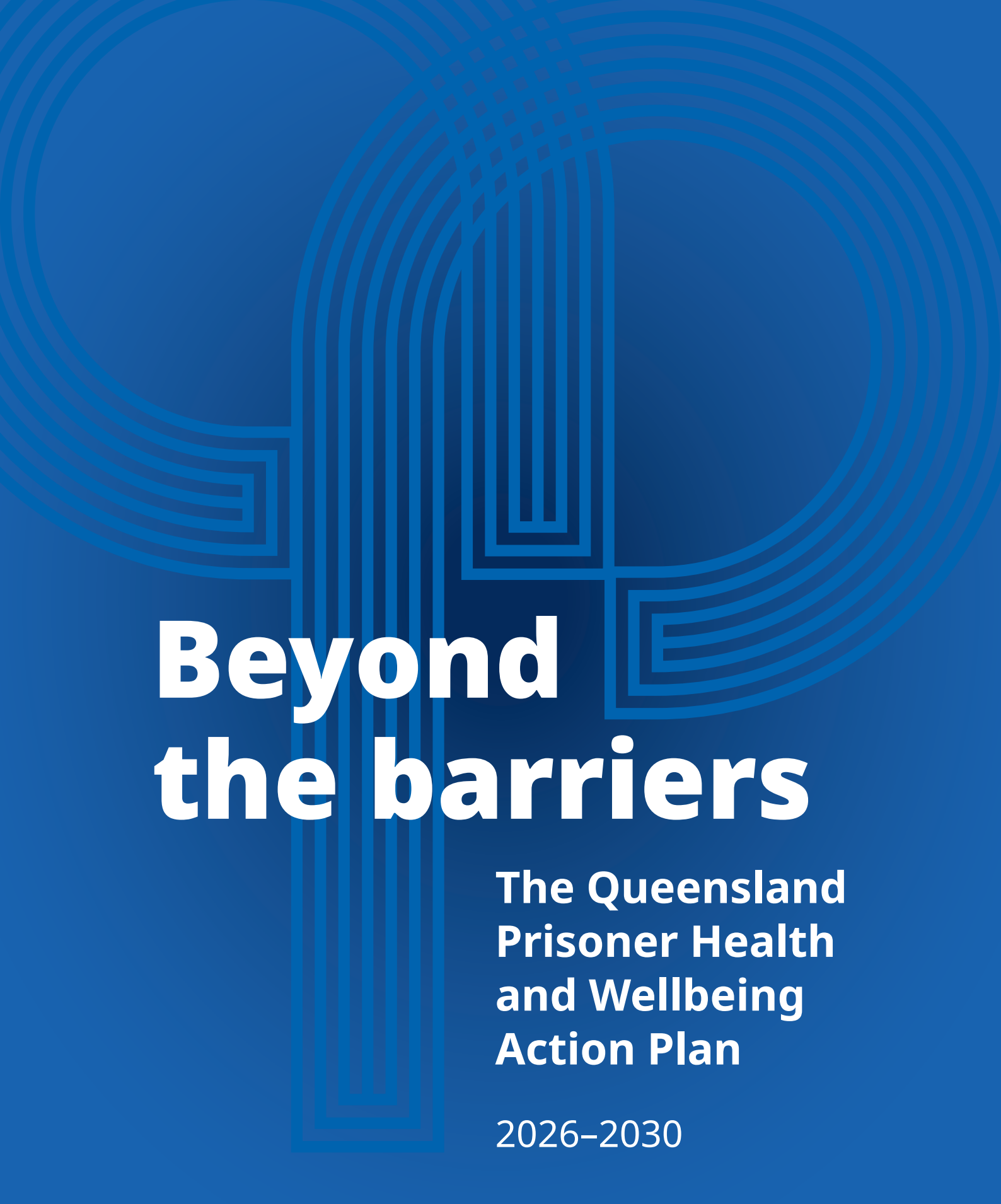




Beyond the barriers

The Queensland
Prisoner Health
and Wellbeing
Action Plan

2026–2030

For more information contact

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Acknowledgement of Country

We proudly acknowledge the Traditional Owners and Custodians of Country throughout Queensland and pay respect to those who have preserved and continue to care for the lands and waters on which we live and work, and from which we benefit each day. We recognise the strengths and knowledge that Aboriginal and Torres Strait Islander people provide to the health system and thank them for their ongoing contributions to the health system and the wider community. We extend this gratitude to all health workers who contribute to improving health and wellbeing outcomes with, and for, First Nations peoples and communities.

