Justice Health and
Forensic Mental Health Network

Justice Health NSW Policy

Segregation, Confinement and Separation (Adolescents)

Issue Date: 02 October 2025

Together for
Healthier Tomorrows

Segregation, Confinement and Separation (Adolescents)

Policy Number 1.366

Policy Function Continuum of Care

Issue Date 02 October 2025

Next Review Date 02 October 2029

Risk Rating Medium

Summary This policy provides direction to Justice Health and Forensic Mental Health Network (Justice Health NSW) staff regarding obligations to monitor the health of young persons placed in segregation, confinement and separation by Youth Justice NSW.

Responsible Officer General Manager, Primary Care

Applies to
- ☐ Administration Centres
- ☐ Community Sites and programs
- ☐ Health Centres - Adult Correctional Centres or Police Cells
- ☒ Health Centres - Youth Justice Centres
- ☐ Long Bay Hospital
- ☐ Forensic Hospital

CM Reference POLJH/1366

Change summary
- Policy reviewed.
- Name changed to include separation and confinement.
- Terminology updated.
- Updated links and resources.
- Updated position titles

Authorised by Chair, Policy Steering Committee

Revision History

#	Issue Date	Number and Name	Change Summary
4	October 2025	1.366 Segregation, Confinement and Segregation (Adolescents)	• Policy reviewed • Name changed to include separation and confinement • Terminology updated • Updated links and resources • Updated position tiles.

3	July 2022	1.366 Segregation (Adolescents)	• Changes to position titles and business units • Changes in terminology • Update of links
2	December 2017	1.366 Segregation (Adolescents)	• Changes to position titles and business units
1	August 2016	1.366 Segregation (Adolescents)	• New Policy

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Justice Health and Forensic Mental Health Network

PO BOX 150 Matraville NSW 2036

Tel (02) 9700 3000

http://www.justicehealth.nsw.gov.au

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1. Preface

Segregation, confinement and separation of young persons is sometimes implemented by Youth Justice NSW (YJNSW) to protect the personal safety of that or any other detainee, or of any other person and to ensure the security, safety and good order of the YJNSW Centre. YJNSW under sections 16 , 19 and 21 of the *Children (Detention Centres) Act 1987* has authority to segregate, confine and separate young people who pose an immediate risk of danger to themselves or others or where it is perceived that the inclusion of the young person/s within the general population, will cause disruption to the centre and/or affect the safety of the young person/s. A young person is not to be segregated or separated by way of punishment.

Confinement may be used as punishment by YJNSW as per section 21 of the *Children (Detention Centres) Act 1987* due to the misbehaviour of a young person, for a maximum period of 12 hours for young people who are under 16 years of age, and 24 hours for young people who are 16 years and over.

Justice Health NSW is not responsible for the segregation, separation or confinement of young people in YJNSW facilities; however under clause 10 (2) of the *Children (Detention Centres) Regulation 2015 - NSW Legislation*, Justice Health NSW staff are required to 'visit daily' a young person who is segregated for more than 24 hours.

For the purpose of this procedure, the term segregation is taken to mean confined to a room for safety by YJNSW.

If a young person is segregated for more than 24 hours, YJNSW are required by law to ensure that:

- The Ombudsman's Office is notified.
- The segregation is carried out in accordance with a plan that is subject to monitoring by a psychologist.
- The young person is visited daily at a minimum, by Justice Health NSW staff.
- The Centre Manager is made aware, by YJNSW psychology or Justice Health NSW staff, if the young person is at risk of self-harm.
- The young person is checked by a YJNSW officer every 20 minutes; or if a YJNSW psychologist or Justice Health NSW clinician recommends more frequent monitoring, the young person is checked by a YJNSW officer at the intervals specified in that recommendation.

This policy provides direction to Justice Health NSW staff regarding obligations to monitor the health of young people placed in segregation, confinement or separation by YJNSW. The effect on young people in segregation, confinement or separation is very likely to be distressing, particularly for young people at risk of self-harm, have a history of trauma, experience mental health concerns, are Aboriginal and/or Torres Strait Islander, or have a cognitive disability or neurodivergence. As outlined in the *Report on the NSW Government's Implementation of the Recommendations of the Royal Commission into Aboriginal Deaths in Custody*, the NSW Government recognises the importance of ensuring that custodial practices are culturally appropriate and responsive to the needs of Aboriginal young people. It is therefore important to ensure that medical care provided to young people in segregation, confinement or separation is appropriate, responsive and culturally sensitive.

The *Children (Detention Centres) Act 1987* also allows YJNSW to separate an individual or a group of young people from the general population for the safety, security and good order of the centre.

Separation must not be used in response to misbehaviour or an incident; separation must not be misinterpreted as segregation. Young people in Separation follow an established locally developed Separation Routine for each categorised separation reason.

