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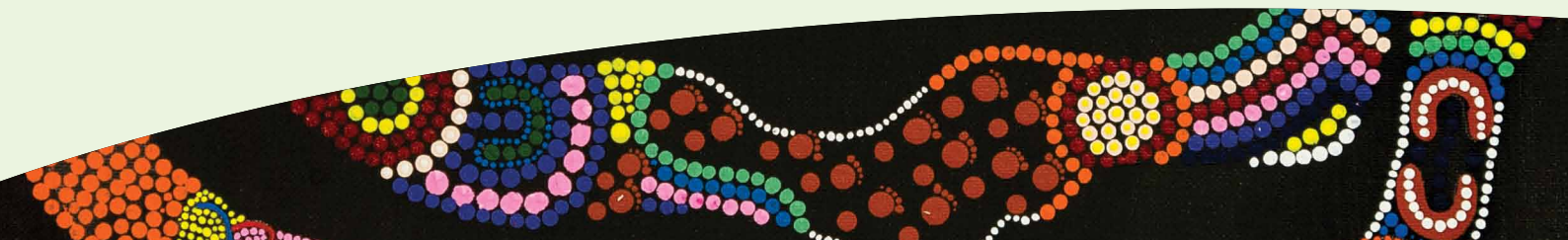
REPORT OF A REVIEW OF A CORRECTIONAL CENTRE

by the

**ACT INSPECTOR OF
CORRECTIONAL SERVICES**

*Healthy Prison Review
of the Alexander
Maconochie Centre 2019*

ics.act.gov.au





Rainbow Serpent (above and cover detail)
Marilyn Kelly-Parkinson of the Yuin Tribe (2018)

*'There are no bystanders –
the standard you walk past
is the standard you accept'*

— Lieutenant General David Morrison,
AO, Chief of Army (2014)

ABOUT THIS REPORT

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ACT Inspector of Correctional Services
GPO Box 158,
Canberra ACT 2601

T 1800 932 010

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We acknowledge the traditional custodians of the ACT, the Ngunnawal people. We acknowledge and respect their continuing culture and the contribution they make to the life of this city and this region.

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*Healthy Prison Review
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Maconochie Centre 2019*

Neil McAllister
ACT Inspector of Correctional Services
November 2019



ACT INSPECTOR OF CORRECTIONAL SERVICES

P 1800 932 010 | E ICS@act.gov.au | GPO Box 158, Canberra City ACT 2601

Letter of Transmittal

The Speaker
ACT Legislative Assembly
Civic Square, London Circuit
CANBERRA ACT 2601

Dear Madam Speaker

I am pleased to provide you with a report entitled 'Report of a Healthy Prison Review of the Alexander Maconochie Centre 2019' for tabling in the Legislative Assembly pursuant to Section 30 of the *Inspector of Correctional Services Act 2017* (ACT) (the Act).

This report was prepared pursuant to Section 17(1)(a) and (d) of the Act.

As required under Section 29 of the Act a draft copy of the full report was provided to the Minister for Corrections and Justice Health and the Acting Director-General of the Justice and Community Safety Directorate. Given that some matters mentioned in the report fall within the responsibilities of other portfolios, relevant sections of the report were provided to the Minister for Health and the Minister for Children Youth and Families and their respective Directors-General. Comments received from Ministers and Directors-General were given full consideration in the preparation of the final report.

Please note that Appendix 4 of the report (Intelligence and Security) is not attached to the public version of the report because, pursuant to Section 28(1) of the Act, I have determined that there are public interest considerations against disclosure of the information in that Appendix (Section 28(2)(a) of the Act applies) and that those considerations outweigh the public interest in favour of disclosure.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Neil McAllister'.

Neil McAllister
ACT Inspector of Correctional Services
November 2019

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FOREWORD

This report covers the first Healthy Prison Review of the Alexander Maconochie Centre (AMC) conducted by the ACT Office of the Inspector of Correctional Services (OICS). I am indebted to the Deputy Inspector, Rebecca Minty, who carried a significant workload for the planning and execution of the review. Rebecca was ably assisted and supported by our Assistant Inspector, Holly Fredericksen. I think it is worth noting that the entire staffing of OICS amounts to 2.2 operational FTE.

Clearly, we could not undertake such a complex review in any acceptable timeframe or have the broad range of relevant skills and knowledge to cover all aspects of such a review. In that regard, we were fortunate to obtain the services of a team of subject experts (see **Appendix 1**).

I want to make clear that the focus of the review was the *AMC in 2019* rather than a retrospective treatment of the history of the AMC between 2009 and 2019. Our intention was to objectively “benchmark” the AMC in 2019 as a comparator for subsequent reviews.

Concerning the conduct of the review, I am appreciative of the support and cooperation we received from ACT Corrective Services starting with Jon Peach, Executive Director, the senior management team at the AMC and all the uniformed and non-uniformed staff we had contact with during the review. I particularly want to thank our ACTCS liaison officer, Vanessa Dumbrell, for her patience in attending to our many requests for information.

I am also appreciative of the support we received from AMC detainees, many of whom completed the detainee survey and freely answered questions put to them by the review team.