Impact of crime

We acknowledge the impact of crime on victims, perpetrator's families, and the Queensland community. Queensland Health acknowledges and respects that people's experiences with crime influences their personal views about crime, and the treatment of people in correctional centres. Queensland Health has obligations under state, national and international standards to deliver high quality health services to all people in Queensland, including people in correctional centres, regardless of their legal status.

Introduction: Why an action plan for Prisoner Health and Wellbeing?

'Beyond the Barriers: The Queensland Prisoner Health and Wellbeing Action Plan 2026-2030' (Beyond the Barriers) has been developed to respond to the current challenges and opportunities we face in supporting the health and wellbeing of people in Queensland correctional centres. Improving the health and wellbeing of adults in custody requires a shared commitment to work together across our health system, corrective services system, with other government agencies and non-government organisations. Beyond the Barriers will guide the system to improve the health and wellbeing of people in correctional centres which ultimately improves the health of the wider community and contributes to reducing reliance on crime and victims of crime. The Action Plan aligns with, and supports, the implementation of [Health Services Strategy 2032](#). The Action Plan recognises the opportunities for improving prisoner health services and is an important step on the journey to further improve health outcomes for people in prison.

The importance of prisoner health

Improving the health of people in prison means a healthier Queensland community. The health of people in prison is an important public health measure given that around 1,400 people each month are released from correctional centres in Queensland to live in the general community. Therefore, the health of people in prison affects the health of the wider community and vice versa.

The prison population is one of the most stigmatised and socially disadvantaged groups in Australia. Generally, people in correctional centres have lower levels of education, are socially isolated, financially dependent and experience higher rates of mental illness, chronic physical diseases, disability, communicable diseases, tobacco smoking, high risk alcohol consumption, problematic substance use and injecting drug use compared to the general population¹. Whilst poorer health is not the cause of criminal behaviour, people on entry to correctional centres generally experience a poorer level of health due to a range of lifestyle and socio-economic factors including a lack of stable housing, employment and an inability to access health services due to these circumstances.

First Nations people made up around two-fifths of the prison population in Queensland in 2025 and were 10 times more likely to be incarcerated than non-First Nations people. Focusing on the health and wellbeing of First Nations people in correctional centres is an important contribution to the Closing the Gap targets.

Our obligations

There are international, national and state obligations regarding the provision of healthcare for people in correctional centres. In May 2015, the United Nations Commission on Crime Prevention and Criminal Justice adopted the updated standard minimum rules for the treatment of prisoners, known as the 'Mandela Rules'. The Mandela Rules provide a contemporary blueprint to guide prison management in a way that is both safe and humane. In particular, rule 24 states that "prisoners should enjoy the same standards of health care that are available in the community and should

¹ AIHW, 2018

have access to necessary health-care services free of charge without discrimination on the grounds of their legal status.”²

The *Guiding Principles for Corrections in Australia* (revised 2025) provide a national intent for each Australian state and territory jurisdiction to continue to develop its own legislation, policies and performance standards in relation to managing people in prison. It is focused on outcomes or goals, rather than a set of absolute standards or laws. Outcome 4 of the Guiding Principles relates to the health and wellbeing of prisoners.

Other important obligations and strategies include the United Nations Rules for the treatment of women prisoners and offenders (known as the Bangkok Rules), Queensland’s *Human Rights Act 2019*, *Good Governance for Prison Health in the 21st Century* (United Nations Office on Drugs and Crime), the *Optional Protocol to the Convention against Torture* (OPCAT). These obligations are important in guiding how health services are provided for people in correctional centres.

The Queensland Health First Nations Health Equity Strategies focus on improving health outcomes for Aboriginal and Torres Strait Islander peoples by eliminating racism, increasing equitable access to healthcare, influencing social determinants that can impact health and wellbeing, and delivering culturally safe co-designed services. These Strategies are driven by legislative requirements for Hospital and Health Services (HHSs) to partner with First Nations communities.

The Queensland Government has also committed to developing an implementation approach to address issues raised in the *National Review of First Nations Health Care in Prisons report* (2024). This commitment aims to ensure the health and wellbeing of First Nations people in custody improves through collaborative effort and partnership with government agencies, First Nations stakeholders and the Aboriginal Community Controlled Health Services sector.