2. Policy Content

2.1 Mandatory Requirements

- Justice Health NSW staff must not recommend or dispute a YJNSW decision to place a young person in segregation, confinement or separation.
- A young person who is placed in segregation must be kept under daily observation by Justice Health NSW clinicians and have access to essential medical care. Daily observation includes visually sighting and conversing with the patient.
- As per the YJNSW Separation Procedure, the YJNSW Unit Supervisor much check the supervision requirements of the young person with Justice Health NSW Nurse Unit Manager (NUM)/Registered Nurse (RN) for medical and/or mental health reasons.
- All separation routines must provide access to the Justice Health NSW clinical team.

The provision of culturally sensitive, disability inclusive and appropriate mental health, social and emotional well-being health services must be provided, where possible. The Ministry of Health NSW *Aboriginal Mental Health and Wellbeing Strategy 2020-2025* must be adhered to for Aboriginal patients. NSW Health Policy PD2024_030 *Responding to the health care needs of people with disability* should be followed when considering young people with disability. Advice may also be sought from the Adolescent Aboriginal Mental Health Clinical Lead, the Justice Health NSW Manager Disability Strategy and Inclusion or Youth Justice Psychologists, if required.

2.2 Segregation of Young People

Pursuant to the YJNSW Segregation Procedure (April 2024), YJNSW staff are to follow all directions of Justice Health NSW clinical team once approval for segregation has been provided. YJNSW staff will contact the NUM (or delegate) or After-Hours Nurse Manager (AHNM) if:

- The young person requires medical assistance.
- The segregation period is extended; and/or
- Attendance is required at the YJNSW Risk Review Meeting.

Following the notification from YJNSW of a young person being in segregation for greater than 24 hours, the NUM or delegate at the Centre must establish the monitoring requirements of the young person such that.

1. The young person is monitored by Justice Health NSW clinician with a face-to-face observation at least once per day. A discussion with the young person is required to assess their current physical and mental health state. In addition, a Justice Health

NSW clinician will review a young person if requested by the young person themself or a YJNSW Officer in a timely manner, by prioritising the needs of the request.

2. The Justice Health NSW clinician enters a progress note of each daily encounter to the young person's electronic health record and completes a Health Problem Notification and Escort Form (HPNEF) which includes the young person's current physical, mental health and emotional wellbeing. If there is nothing of concern, 'Nil issues identified' must be recorded. A copy of the HPNEF is provided YJNSW and a copy signed by YJNSW must be placed in the young person's health record.
3. If the daily review identifies primary health concerns, the Justice Health NSW clinician should provide all appropriate care in a timely and safe manner and ensure referrals are made to the General Practitioner (GP) for follow up, if required. If the matter is urgent, the Remote Offsite Afterhours Medical Service (ROAMS) should be contacted by calling [redacted]
4. If the daily review indicates mental health concerns, the clinician must notify the Dual Diagnosis Clinical Nurse Consultant (DDCNC) or Psychiatrist and ensure the young person is placed on the relevant mental health wait list. Further information can be found at Clinical Applications Business Process AMH Dual Diagnosis CNC Waiting List. If the matter is urgent and occurs during business hours, the rostered On-Call Adolescent Psychiatrist should be contacted, and after- hours, ROAMS Psychiatry should be contacted by calling [redacted]
5. If the young person identifies as Aboriginal and/or Torres Strait Islander, the Aboriginal Mental Health Clinical Lead should be notified via the local Daily Handover/Patient of Concern document and consulted to ensure culturally responsive management of clinical issues.
6. The young person receives a comprehensive health assessment every seven days whilst they remain in continuous segregation. A health assessment must be conducted by nursing staff. The assessment of the young person's current physical state, mental state and any potential risks are to be documented on a HPNEF and in the electronic health record. The health assessment should be completed in the clinic environment unless there is a risk to the safety of staff or the young person. YJNSW have the final decision regarding location and security matters. Restraints should be removed if the assessment warrants and it is safe to do so.
7. If Justice Health NSW staff encounter any difficulties in accessing the young person appropriately, the NUM or delegate must consult with the Centre/Duty Manager. All security provisions remain the responsibility of YJNSW. If access to the young person is unresolved, this must be escalated immediately to the Service Director Adolescent Health (SDAH) or delegate or if after hours, to the After-Hours Nurse Manager (AHNM). This must be documented in the health record.
8. If the NUM or delegate has any concerns about the young person's wellbeing, these concerns must be discussed with the Centre/Duty Manager in the first instance. If these concerns are not adequately addressed, it must be escalated to the SDAH who will seek the necessary advice and take appropriate action. Where there is sufficient concern, the SDAH must notify the General Manager Primary Care (GMPC). The GMPC will then notify the Chief Executive to determine if the matter constitutes a notification to the Ombudsman.

9. All incidences of young people in extended segregation over 24 hours must be reported to the SDAH via the Safety Huddle.