It is also important to acknowledge the support and assistance we received from a number of non-government individuals and organisations who made important contributions to the review. These include Neil Morgan, the (then) Inspector of Custodial Services (WA) for lending us two of his very capable staff; Marcia Williams and Pip Courtney-Bailey (Women’s Centre for Health Matters) and the female detainees in the AMC that provided detailed input through focus groups and a submission; Eliza Moloney (ACT Council of Social Services); and Deborah Evans (Tjillari Justice) for each facilitating community forums to enable input to the review. Julie Tongs OAM, CEO Winnunga Nimmityjah Aboriginal Health and Community Services, also facilitated meetings with former detainees for which we are grateful.

I also need to thank Ibolya (“Ibi”) Losoncz from the ANU for her invaluable help and advice on the design of our surveys and for the data analysis she undertook on the completed surveys.

Finally, I would like to thank Dr Helen Watchirs OAM, President of the ACT Human Rights Commission, her Commissioners and the HRC team for their support and encouragement of our work.



Neil McAllister
6 November 2019

GLOSSARY

ABS	Australian Bureau of Statistics
ACTCOSS	ACT Council of Social Service Inc.
ACTCS	ACT Corrective Services
AMC	Alexander Maconochie Centre
Buy-up	The process where detainees purchase goods from a list of approved items
CM Act	<i>Corrections Management Act 2007 (ACT)</i>
CO	Corrections Officer ("prison officer" in other jurisdictions)
Cohorts	Groups of detainees that cannot mix together e.g. rival gangs
CPSU	Community and Public Sector Union
CTU	ACTCS Court Transport Unit
Custodial staff	Corrections Officer in direct supervision/control of detainees
Double-up	Cell designed for one person, converted by installing a double bunk
ED ACTCS	Executive Director ACTCS ("Commissioner" in other jurisdictions)
Gatehouse	Staff/visitor entrance to the AMC
GMCO	General Manager Custodial Operations
HHC	Hume Health Centre – AMC medical centre
HR Act	<i>Human Rights Act 2004 (ACT)</i>
HRC	ACT Human Rights Commission
ICS Act	<i>Inspector of Correctional Services Act 2017 (ACT)</i>
Indigenous	Aboriginal and Torres Strait Islander
Inspector	ACT Inspector of Correctional Services
JACS	ACT Justice & Community Safety Directorate – responsible for ACTCS
Mainstream	Non-protection detainees
NAIDOC	National Aborigines and Islanders Day Observance Committee

OICS	Office of the Inspector of Correctional Services (ACT)
OV	Official Visitor – independent person to whom detainees can make complaints
Prison PC	Computer system used by detainees at the AMC
Protection	Regime for detainees at risk of assault or intimidation by other detainees
Remand Review	Report of a Review of a Correctional Service by the ACT Inspector of Correctional Services: The care and management of remandees at the Alexander Maconochie Centre 2018
ROGS	Report on Government Services (Commonwealth Productivity Commission)
SAB	Sentence Administration Board
Sally port	Secure vehicle entrance to the AMC
Shiv	Cutting/stabbing implement
Standards	ACT Standards for Adult Correctional Services
Standover	Detainee-on-detainee threatening behaviour to gain something
Structured day	Timetable of activities such as work, education, programs and sport.
Winnunga	Winnunga Nimmityjah Aboriginal Health and Community Services

CONSOLIDATED RECOMMENDATIONS

Recommendation 1:	That ACTCS implement a system or systems for the central recording of data on strip searching, use of force, separate confinement and segregation orders, time out of cells and incidents in a manner that facilitates inspection by oversight bodies and provides capacity for data interrogation and report generation.
Recommendation 2:	That the ACT government acknowledge and respond to concerns expressed by Court Transport Unit staff about the transport and detention of children and young people by the Court Transport Unit.
Recommendation 3:	That ACTCS provide male and female peer support workers in the admissions centre to support detainees on their arrival to the AMC.
Recommendation 4:	That the induction process for women be given urgent attention with regard to maximising time out of cells, provision of peer support and provision of up-to-date information about their obligations, rights and AMC routines.
Recommendation 5:	That practices for determining and maintaining protection placements be evidence-based, appropriately documented, and subject to a review mechanism.
Recommendation 6:	That ACTCS finalise and implement the Incentives and Earned Privileges Policy as a matter of urgency and include a review and evaluation mechanism of the effectiveness and impact of the new policy after 12 months.
Recommendation 7:	That ACTCS finalise and implement the detainee Disciplinary Policy as a matter of urgency and include a review and evaluation mechanism of the effectiveness and impact of the new policy after 12 months.
Recommendation 8:	That ACTCS address the significant problems with the detainee disciplinary process including arbitrary and inconsistent application, and low awareness of right to review as a matter of urgency.