Background

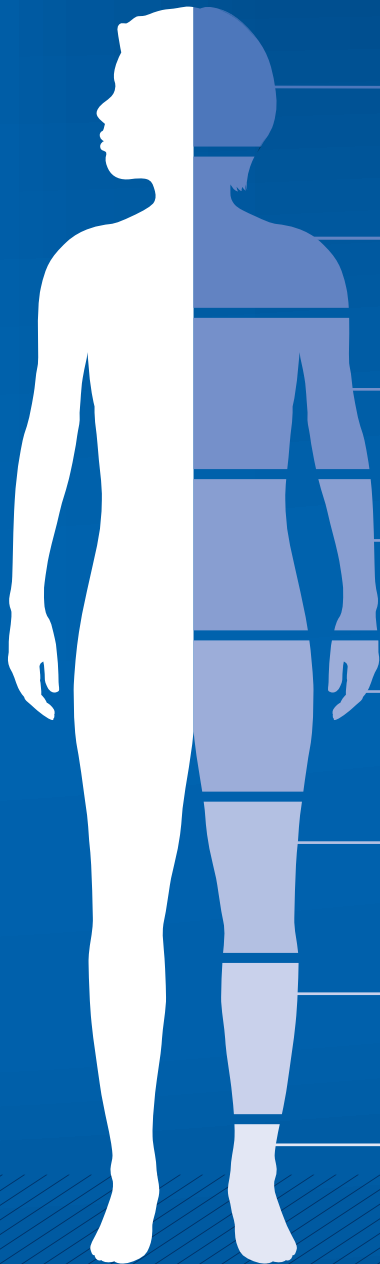
In 2008, responsibility for health services in correctional centres transitioned from Queensland Corrective Services to Queensland Health. This move ensured that health services for people in correctional centres were integrated into the broader health system, contributed to continuity of patient care, and ensured that health staff could be better supported professionally as part of the broader health system.

In 2012, with the implementation of the national hospital and health reforms, public offender health services in Queensland were devolved to relevant HHSs. While the delivery of offender health services was devolved, the coordinated central governance arrangement established to address state-wide or systemic issues was removed. The lack of coordinated central governance meant at that time, a limited system level response to a range of health service challenges, including the significant growth in the prisoner population across Queensland. The Office for Prisoner Health and Wellbeing was established in 2019 to provide statewide leadership and coordinated governance to address the key challenges and harness the opportunities for system improvements and service innovations. Following a business case for change in 2025, the Office for Prisoner Health and Wellbeing is now part of the Child Protection, Justice Health and Wellbeing team in the department.

Today there are 13 high security and seven low security correctional centres in Queensland, with prison health services delivering care and treatment to more than 11,500 people. In addition some people in prison require emergency, inpatient and specialist outpatient care these people are supported by HHSs based on clinical need.

² United Nations Standard Minimum Rules for the Treatment of Prisoners Rule 24

Prisoners in Queensland and Australia: a snapshot



43% of First Nations prison entrants had been advised by a health professional that they had a mental health condition at some point during their lives



1 in 2 have one or more chronic health conditions. Nearly half of First Nations prison entrants reported a past diagnosis of a chronic physical condition



71% of people entering prison reported they were current tobacco smokers and 48% wanted to quit



Almost 73% of people entering prison had used illicit drugs in the previous year, with 29% reporting they had injected drugs at some stage in their lives



Around 27% of prisoners were dispensed prescription medication on a typical day



There are greater incidences of communicable diseases particularly bloodborne viruses, and sexually transmissible infections (STIs) in the prison population than in the wider Australian community



In 2024-25 there were around 16,800 prison admissions, 16,400 people released from correctional centres and 12,500 transfers between correctional centres in Queensland



39% of prison entrants reported that a long-term health condition or disability affected their participation in everyday activities, education or employment



11,278 people

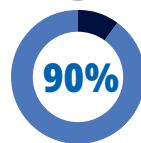
in QCS custody in Qld as at 30 June 2025

Median age of prisoners is 35 years, with around 1% aged over 50

Prisoners in Qld



female



male

36% of clinic visits

were initiated by the patient indicating healthcare seeking behaviour

Improving health outcomes for people in custody can be more challenging due to the lack of harm minimisation mechanisms available within Queensland correctional centres including those which are available to the general community.

Development of Beyond the Barriers Action Plan 2026-2030

Beyond the Barriers was developed in consultation with clinical and non-clinical representatives from Queensland Health, Queensland Corrective Services, people with lived experience, and other key non-government stakeholder groups including organisations representing First Nations people and services.

A workshop was held in July 2025 with 80 people participating. The focus of the workshop was to understand from different perspectives and build consensus on:

- the current state of Queensland prisoner health services and what is on the horizon
- imagining the future
- aligning to the future
- navigating a path to the future.

