X
Slovenia	X	
Spain		X
Switzerland		X
Turkey		X
United Kingdom	X	



Public Health England
Protecting and improving the nation's health

Rapid review of evidence of the impact on health outcomes of NHS commissioned health services for people in secure and detained settings to inform future health interventions and prioritisation in England

FIVE YEARS ON:
ROYAL COLLEGE OF NURSING SCOTLAND REVIEW OF THE TRANSFER OF PRISON HEALTH CARE FROM THE SCOTTISH PRISON SERVICE TO NHS SCOTLAND

www.rcn.org.uk/scotland @RCNSCOT #PRISONNHS5YO

Governance in the Canadian Context

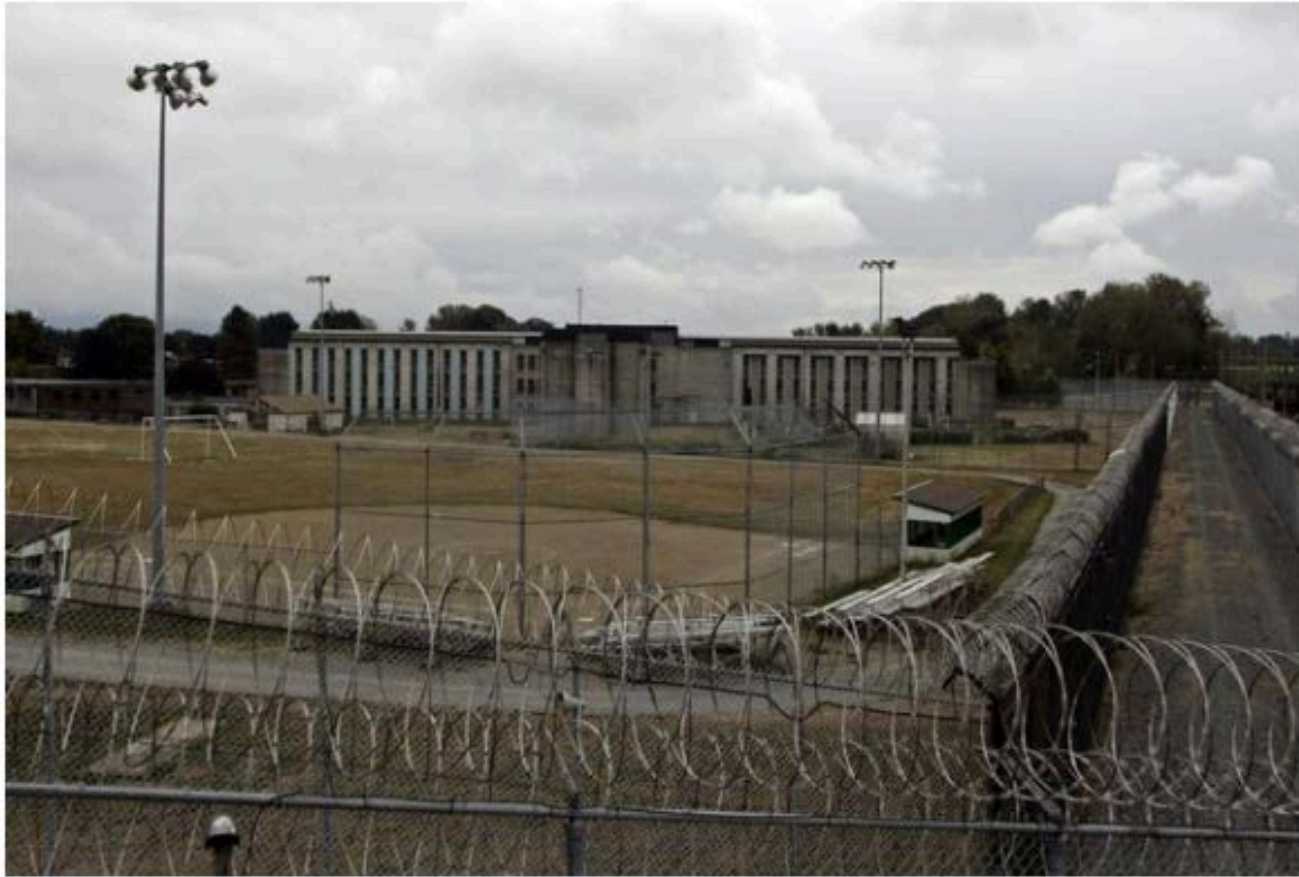
Federal Facilities

- ▶ 15 000 people
- ▶ Sentence 2 years or more
- ▶ Correctional Services Canada (CSC) under the Minister of Public Safety and Emergency Preparedness

Provincial/Territorial Facilities

- ▶ Sentence less than 2 years
- ▶ 25,500 adults; 60% population held in remand
- ▶ P/T governments responsible for healthcare delivery

B.C. Health Ministry to take responsibility for inmate health care



Responsibility for inmates' health is being transferred to B.C.'s Health Ministry from its Public Safety portfolio. Shown is the medium-security Matsqui prison in Abbotsford, B.C.

RICHARD LAM/CP

Study Aims

Understand the context, facilitators & barriers, expected outcomes as they are perceived by decision-makers in BC

Research Challenges

AUTHORITY & APPROVAL

“CONSULTATION”

WHOSE STORY OF THE
TRANSFER IS TOLD?

Context in BC

- ▶ Improve continuity of care
- ▶ Substance use and addictions
- ▶ Address quality
- ▶ International standards

Thank you