Recommendation 9:	That ACTCS develop and implement a policy for the management and protection of human information sources.
Recommendation 10:	That ACTCS conduct a risk review to identify which internal fences and gates need to be designated as security barriers, and once identified, fences that do not meet the minimum security standards described in this report must be replaced as a matter of urgency and unnecessary gates removed.
Recommendation 11:	That ACTCS give serious consideration to a total redesign of the AMC visitor/staff pedestrian entry to better optimise entry barrier control and the efficient movement of people in and out of the centre.
Recommendation 12:	That ACTCS take immediate action to develop and implement a random cell and communal area search program for the AMC.
Recommendation 13:	That ACTCS review cell searching training and undertake refresher training for custodial staff who may be required to search cells and other areas at the AMC.
Recommendation 14:	That ACTCS erect clearer signage at the AMC boundary warning that people and vehicles entering are subject to searching for prohibited items.
Recommendation 15:	That ACTCS review the number of K9 drug detection teams at the AMC and explore the possibility of employing a K9 mobile phone detection team either as part of the existing K9 Unit or on occasional loan from another jurisdiction.
Recommendation 16:	That ACTCS develop inventories to accurately record and account for all armoury equipment and supplies across the AMC.
Recommendation 17:	That ACTCS develop and implement clear instructions for staff regarding the recording, control and disposal of contraband and provide necessary training to relevant staff.

Recommendation 18:	That ACTCS review the current state of portable drug detection technology and its possible application at the AMC.
Recommendation 19:	That ACTCS maintain a consolidated strip search register as required under section 110 of the <i>Corrections Management Act 2007</i> .
Recommendation 20:	That ACTCS source conflict resolution and de-escalation training for staff to better equip them to deal with verbally aggressive detainees.
Recommendation 21:	That ACTCS develop a set of qualitative and quantitative Key Performance Indicators (KPIs) for the AMC that reflect the unique nature of the AMC as a prison with diverse operational challenges and complexities.
Recommendation 22:	That ACTCS develop an asset management plan for the AMC to ensure that there is timely and budgeted replacement or refurbishment of major plant and equipment at the AMC.
Recommendation 23:	That ACTCS develop a facility maintenance plan for the AMC to ensure that there is timely and budgeted attention given to maintaining the AMC's physical infrastructure.
Recommendation 24:	That, as a matter of urgency, ACTCS undertake a comprehensive electrical safety "test and tag" program at the AMC in accordance with ACT law.
Recommendation 25:	That ACTCS re-establish a position of "Fire Warden" or "Fire Awareness Officer" at the AMC as soon as possible.
Recommendation 26:	That the ACT government commission an independent review of the ACTCS Corrections Officer custodial recruit training course, including a comparative analysis of similar courses in other jurisdictions, and the adequacy of on-going and refresher training provided to all AMC and Court Transport Unit staff.

Recommendation 27:	That ACTCS publicly commit to an updated timeframe for bringing policies and procedures to a standard the community should expect for a custodial environment.
Recommendation 28:	That ACTCS consult with the oversight entities when developing and updating policies and procedures.
Recommendation 29:	That ACTCS notify all current and future policies and procedures, including those that are restricted, on the ACT Legislation Register as individual notifiable instruments.
Recommendation 30:	That ACTCS review all restricted policies and procedures with the aim of making as many as possible fully unrestricted or unrestricted with necessary redactions of material that would be likely to disclose information that may endanger public safety or undermine justice, security or good order at a correctional centre.
Recommendation 31:	That ACTCS review the \$50 per week per detainee self-catering allowance, noting that the allowance has not been increased in at least nine years, and in future, ensure that the allowance is adjusted annually in accordance with the Consumer Price Index.
Recommendation 32:	That ACTCS develop, jointly with current detainee delegates, a Terms of Reference for delegates meetings to clearly articulate the objectives and expectations for that forum, with an emphasis on constructive engagement.
Recommendation 33:	That ACTCS engage with oversight entities through the AMC Oversight Agencies Collaborative Forum to consider ways to improve awareness of external oversight bodies amongst detainees.
Recommendation 34:	That ACTCS take active steps through the provision of in-kind or financial support, to recognise the value that community organisations can bring to the correctional environment by providing certain programs, services and activities.

Recommendation 35:	That the eligibility criteria, expected timeframes and other relevant information about the Transitional Release Program be made public and clearly communicated to detainees, and ACTCS make a concerted effort to encourage female detainees to apply and support their full participation if eligible.
Recommendation 36:	That ACTCS seek an independent assessment on the staffing profile and capacity required for the Women's Care Team to meet the objective of a gender responsive correctional environment, with sufficient meaningful activity, and develop a plan to reach the minimum acceptable level within 1 year.
Recommendation 37:	That ACTCS engage an independent Indigenous expert to review the security rating system to ensure that it is free of any "cultural bias" that could result in Aboriginal and Torres Strait Islander detainees being over-classified.
Recommendation 38:	That the ACT government, as a matter of urgency, fund the creation of a new position in the Indigenous Services Unit to work specifically, but not exclusively, with female Indigenous detainees and that this position be designated as female-only and Indigenous-only.
Recommendation 39:	That the ACT government fund the creation of a new administration officer position in the Indigenous Services Unit at a level comparable to other such positions in ACTCS.
Recommendation 40:	That ACTCS be mindful of the spiritual significance of art for Aboriginal and Torres Strait Islander detainees before taking decisions that could affect detainees' access to their artworks and art materials.
Recommendation 41:	That ACTCS explore ways for Aboriginal and Torres Strait Islander detainees with extended family members at the AMC to be provided with opportunities to get together for social interactions on a regular basis.
Recommendation 42:	That ACTCS consider employing Indigenous peer support workers, who can as part of their role meet and assist Aboriginal and Torres Strait Islanders on their admission to the AMC.