A summary of the workshop outcomes was distributed to attendees seeking comment and further input. A draft action plan was developed based on this summary and additional advice from those that attended the workshop and other stakeholders who have an interest in prisoner health services. The draft action plan was also informed by feedback from prisoner health service staff, Queensland Corrective Service officers and other key stakeholders from a review of the previous strategy along with input from people in correctional centres collected through surveys and face-to-face consultations conducted by Health Consumers Queensland.

The objectives and actions in this action plan incorporate the key themes from the workshop and feedback provided by prisoners and stakeholders.

About the Beyond the Barriers structure

This action plan is designed to guide the direction and outline specific actions to improve prisoner health outcomes in Queensland over the next five years and supports the government's key objective to reduce victims of crime. The document is structured around:

Vision: Our overarching goal.

Values: These are our shared core beliefs that are important for our service development, design and implementation.

Principles: These are our shared rules drawn from our values that guide our approach to meet our system objectives.

Objectives: These are our shared systemwide aims.

Actions: The actions are specific areas that endeavour to further improve the health of people in correctional centres and the wider community. These actions are in addition to ongoing service delivery responsibilities and are targeted to achieve our system objectives. The actions are not specific to meeting just one objective but may contribute to achieving several objectives. These actions do not limit services engaging in additional actions that further improve services for people. Any additional action should be consistent with the vision, values, principles, objectives and the statewide actions.

Beyond the Barriers is the next step on the journey to improve health services and health outcomes for all Queenslanders. It builds on the achievements in recent years including, but not limited to:

- implementation of a statewide Prisoner electronic Medical Record
- people in prison being able to purchase paracetamol and ibuprofen and manage it themselves, as in the wider community
- establishment of governance arrangements between Queensland Corrective Services and Queensland Health
- improved access to the Opioid Dependence Treatment program
- consumer experience and engagements activities to improve health services.

Beyond the Barriers: The Queensland Prisoner Health and Wellbeing Action Plan 2026-2030

Vision: To improve the health and wellbeing of people in prison which contributes to the health, wellbeing and safety of the Queensland community.

Values	Strengths based	Innovative, high quality and evidence-based	Impactful and sustainable
	We focus on people's strengths and enable them to improve their own health and wellbeing and respect their individual and cultural backgrounds.	We value innovative models that support staff to improve access to care and health outcomes for people in prison and the wider community, including but not limited to, information technology solutions.	We utilise a progressive care philosophy to ensure health and wellbeing doesn't start and stop at the prison gate. We seek to improve the health and wellbeing of people who have been or are in prison and that this improvement is sustainable.

Principles	Respectful	Responsive	Humane	Equality	Person-centred, trauma informed and culturally sensitive
	We recognise that all people including those deprived of liberty must be treated with respect.	We are timely, effective and culturally informed in responding to the health and wellbeing needs of people in prison, both at an individual and prisoner population level.	Our focus is on responding to people's health needs professionally and with care, regardless of the reason/s for imprisonment and in recognition of their inherent dignity as a human being.	We recognise that all people deprived of liberty have a right to access health services without discrimination and seek to provide services equivalent to those provided in the community.	We recognise the individual needs, cultures and backgrounds of people in prison and will ensure our services are responsive to their needs and preferences.

Objectives	1. Implement policies and innovations	2. Deliver quality healthcare	3. Build effective partnerships	4. Enable continuity of care
	To implement policies and innovations which enable people in prison to manage and improve their own health and contribute to their wellbeing.	To deliver humane, person-centred, responsive, efficient, and equitable health care that is equivalent to care available in the broader Queensland community.	To build strong and respectful partnerships and collaboration between Queensland Health, Queensland Corrective Services and other key stakeholders that will improve outcomes for people in prison and after release.	To give people the best opportunity to succeed while in prison and after release by connecting services in prison with those in the community to enable continuity of care.

Actions

The numbering of these actions is done so for ease of reference and does not reflect an order of implementation or identification of priority.