2.3 Segregation of Young People with Mental Health Concerns

If a young person is identified as having mental health concerns and is segregated, the NUM or delegate must immediately contact the DDCNC, Psychiatrist, or AHNM.

If the assessment is such that the mental health concern is manageable while the patient is segregated, a joint management plan should be developed by staff nominated by the YJNSW Centre/Duty Manager and Justice Health clinical team.

The plan must include:

- details of those behaviours that if observed, would constitute a deterioration in the young person's mental health and activate an unscheduled review.
- how behavioural changes will be managed; and
- frequency of scheduled reviews.

Appropriate alerts must be entered into the young person's electronic health record by Justice Health NSW clinical staff. The alert must refer to the young person's management plan. If the young person is assessed as having a deteriorating mental state, the clinician must inform the YJNSW Centre/Duty Manager, both verbally and by HPNEF to request increased monitoring of the young person by YJNSW staff.

If a young person with an identified mental health concern has been in segregation beyond one week, Justice Health NSW staff must arrange for the young person to be assessed by a psychiatrist or DDCNC as soon as possible. The purpose of the psychiatric examination is to review the young person's mental state, to assess for any serious mental disorder and to determine any risks to the young person's mental health due to continued segregation. Following the psychiatric examination, the NUM or delegate will advise the YJNSW Centre/Duty Manager of any further psychiatric recommendations affecting the management of the young person. This advice must be provided verbally and followed up via the HPNEF.

2.4 Confinement

As per the YJNSW Misbehaviour Policy (September 2024) confinement is the highest tariff punishment for misbehaviour and other punishment options must be considered on each occasion before resorting to confinement. Confinement can be used as a punishment for misbehaviour, for a maximum period of 12 hours for young people who are under 16 years of age, and 24 hours for young people who are 16 years and over.

As the maximum period of confinement does not exceed 24 hours Justice Health Staff are not required to complete a daily review. However, the young person may request medical review themselves.

During the inquiry to the incident of misbehaviour, YJNSW may seek evidence/advice from the Justice Health NSW clinical team.

2.5 Separation of Young People

Pursuant to the YJNSW Separation Procedure (August 2021), the Unit Supervisor is to check supervision requirements with the Justice Health clinical team for medical and/or mental health reasons, once they have been informed that a young person will be following a separation routine.

Following the notification from YJNSW of a young person being placed in separation for greater than 24 hours, the Nursing Unit Manager (NUM) or delegate at the Centre must establish the monitoring requirements of the young person as outlined in 2.2 Segregation of Young People.

3. Definitions

Must

Indicates a mandatory action to be complied with.

Should

Indicates a recommended action to be complied with unless there are sound reasons for taking a different course of action.

Segregation

Segregation is for the personal safety and protection of young people and/or employees in response to an event. A young person may be segregated only when there is an immediate and unacceptable danger or risk of harm presented to:

- an employee, by that young person
- that young person being alone (i.e., self-harm)
- a young person by another young person Segregation is not a punishment.

Separation

Separation is used for the safety, security, and good order of a centre; where it is perceived that the inclusion of the young person within the general population may cause disruption to the centre and/or affect the safety of the young person. Separation categorised reasons are for:

- Females admitted to a male Youth Justice Centre (gender)
- Young people admitted to a centre that accommodates an older population of young people (age) and young people with other vulnerabilities (vulnerability)
- Young people classified as A1o & A1b waiting for transfer to another centre (classification)
- Young people classified as A1o & A1b newly admitted to a centre prior to completion of an initial risk assessment (classification)
- Young people newly admitted to a centre on serious children's indictable offences or terror related charges prior to completion of an initial risk assessment (classification)

Confinement

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Medical Isolation

In the context of NSW Health, generally refers to the practice of isolating a person who is diagnosed with a contagious illness, to prevent the spread of infection.

4. Related Documents

Legislations	*Children (Detention Centres) Act 1987 No 57* *Children (Detention Centres) Regulation 2015* *Mental Health Act 2007 No 8 - NSW Legislation* *Work Health and Safety Act 2011 No 10 - NSW Legislation*
Justice Health NSW Policies, Guidelines and Procedures	1.010 *Access to Patients Medical Emergencies* 1.120 *Management of a Death* 1.235 *Health Problem Notification and Escort Form (Adolescents)* 1.380 *Clinical Care of People Who May Be Suicidal* 5.110 *Work Health & Safety*
Justice Health NSW Forms	JUS005.002 *Health Problem Notification and Escort Form (Adolescents)*
NSW Health Policy Directives and Guidelines	PD2024_030 *Responding to the health care needs of people with disability*
Other documents and resources	YJNSW Self-harm and Suicide Prevention Policy YJNSW Segregation Procedure YJNSW Separation Procedure YJNSW Misbehaviour Policy YJNSW Misbehaviour Procedure

Note: Some publicly available Youth Justice NSW (YJNSW) documents may be redacted. Requests for access to full documents must be made directly to YJNSW.