Recommendation 43:	That Aboriginal and Torres Strait Islander female detainees be given access to the CALM and TAC programs as a matter of priority.
Recommendation 44:	That ACTCS' proposed Disability Framework is informed by consultation with key stakeholders and completed in a timely manner to ensure ACTCS can meet or exceed the goals and time frames contained in the ACT Disability Justice Strategy First Action Plan 2019-2023.
Recommendation 45:	That ACTCS develop a policy approach that articulates and responds to the needs of older detainees.
Recommendation 46:	That the ACT government considers funding an expanded multi-faith Chaplaincy Team in light of the increase in detainee population and noting the broad scope of their work.
Recommendation 47:	That ACTCS commit immediately to providing "electronic key" access to AMC accredited leaders of all major faiths subject to the normal security clearance process and security awareness training that applies to all visitors who require unescorted movement around the AMC.
Recommendation 48:	That ACTCS facilitate means for detainees to contact accredited faith leaders directly (e.g. by email or telephone), without that contact dependent on ACTCS staff.
Recommendation 49:	That the ACT Human Rights Commission conduct a review of the experiences of Muslim detainees accessing their faith in the AMC.
Recommendation 50:	That on completion of the Hume Health Centre (HHC) renovations, ACTCS and Justice Health jointly agree on and monitor Key Performance Indicators in relation to access and flow of detainees in the HHC.
Recommendation 51:	That relevant policies and practices are changed to ensure that non-smokers are never compelled to share a cell with a smoker.

Recommendation 52:	That the ACT Health Services Commissioner review the provision of dental health services at the AMC.
Recommendation 53:	That Justice Health align dental priority categorisation at the AMC Hume Health Centre in line with the community.
Recommendation 54:	That Justice Health capture data on cancellation of non-urgent scheduled medical appointments and the reasons for this.
Recommendation 55:	That Justice Health investigate the viability of telehealth in the AMC to increase patient access to specialist review and treatment.
Recommendation 56:	That Winnunga, Justice Health and ACTCS as a priority, jointly identify any blockers to more effective cooperation and service delivery and strategies to overcome them.
Recommendation 57:	That ACTCS take immediate steps to obtain an independent appraisal by an appropriately experienced expert to ascertain the appropriate FTE of general practice psychologists for the AMC and develop a plan to reach the minimum acceptable staffing level within 1 year.
Recommendation 58:	That ACT Health and ACTCS investigate the feasibility for detainees under a psychiatric treatment order receiving depot injections at approved mental health facilities aside from The Canberra Hospital Emergency Department.
Recommendation 59:	That ACTCS make changes to the existing CCTV setup in the AMC Crisis Support Unit to provide for protection of detainees' privacy when using toilets, while still ensuring appropriate observation for safety purposes.
Recommendation 60:	That ACTCS and Justice Health examine the feasibility of making Naloxone available for administration after-hours in case of a drug overdose (including a trial of nasal Naloxone if feasible), supported by appropriate training in administration of the drug.

Recommendation 61:	That ACTCS and Justice Health examine the feasibility of making Naloxone available to all detainees with a recent history of opioid use as part of a release pack.
Recommendation 62:	That ACTCS record cohort lock-ins and include this data in its reporting on out-of-cell hours for the annual Report on Government Services (ROGS).
Recommendation 63:	That ACTCS commission an independent education and training needs survey of detainees and draw on the results of that survey to better inform the structure, content and resourcing of the education and training program at the AMC, including ensuring it meets the needs of female detainees. The review should also engage with the ACT business community to identify education and training pathways relevant to employment in Canberra.
Recommendation 64:	That ACTCS engage both female and male recreation officers.
Recommendation 65:	That ACTCS explore the feasibility and costs of providing a modest multi-purpose industries building at the AMC and look for opportunities for female detainees to engage in work within their unit.
Recommendation 66:	That ACTCS review the efficacy of the sentence management system after six months of its implementation, including seeking feedback from key stakeholders. This review should reference performance data such as matters raised by detainees, number of meetings held with detainees, wait times to see a Sentence Manager, etc.
Recommendation 67:	That ACTCS review the current telephone call service provider arrangement with a view to obtaining a better cost-per-call rate for detainees.
Recommendation 68:	That changes to the email software system to prevent the reading by staff of legal-in-confidence emails be completed as a matter of urgency.

Recommendation 69:

That a system be put in place at unit level which ensures that detainees are notified promptly when their email and telephone accounts are set-up and ready for use.

Recommendation 70:

That requests for establishing telephone and email accounts for new reception detainees be given priority over non-urgent amendments to existing accounts.

Recommendation 71:

That regular Gatehouse staff be provided with professional customer relations training.

Recommendation 72:

That ACTCS review the Community Corrections *Parole Unit – Policy and Procedures* and promulgate it as an un-redacted Notifiable Instrument.