Action	Links to Objective	Anticipated outcomes	Lead role	Supporting roles
1. Implement standardised clinical assessment and treatment pathways statewide to reduce duplication, improve continuity of care as people enter, leave and move between custodial locations, and increase system efficiency.	1, 2, 4	- Better use of systems and clinical information to support health staff and reduce duplication of effort - Improved consistency of treatment from a patient perspective - QCS custodial and criminogenic rehabilitation systems are complementary to health systems	CPJHW	HHS
2. Create additional responsive, effective and culturally appropriate mechanisms for people in correctional centres to request and receive health services.	1, 2	- Improved health request forms and associated processes - Creation of non-appointment based ("drop in") clinics in accommodation areas - Establishment of satellite clinics in high secure accommodation areas	HHS	CPJHW
3. Establish partnerships with service providers and people with lived experience to support targeted initiatives for preventative and primary health care, and post release care and support.	3, 4	- Strengthened partnerships with Hospital and Health Service community screening and immunisation programs, non-government organisations, primary health networks and Aboriginal Community Controlled Health Organisations to achieve: - Better access to community standard preventative care - Improved continuity of care following release	HHS	CPJHW
4. Enhance and optimise the use of correctional centre infrastructure to improve timely and accessible health and wellbeing services.	1, 2	- Repurposed spaces within correctional centres to facilitate satellite clinics and telehealth services (related to Action 2) - QH and QCS working together to strengthen enablers for access to health services that are not clinically able to be delivered on-site, such as transport and escort resources - Correctional centre infrastructure enables prisoners to better manage their health and personal care needs and that prisoners have access to the necessary equipment that enhances independence	CPJHW and HHS	QCS
5. Upskill people in custody to support their own and others mental health and wellbeing.	1, 3	Engage a non-government organisation to provide training and education for prisoners to:	CPJHW	QCS and HHS

Action	Links to Objective	Anticipated outcomes	Lead role	Supporting roles
		○ better equip individuals with skills and strategies to improve their own and others mental health and wellbeing ○ expand the prisoner carer model to better meet the personal care needs of prisoners		
6. Implement and sustain self-managed medicines.	1, 2, 4	• Improved health literacy to ensure people are able to manage their healthcare needs upon release • Improved system efficiency and increased capacity of staff working in correctional centres to undertake more beneficial and impactful activities for people in their care	HHS	CPJHW
7. Expand the range of unscheduled medicines available to people and sustain access through buy-up.	1, 4	• Prisoners are able to purchase items, such as antacids and eye drops, to support their own health and wellbeing. These items will still be available from prisoner health services for people who do not wish to purchase through buy-up	CPJHW	QCS
8. Revise the Memorandum of Understanding for Prisoner Health Services and prisoner health service key performance indicators.	2	• A revised MoU which reflects Queensland Health and QCS priorities for the health and wellbeing of people in custody • Governance mechanisms in place that enable the system to operate in a way that will support delivery of this Action Plan • A revised list of Key Performance Indicators that support monitoring of prisoner health service delivery priorities in alignment with this Action Plan	CPJHW and HHS	QCS
9. Conduct regular consumer surveys, engage with people in prison, and receive complaints data to use the perspective of people with lived experience to continue to improve health service delivery.	2, 3	• Engage with patients, including through prisoner health satisfaction surveys which has occurred since 2021, to guide service improvement activities • Meet with Prisoner Advisory Committees in correctional centres as needed to gather input and feedback on health services and proposals for change	HHS	CPJHW
10. Recognise and develop our workforce and participate in national and statewide research	All	• A strong body of evidence to guide service development and planning • The Queensland perspective is considered and influences any national directions for prisoner health services	HHS and CPJHW	

CPJHW – Child Protection, Justice Health and Wellbeing

HHS – Hospital and Health Services

QCS – Queensland Corrective Services

Objectives in detail

Objective 1: Implement policies and innovations

This objective is a critical aspect required to improve the health and wellbeing of prisoners and thereby the health, wellbeing and safety of people in the wider Queensland community. As noted by the Australian Institute of Health and Welfare (AIHW), most people in correctional centres are there for short periods of time, and many move between correctional centres and the community multiple times. Therefore, improving the health of prisoners should be seen as a contributor to public health³.

In particular, a focus on evidence-based and innovative ways to improve the health of people in correctional centres are required in order to respond to the current and future needs of the population, in recognition that:

- The prison population in Queensland has grown on average by 6.75 per cent each year over the last decade, leading to a crowded environment including the available space in which to deliver health services. It is important that the impacts of overcrowding on prisoner wellbeing and health service capacity are considerations in any capacity uplift.
- There are a growing number of prisoners with high care needs, for example, aged people and people living with intellectual and/or physical disabilities. This is a shared responsibility between Queensland Health and Queensland Corrective Services and requires innovative approaches to meet the needs of these people in a humane way.
- A significant number of people in correctional centres are on remand and have not been to trial nor been sentenced. This creates additional challenges for planning and supporting a person's release back to community and continuity of care.

