

13/03/2011 (S1) REVIEW. - 10.45hrs - Spoke to Christopher this morning in his cell at St Johns at 10.30hrs

RISK REVIEW

Christopher stating he has been in a management unit for over two years and has recently started banging his head deliberately for the purposes of focusing attention on this matter. Christopher concerned that due to his extended time in management he is at high risk of re-offending when released. Christopher stating that he is entirely justified in using deliberate self harm to focus attention on his situation in order to change his placement and be transferred to Fulham Prison. Christopher cannot guarantee his own safety or the safety of others and clearly frustrated Christopher's conduct on (S1) obs. Reviewed by Consultant Psychiatrist on 12/3/2011 who clearly stated verbally to myself and colleague that Christopher wishes to remain at St Johns over the weekend. The same of which is reflected in the entry dated 12/3/11 - 12.30hrs.

18 THE FOLLOWING IS A TYPED FORMAT OF ABOVE MEDICAL REPORT

St Vincents Melbourne- Progress And Special Examination Sheet entry dated 10.45hrs, 13/03/ 2011.

"Spoke to Christopher this morning in his cell at St Johns at 10.30hrs "Christopher stating he has been in a management unit for over two years and has recently started banging his head deliberately for the purposes of focusing attention on this matter". "Christopher concerned that due to his extended time in management he is at high risk of re-offending when released".

"Christopher is using deliberate self harm to focus attention on this situation in order to change his placement and be transferred to Fulham Prison".

18 Prison medical reports.

14/3/11 1030: Chris moved in St. Johns and remains on S1 in obs cell 2. He presented settle easily engaged naked in a blanket rapped around him and a small superficial laceration on his forehead. Chris report frustration with "long periods" in "management" units and feels it will not help with his "rehabilitation" and lead to him "re-offending" when released. Chris reported the only way he felt he could get "help" was to self-harm through "banging" his head. P.T.D. ? spontaneous delusional material, normal speech, good eye contact, denied any current SASH ideation and "express future goal when released from prison".

Plan:- remain S1 in obs cell 2
 & R/U tomorrow and present @ 1030

DEPT OF JUSTICE VIC.
 RELEASED UNDER FOI

SPECIAL EXAMINATION SHEET

18

THE FOLLOWING IS A TYPED FORMAT OF ABOVE MEDICAL REPORT

St Vincents Melbourne- Progress and Special Examination Sheet (3) entry's dated 14/03/ 2011.

10.30: Chris moved in St Johns and remains on S1 in obs cell 2, 'he presented settle easily engaged' naked a blanket rapped around him and a small superficial laceration to his forehead, Chris report frustration with "Long periods" in "Management" units and "feels it will not help" with his "rehabilitation" and lead to him "re-offending" when released. Chris reported the only way he felt he could get "help" was to self-harm through "banging his head" 'P.T.D'. ? spontaneous delusional disorder material, normal speech, good eye contact, denied any current SASH ideation and "express future goal when released from prison".

"WEEKS LATER!"

Prisoner Name: Chris Binse

JAID/CRN: 43517

MODIFIED RISK MANAGEMENT PLAN		Date: <u>22/03/11</u>
Current Suicide Rating (e.g. S1, S2, S3) <u>S2</u>		Comments
Accommodation	e.g. Observation cell, single cell, shared cell; unit name or type; clothing; type of bedding and cell property allowed.	<u>Opting to remain in Ob cell. Can transfer to normal cell. No sharps, plastic bags or art.</u>
Observation Level	e.g. 4 minute, 6 random per hour direct observations; alternative requirements for day/night; in/out of cell; different daily activities; CCTV monitoring.	<u>4 meaningful conversations per day.</u>
Daily Activities/Régime	e.g. let out regime, access to services, privileges, work, programs.	<u>As per unit regime.</u>
Caseworker Support	e.g. interaction/monitoring required from caseworker and other custodial staff.	<u>As per unit regime.</u>
Other Support	e.g. social worker, family contact, peer support, chaplaincy, volunteers, VACRO, ISO, AWO.	<u>As per unit regime.</u>
Treatment Plan	e.g. health service contact, Therapeutic Services, appointments, contracts, assessments.	<u>Therapeutic services to follow-up.</u>
Significant Issues	e.g. court dates, visits, phone calls, family contact arrangements, anniversaries.	<u>Nil reported.</u>
RRT Composition and Endorsement		
Manager (or delegate):	[Redacted]	Signed: [Redacted]
Nursing Staff:	[Redacted]	Signed: [Redacted]
Supervisor:	[Redacted]	Signed: [Redacted]
Therapeutic Services:	[Redacted]	Signed: [Redacted]
Other Attendee:	[Redacted]	Signed: [Redacted]
(position):	[Redacted]	Signed: [Redacted]
Other Attendee:	[Redacted]	Signed: [Redacted]
(position):	[Redacted]	Signed: [Redacted]
Discussion Notes: <u>Chris has remained settled on the unit. He is adamant that he will stick to his plan of respecting unit staff and not acting out/harming. Chris denies current SASH ideations. He is able to guarantee his safety. Plans to continue his protest - remaining in the Ob cell in canvas. This has been offered to return to his normal cell and clothes have been handed back to him. Reduce to S3.</u>		
RRT Coordinator:	[Redacted]	Signed: [Redacted]

Yellow Original placed in prisoner's RMP; Pink Copy to SVCH; Green Copy to Clinical Services.

05.0400 30.08.08

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THE FOLLOWING IS A TYPED FORMAT OF ABOVE MEDICAL REPORT

Port Phillip Prison Modified Risk Management Plan doc dated 22/ 03/ 11.

Accommodation.-"**Opting to remain in Ob cell**", "**Can transfer to normal cell**".

Observation.-"**4 Meaningful conversations per day**".

Discussion Notes. "Chris has remained settled on the unit". "He is adamant that he will stick to his plan of respecting staff" and not acting out/ harming. Chris denies current SASH ideations. He is able to guarantee his safety. "**Plans to continue his protest**"-"**remaining in the Ob cell in canvas**". "**Has been offered to return to his normal cell**" and "clothes have been handed back to him" Reduce to S3. ¹⁸

¹⁸ Prison medical reports.

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