Recommendation 73:

That ACTCS put in place quality control mechanisms to ensure that Pre-Release Reports are provided, and explained to, parole applicants not later than one week prior to their scheduled hearing before the ACT Sentence Administration Board.

EXECUTIVE SUMMARY

This is the first Healthy Prison Review of the Alexander Maconochie Centre (AMC) by the ACT Office of the Inspector of Correctional Services (OICS). A “healthy prison” review or whole-of-centre review focuses on a comprehensive analysis of treatment and care in a custodial environment.

The methodology adopted for the review (see **Appendix 1**) comprised:





- one-on-one meetings with key stakeholders;
- research and data gathering;
- design and conduct of comprehensive surveys of detainees, staff and detainees’ visitors;
- receiving submissions from members of the public, including detainees, and a range of government and non-government stakeholders;
- community consultation meetings with a broad range of civil society stakeholders;
- a review team of subject experts drawn from five Australian jurisdictions;
- focus group meetings with current and former detainees and staff union delegates;
- on-site interviews with AMC staff;
- observations of the AMC physical environment and operational practices; and
- examination of ACTCS records and information, including operational registers.

OICS reviews are carried out against published criteria known as the [ACT Standards for Adult Correctional Services](#). The Standards provide an independent tool for the Inspector to examine whether correctional centres and services in the ACT meet the “healthy prison” test. The healthy prison test was devised by the World Health Organization and has been adopted as the basis for prison standards in other jurisdictions, including the United Kingdom.

The healthy prison test is based on four “pillars”:

- **Safety:** detainees, particularly the most vulnerable, are held safely. Staff and visitors feel safe.
- **Respect:** everyone, particularly the most vulnerable detainees are treated with respect for their human dignity.
- **Purposeful activity:** detainees engage in activity that is likely to benefit them.
- **Rehabilitation and preparation for release:** detainees are supported to connect with their family and the community; supported to rehabilitate; and prepared for release back into the community.

The review team has applied a rating system¹ to the outcomes of the review criteria for each of the four pillars. This is intended as a guide only and should be considered in the context of analysis in the report and any relevant findings or recommendations. We wanted to use a simple visual representation tool to enable an easy comparison of performance over time.

















	Performing well against the review criteria. There is no evidence that outcomes for detainees/staff are being adversely affected in any significant areas.
	Performing reasonably well against the review criteria. There is some evidence of adverse outcomes for detainees/staff in a small number of areas but there are no significant concerns. No remedial action is required at present; however, performance needs to be monitored closely to ensure that current standards do not deteriorate.
	Not performing sufficiently well against the review criteria. There is evidence that outcomes for detainees/staff are being adversely affected in many areas or particularly in those areas of greatest importance to the wellbeing of detainees. Remedial action is required.
	Performing poorly against the review criteria. There is evidence that outcomes for detainees/staff are seriously affected by current practice. Immediate remedial action is required.

While this report often refers to survey data (staff, detainees and visitors)², this was only a relatively small proportion of the data collected. One of the aims in conducting the surveys was to provide baseline data for subsequent Healthy Prison and thematic reviews of the AMC so that OICS can gain an understanding of changes over time.

We caution that answers to survey questions reflect the *opinion* or *perception* of the respondent, and as such, are not necessarily a valid assessment of what is actually occurring. However, this works both ways – ACT Corrective Services may *believe* it is doing something very well but survey respondents might have a valid contra view.

When such divergences occur between *perceptions* and *facts* it may be an indicator of less than ideal communications between ACT Corrective Services and the group concerned (staff or detainees or visitors).

The references to survey results in this report should not be taken to imply that the review team agrees or disagrees with a particular result but rather, the surveys contribute to a broad understanding of a number of important issues at the AMC.

Pillar 1	Safety (see page 19)	   
Pillar 2	Respect and dignity (see page 20)	   
Pillar 3	Purposeful activity (see page 21)	   
Pillar 4	Rehabilitation and preparation for release (see page 21)	   

¹ Adapted, with permission, from the system used in prison reviews by the Chief Inspector, Queensland Corrective Services.

² Refer to Appendix 1 (Review Methodology) for information on the surveys.

The key issues arising from this review are:

Pillar 1: Safety

- (a) Good efforts are being made to improve the **induction process** for newly sentenced or remanded male detainees in a dedicated unit, over-sighted by a conscientious, full-time Induction Coordinator. The new regime has the potential to deliver good outcomes for detainees. However, like many other programs and activities at the AMC, it is hampered by the “cohorts issue” which restricts associations of various groups of detainees for safety and security reasons (e.g. rival bkie gangs). The experience is not as positive for women going through induction as there is **no dedicated induction unit for women** and they have significant periods locked in due to the management of other cohorts on their wing.
- (b) The **management of cohorts** affects almost every aspect of the AMC’s operations, including visits, education, programs, gym and oval access, time out of cells, accommodation placements and general detainee movement around the centre. The AMC needs to work on reducing the number of cohorts given their detrimental impact on centre routines and operations.
- (c) The **escorting of detainees** around the centre, including Minimum security detainees, is inefficient and a poor employment of valuable staff who could be engaged in more useful activities. The practice often results in detainees being late for appointments (education, health, etc.) or not attending at all because “rovers” are not available to escort them. There are systems in place in other jurisdictions which, with some exceptions, allow prisoners to move about centres without staff escorts.
- (d) The overall **security** “envelope” at the AMC is sound and the security and intelligence teams are working well, but there are some areas where improvements can be made. Illicit drugs and mobile phones are a major concern and ongoing priority must be given to barrier control, searching and an effective behavioural management system to address this problem e.g. demand reduction strategies for illicit drugs.
- (e) Many custodial staff *believe* that there are **insufficient staff** on the roster to manage the prison in a safe and secure manner for both staff and detainees. This impacts on staff morale. Staff frequently raised the issue of a **poor relationship** with AMC management and general ambivalence about ACTCS head office.
- (f) Staff were positive about their rapport with detainees and the positive impact this has on reducing tension but also believe that they are either **not trained** or **undertrained** in some areas such as managing detainees with mental health or drug and alcohol issues.
- (g) There are too many detainees on “**protection**” for a prison the size of the AMC. Some detainees told us that they did not ask to be on protection, did not know why they are on protection and wanted to come off protection. We are aware that ACTCS is reviewing the protection population to determine which detainees actually *need* protection status and we support this review.
- (h) The AMC does not have an **asset management plan** or a **facility maintenance plan** and routine maintenance is not keeping up with demand as the centre ages. In particular, accommodation units are in a generally shabby state. **Electrical safety testing** of equipment is not being done in accordance with ACT law.
- (i) The **AMC Management Unit** appears to be running well and good practices were observed by the review team.

- (j) Both staff and detainees expressed significant concerns about the fairness and transparency of the **detainee disciplinary system**, citing inconsistent penalties for like-offences as the main issue. A new detainee discipline policy and an incentive and earned privileges policy is currently being drafted. Reform in this area is welcomed, and it will be important to get it right given the significant impact that discipline and perceptions of fairness have on detainee and staff culture alike.
- (k) Recent revisions of policies and procedures for **separate confinement** (disciplinary) orders and **segregation** (management) orders are a welcome development, which should address previous concerns about how these orders were being made and applied.
- (l) Although **detainee-on-detainee assaults** are not infrequent, the available data suggests that the AMC is a *relatively safe* place for detainees to live given the complex nature of prisons and the prisoner sub-culture. Minor **assaults on staff** occasionally occur but according to official data there have been no serious assaults on staff since the AMC opened.
- (m) The way the **AMC records incidents, use of force, strip searches, segregation and separate confinement orders and lock-ins** on spreadsheets and/or paper registers is unsatisfactory. These registers are a key safeguard in relation to detainee treatment and for this reason oversight agencies have legislative power to review these registers. However, it is an ineffective safeguard if record keeping is inefficient and not conducive to the conduct of any meaningful analysis of frequencies or trends.
- (n) ACT Corrective Services does not have **Key Performance Indicators** (KPIs) for the AMC which could be used to gain some understanding as to whether the centre is meeting some basic standards or targets.

Pillar 2: Respect and dignity

- (o) The **relationship between frontline staff and detainees** is generally mutually respectful and the review team observed many positive interactions between officers and detainees. **Almost all staff we interacted with appear genuinely committed to their work** and to achieving rehabilitative outcomes for detainees.
- (p) **Out-of-cell time** (hours) for detainees remains below the national average and below ACTCS' own target of 9.5 hours per day. Despite our office raising this issue in the [Remand Review](#), the lock-ins of cohorts are not being recorded so actual out of cell hours for detainees is generally lower than officially reported.
- (q) The all-male **Indigenous Services Unit** is doing a good job but is over-stretched and in urgent need of a female Indigenous staff member to work with the Aboriginal and Torres Strait Islander female detainees at the AMC.
- (r) The **health centre** appears to be functioning well given the limited physical space and constraints around patient flow, but wait times, particularly for dental care, are a concern for detainees. **Winnunga Nimmityjah Aboriginal Health and Community Services** (Winnunga) has commenced providing care for Aboriginal and Torres Strait Islander detainees at the AMC and, despite some teething problems around the interface between Winnunga, Justice Health, and ACTCS this **innovative approach** to Indigenous healthcare is a welcome initiative.

- (s) There is only one **psychologist** position at the AMC to provide general (as opposed to forensic) psychological services to some 500 detainees. This staffing level is grossly inadequate and must be addressed as a matter of urgency.
- (t) The continuing **accommodation of women** in a former male high security unit while male protection detainees occupy the Women's Community Centre cottages is unsatisfactory. The women are disadvantaged with regard to access to green space, recreation opportunities, employment, and reintegration programs and their proximity to men's units exposes them to verbal harassment and abuse. The ACT government needs to find a long-term solution to this problem.