Objective 2: Deliver quality healthcare

This objective aims to reduce barriers to accessing health care by recognising the right of prisoners to humane treatment and quality health services based on clinical need, with the goal of delivering healthcare equivalent to the standard and that available in the broader Queensland community, free of charge and without discrimination on the grounds of a person's legal status.

Our aim is to provide proactive quality health care closer to where people in prison are accommodated, that is responsive to the needs and preferences of patients and is both efficient and effective. Our focus is to support people to manage their own health as much as possible, to prevent illness, promote wellness and to provide treatment as necessary. We recognise the trauma that people may have/or are currently experiencing and will account for this in our practice.

It is acknowledged that correctional centres are a unique environment that complicates health service delivery. The infrastructure and security requirements of the correctional centre environment and correctional centre routines are just some of the challenges faced in delivering community equivalent care. We will work to minimise these impacts with our key partners.

We will work within and across HHSs to ensure that people receive the care that they require based on their clinical need. This includes supporting access to specialist services, hospital care and rehabilitative support.

Objective 3: Build effective partnerships

Delivering excellence in prisoner health and wellbeing services requires strong partnerships and collaboration between Queensland Health, Queensland Corrective Services, other key agencies and stakeholders such as the Office of the Health Ombudsman. These informal and formal partnerships are essential for the delivery of effective quality health services.

This will require Queensland Health, Queensland Corrective Services and all stakeholders to work in genuine partnership, with clear respect for each other's roles, open and transparent communication, and a shared commitment to collaboration. Delivering improved outcomes will depend on both agencies being willing to adopt new ways of working, embrace innovation, and support transformational change rather than relying on historical practices. It will require a renewed effort to engage with prisoner advisory committees in each correctional centre to assist in service design and delivery.

³ AIHW, The health of people in Australia's prisons 2022

Queensland Health will work to establish partnerships with key stakeholders such as primary health networks, non-government organisations, and Aboriginal Community Controlled Health Organisations to enable better supports for people upon release and into the future.

Objective 4: Enable continuity of care

This objective aims to give prisoners the best opportunity to succeed in prison and after release by connecting services across agencies and between prison and the community, to ensure continuity of support.

The prison population is very fluid, with a large number of prisoners entering, re-entering or exiting correctional centres, often after short stays in custody. This can make continuity of care challenging. Continuity of care is supported by establishing partnerships and developing clear and consistent policies, procedures, practices and pathways to support service delivery and minimise the risks associated with fragmented care.

The implementation of the statewide Prisoner electronic Medical Record is an important tool that ensures that health information is available between prisoner health centres, hospitals, and primary health care providers in the community, including community-controlled health services for First Nations people.

It is the role of both Queensland Corrective Services and Queensland Health to ensure that, by the time prisoners leave custody or supervision, the skills they have gained as well as their improved health will enable them to lead productive, crime free lives.

Implementation and monitoring

Governance	The implementation of the Action Plan will be overseen by the Prisoner Health and Wellbeing Leadership Group which is comprised of senior representatives of Queensland Health including HHSs with responsibility for prisoner primary health, Queensland Corrective Services and other key stakeholders.
Planning	Business groups across Queensland Health, relevant HHSs, Queensland Corrective Services and other key stakeholder agencies will use the Action Plan to inform annual business planning processes and investment decisions. Content of the planning relevant to the Action Plan will be coordinated by Child Protection, Justice Health and Wellbeing team with input sought from relevant HHSs and Queensland Corrective Services.
Reporting	The performance against the plan will be reported to the Prisoner Health and Wellbeing Leadership Group and senior HHS representatives at routine performance meetings with the department.
Communication	Regular communication and progress updates will be provided to key stakeholders on the implementation of the Action Plan. This will also support the sharing of information from stakeholders that can inform actions and strategies implemented by Queensland Health in collaboration with Queensland Corrective Services as part of the Action Plan.
Review and measures	Implementation of the Action Plan will be managed through robust performance reporting; evaluation of service improvements, benefits and impact on prisoner health and wellbeing; and be subject to quality reviews and continuous improvement strategies. Key performance indicators developed for prisoner health services will provide a basis for measuring the following health service attributes: • Access • Effectiveness • Efficiency • Quality and safety • Patient satisfaction. The prisoner health satisfaction survey and the AIHW report on the health of Australian's prisoners will also be used as measures of progress. The Queensland Prisoner Health and Wellbeing Action Plan 2026-2030 will be reviewed by 2030.