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GUIDELINES 800-1	In Effect: 2015-04-27
	Last Review: 2011-04-18
	Due for Review: 2017-04-27

Hunger Strike: Managing an Inmate's Health

PROGRAM ALIGNMENT	Custody
OFFICE(S) OF PRIMARY INTEREST	Health Services Sector
ONLINE @	<ul style="list-style-type: none"> http://infonet/cds/cds/800-1-gl-eng.pdf http://infonet/cds/cds/800-1-gl-fra.pdf http://www.csc-scc.gc.ca/text/plcy/cdshtm/800-1-gl-eng.shtml http://www.csc-scc.gc.ca/text/plcy/cdshtm/800-1-gl-fra.shtml
AUTHORITIES	<ul style="list-style-type: none"> Corrections and Conditional Release Act (CCRA), section 89
PURPOSE	<ul style="list-style-type: none"> To assess and manage the health of inmates who choose to engage in a hunger strike
APPLICATION	Applies to staff working with inmates engaged in a hunger strike

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RESPONSIBILITIES AND PROCEDURES

All Staff

1. Working in collaboration, staff must try to resolve the issue(s) identified by the inmate as the reason(s) for declaring a hunger strike.
2. As prolonged engagement in a hunger strike may cause serious personal injury/harm and/or death, Do Not Resuscitate Orders and directions regarding care within Advance Directives do not apply. For any inmate who loses capacity to make a conscious choice, or becomes unconscious, the Correctional Service of Canada (CSC) staff will intervene to preserve life.

Inmate Declaration of a Hunger Strike (Days 0-6)

Nurse

3. Upon learning of a potential or actual hunger strike, immediately verify the status of the declared hunger strike by asking the inmate if and for how long he/she has gone without solid food and fluids (determine if he/she is drinking water).
4. Review the inmate's health care record.
 - a. Determine the potential health risks of fasting for the inmate
 - b. Determine if there are any known medical conditions that would warrant intervention before seven days.
5. Counsel the inmate to ensure he/she is making an informed decision.
 - a. Ask the inmate his/her reasons for declaring a hunger strike
 - b. For the inmates on methadone or suboxone, see section on hunger strikes in [Specific Guidelines for the Treatment of Opiate Dependence \(Methadone/Suboxone®\)](#) for information on counselling regarding involuntary tapers
 - c. Advise the inmate of the potential negative health consequences of fasting so that he/she can make an informed decision about whether to continue.
6. With the inmate's consent, conduct an initial physical and mental health assessment.
 - a. Review all medications and consult with the institutional Physician to determine any required changes in dosage, or methods of distribution and/or administration

- b. For inmates on methadone or suboxone, see section in [Specific Guidelines for the Treatment of Opiate Dependence \(Methadone/Suboxone®\)](#) for information on involuntary tapers
 - c. Include vital signs, urine screen for ketones, weight and signs of dehydration in the initial health assessment.
7. Assess the ability of the inmate to understand the consequences of the decision to fast.
 8. Refer to mental health professionals as necessary.
 9. Refer to the Dietitian.
 10. Inform the Correctional Manager of the declaration of a hunger strike.
 11. Inform the Chief, Health Services, of the declaration of a hunger strike when the Chief next reports to work.

Correctional Manager

12. The Correctional Manager will direct correctional staff to monitor and record the following in the unit log book:
 - a. whether the inmate is accepting/preparing food
 - b. whether food is missing from the meal tray and/or the inmate is eating
 - c. whether the inmate is attending the dining area
 - d. whether the inmate is ordering food items from the canteen or has food items in his/her cell.
13. The Correctional Manager will direct the correctional staff to submit a summary of the information entered into the log book on an observation report before the end of their shift.

Hunger Strike (Day 7 and Ongoing)

Nurse

14. Conduct a daily assessment of the inmate's physical and mental health.
 - a. With the inmate's consent, assess vital signs, urine screen for ketones, weight change and signs of dehydration
 - b. If the inmate refuses to consent to these assessments, observe the inmate's condition daily to monitor for signs of weakness, lethargy, altered mental state, pallor, tremor, dehydration, etc

- c. Assess the status of any known medical condition that may be affected by a hunger strike (e.g. diabetes)
 - d. Assess the ability of the inmate to understand the consequences of the decision to fast and refer to mental health professionals as necessary.
15. As required, counsel the inmate to ensure he/she is making an informed decision and to help him/her decide to end the hunger strike.
16. List the inmate for an assessment by the institutional Physician on or about day 7 after declaration of the hunger strike or sooner if warranted, to determine what additional medical observations, assessments and interventions are required.
17. Keep the institutional Physician, Dietitian and Chief, Health Services, apprised of the inmate's status. List the inmate for ongoing appointments with the institutional Physician as required.

Correctional Manager

18. The Correctional Manager's responsibilities are the same as those for days 0-6.

Institutional Physician

19. As required, assess the inmate and advise regarding changes in care.
20. Consult with mental health professionals as necessary regarding the need for counselling and assessment of mental status.
21. As required, counsel the inmate to ensure he/she is making an informed decision and to help him/her decide to end the hunger strike.

Chief, Health Services

22. Ensure timely assessments of inmates by the Nurse and institutional Physician as outlined in previous sections.
23. For inmates on methadone/suboxone, ensure the institutional Physician refers to section on hunger strikes in [Specific Guidelines for the Treatment of Opiate Dependence \(Methadone/Suboxone®\)](#) for information on counselling and dosage adjustments.
24. Inform the Parole Officer once the inmate has declared a hunger strike and when the inmate has reached day 7 after the declaration of a hunger strike.

25. Ensure the Institutional Head, the Regional Director, Health Services, and others with a need to know are kept informed of the inmate's health status.

Reporting

Chief, Health Services

26. Report to the Manager, Clinical Services, when an inmate has declared a hunger strike and again when an inmate has reached day 7 after the declaration of a hunger strike.
27. After day 7, provide daily updates of the inmate's health status or change in hunger strike status.

Manager, Clinical Services

28. Once the inmate has reached day 7 after the declaration of a hunger strike, report weekly to the Regional Director, Health Services. Report more frequently if the inmate's health condition warrants.

Institutional Head

29. Within 48 hours of an inmate declaring a hunger strike, report the incident as per Annex C of [CD 568-1 – Recording and Reporting of Security Incidents](#).

ENQUIRIES

30. Strategic Policy Division
National Headquarters
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Assistant Commissioner,
Health Services

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ANNEX A

CROSS-REFERENCES AND DEFINITION

CROSS REFERENCES

[CD 568-1 – Recording and Reporting of Security Incidents](#)

[CD 800 – Health Services](#)

[GL 800-3 – Consent to Health Service Assessment, Treatment and Release of Information
Specific Guidelines for the Treatment of Opiate Dependence \(Methadone/Suboxone®\)](#)

Provincial/territorial mental health legislation and regulations

Provincial/territorial standards of practice for health care professionals

DEFINITION

Hunger strike: at CSC, an inmate is on a hunger strike when both of the following are present:

- a. the inmate declares himself/herself as being on a hunger strike, and
- b. the inmate refuses all solid food and all fluids except water for a period of seven days from declaration.

Note: Fasting for religious or spiritual purposes will NOT be construed as a hunger strike.