Pillar 3: Purposeful activity

- (u) **Education courses** available to detainees are well-constructed and the contracted education manager does his best to deliver services to as many detainees as possible. However, the high turnover of detainees, particularly remandees, means that course completion rates are very low. Detainees generally feel that education courses on offer do not meet their needs.
- (v) There has been commendable progress in providing meaningful work (albeit available to a small number of detainees and very few women) via industries such as the bakery, kitchen, laundry and recycling. Large scale industries are not an option due to site constraints and so **priority should be given to smaller-scale work projects/training and cottage industries** to address the lethargy and boredom that currently prevails. The non-economic benefit of such projects in terms of busy, productive detainees developing skills should be factored into budget considerations.

Pillar 4: Rehabilitation and preparation for release

- (w) **Programs** available to male detainees are satisfactory but there are **insufficient programs staff** to deliver required sessions. **Female detainees have very limited programs opportunities.**
- (x) The expansion of the **Sentence Management team** in mid-2019 is a good initiative, and has potential to address serious concerns around detainees not knowing who their case manager was, or if they even had a case manager, and sub-optimal support from case managers in preparation for release, including preparation for parole hearings. It is important that informing detainees of their Sentence Management Officer, and ensuring sufficient meaningful contact is prioritised as this is a key interface in the custodial environment.
- (y) The **Transitional Release Centre** (TRC) is not operating at full capacity, which raises concerns about the viability of the planned, much larger AMC Reintegration Centre. The **TRC is not open to women** and **women struggle to be accepted into the Transitional Release Program** (TRP).
- (z) **Pre-release reports on detainees prepared for the ACT Sentence Administration Board** (SAB) are not always progressed in accordance with ACTCS policies and procedures, hindering the ability of some detainees to prepare for parole hearings and impeding the work of the SAB.

Summary and Conclusions

In the [Remand Review](#) OICS observed:

The AMC was always going to be a “complicated” prison, in that it had to accommodate males and females, convicted and unconvicted people of both genders and “protection” prisoners (male, female, convicted and unconvicted) of different security risk classifications. Add into that complex mix detainees with mental illnesses, cognitive dysfunctions, drug and alcohol addictions, histories of sexual and physical abuse, gang affiliations, those with poor literacy and numeracy skills, and generally dysfunctional family histories; and one can easily identify the challenges faced by AMC management. In other jurisdictions these groups and sub-groups are often managed in separate prisons or specialised units within one or more prisons.³

This situation has not changed since 2018 and overcrowding at the AMC continues to exacerbate these “structural” challenges. Further, and not within the control of ACTCS, the high remand rate in the ACT results in a huge strain on AMC resources as hundreds of remandees enter and leave prison each year. However, governments can influence remand rates through the laws they enact (e.g. bail laws) and their power to decriminalise behaviours that may result in high rates of remand (e.g. drug possession). Added to this remandee throughput is the large number of offenders who are sentenced to short terms of imprisonment (i.e. less than 12 months).

The OICS acknowledges and supports the ACT government’s [Building Communities, not Prisons](#) initiative which, among other things, seeks to ensure that prison is the *option of last resort* when it comes to dealing with people convicted of relatively minor offences. However, regardless of how successful the initiative proves to be, experience from other jurisdictions (e.g. Fine Option Orders and Intensive Corrections Orders in Qld) predicts a gradual rather than dramatic reduction in detainee numbers at the AMC. In that event the AMC will continue to face population pressure challenges for some time.

On balance, we believe that the AMC has the ingredients to be a “Healthy Prison” but more needs to be done to address the key issues described above and the findings and recommendations made in this report.

We acknowledge that ACTCS is making progress across a range of important matters that had been somewhat neglected in the past, such as policies and procedures and its antiquated Custodial Information System. It is not an exaggeration to say that if not for the commitment of ACTCS staff the AMC would be much the poorer.

Finally, while it is a matter for the ACT government as to when and how it responds to the recommendations arising from this review,⁴ it is the intention of OICS to monitor and verify implementation of recommendations made in this and other OICS reviews and to report progress annually to the ACT Legislative Assembly and on the [OICS website](#).

3 Multiple prison jurisdictions (NSW, Vic, Qld etc.) do not necessarily provide “Healthy Prisons” but they have more flexibility to manage sub-groups of prisoners than what is available in the ACT.

4 There is no expectation that the government will comment on, or respond to, the *findings* made in this report – they are “for information” only.

CHAPTER 1:

Introduction



CHAPTER 1: INTRODUCTION

1.1 Authority for this review

1.1.1 Background

The Office of the Inspector of Correctional Services (OICS) was established with the passage of the [Inspector of Correctional Services Act 2017 \(ACT\)](#) (ICS Act). This was in response to a number of critical incidents that had occurred at the Alexander Maconochie Centre (AMC) since it opened in 2009, in particular the death of Mr Steven Freeman in May 2016. This prompted an independent inquiry ([Moss Review](#)) into his treatment and care. The ACT government's response to the Moss Review included a commitment to establish an independent Inspector of Correctional Services.

The focus of OICS is oversight that promotes continual improvement and prevention of ill-treatment in the ACT's adult correctional centres, and from late 2019, the ACT's youth justice facility (Bimberi).

1.1.2 Legislation

The functions of OICS are set out in section 17 of the ICS Act. They are to:

- examine and review correctional centres and services;
- review critical incidents at correctional centres or in the provision of correctional services; and
- report to the ACT Legislative Assembly on these reviews.

Section 17 requires that the Inspector review correctional centres every two years. This is the first "whole-of-centre review" conducted by OICS pursuant to the ICS Act.

1.1.3 Review standards

As noted in the Executive Summary, OICS reviews are carried out against published criteria known as the [ACT Standards for Adult Correctional Services](#) (Standards). These Standards provide an independent tool for the Inspector to examine whether correctional centres and services in the ACT meet the "healthy prison" test. The healthy prison test was devised by the World Health Organization and has been adopted as the basis for prison standards in other jurisdictions, including the United Kingdom.

The four "pillars" of the healthy prison test form the framework for the Standards:

- **Safety:** detainees, particularly the most vulnerable, are held safely. Staff and visitors feel safe.
- **Respect:** everyone, particularly the most vulnerable detainees are treated with respect for their human dignity.
- **Purposeful activity:** detainees engage in activity that is likely to benefit them.
- **Rehabilitation and preparation for release:** detainees are supported to connect with their family and the community; supported to rehabilitate; and prepared for release back into the community.

Under each of these four pillars there are detailed standards, indicators (a non-exhaustive list of outcomes that may be indicative of that standard being met) and examples of sources of evidence that OICS may use in assessing that standard.

The ACT Standards have been drafted with the ACT's unique conditions in mind, namely a small jurisdiction, operating under human rights legislation, with one adult correctional facility that detains both remand and sentenced prisons; women and men; low, medium and maximum security classification; and protection/non-protection detainees. The Standards are based on international human rights standards and are informed by relevant ACT law and policy. This includes the [Human Rights Act 2004 \(ACT\)](#) (HR Act), [Corrections Management Act 2007 \(ACT\)](#) (CM Act), the ACT Justice and Community Safety Directorate's [Human Rights Principles for ACT Correctional Centres](#) as well as operating policies and procedures at the AMC, which are Notifiable Instruments under the CM Act.

Australia ratified the [UN Optional Protocol to the Convention against Torture](#) (OPCAT) in 2017. This is a human rights treaty that requires all jurisdictions in Australia to establish or designate an independent entity to conduct preventive oversight of places of detention. The ACT Standards were prepared with the OPCAT's preventive approach to oversight in mind and will be a useful reference point once the ACT's obligations under the OPCAT are operational. As OICS' mandate for oversight over youth justice commences at the end of 2019, OICS will develop separate standards for youth detention in 2019/20.

1.1.4 Human rights applicable to detainees in the ACT

The HR Act sets out the rights of all persons in the ACT. The preamble states that 'human rights are necessary for individuals to live lives of dignity and value'. This principle is perhaps nowhere more important than in places of deprivation of liberty. Section 19 of the HR Act provides that 'anyone deprived of their liberty must be treated with humanity and with respect for the inherent dignity of the human person.' Other rights that are particularly relevant to detainees include:

- protection from torture and cruel, inhuman or degrading treatment (section 10);
- the right to a fair trial (section 21);
- rights in criminal proceedings, including to be presumed innocent until proved guilty (section 22); and
- the right to privacy and reputation (section 12).

The ACT's human rights framework is reflected in the [Corrections Management Act 2007 \(ACT\)](#). Importantly, section 12 sets out the minimum standards required to 'protect the human rights of detainees at correctional centres'. This includes that detainees must have access to sufficient suitable accommodation, clothing and bedding, and access to the open air and exercise. Human rights relevant to corrections were further elaborated on in the 2019 [ACT Justice and Community Safety Human Rights Principles for ACT Correctional Centres](#).

The rights in the HR Act are mostly drawn from the [International Covenant on Civil and Political Rights](#). An important addition to the HR Act in 2016 was the recognition of distinct cultural rights for Aboriginal and Torres Strait Islander people. Section 31 of the HR Act states that international law relevant to a human right may be considered in interpreting that right. In relation to prisons, there are rich sources of guidance in international law notably, the [Standard Minimum Rules for the Treatment of Prisoners \(the Nelson Mandela Rules\) 2015](#) and the [United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders \(the Bangkok Rules\) 2010](#).

1.2 Imprisonment in the ACT

In 2018 the ACT recorded an imprisonment rate of 151 people per 100,000 adult population (rate for Australia: 221.4).⁵ Concerning specific groups the rates were:

Males: 287.2 [Australia: 412.8]

Females: 22.2 [Australia: 36.7]

All non-Indigenous: 113.5 [Australia: 164.3]

All Indigenous: 2217.3 [Australia: 2481.0]

Overall the ACT recorded the second lowest imprisonment rate (151), just slightly higher than Tasmania (148.2). The Northern Territory recorded the highest rate of 955. However, the ACT had the second highest ratio of Indigenous to non-Indigenous imprisonment (an Indigenous person was 19.5 times more likely to be imprisoned than a non-Indigenous person) in Australia in 2018 after WA (19.8). The national rate was 15.1.⁶

In 2018, sentenced detainees in the ACT had a *mean* sentence of 4.7 years with a *median* of 2.6 years. Nationally the figures were (respectively) 4.9 years and 3 years. Indigenous detainees in the ACT had shorter sentences (*mean* 3.3 years and *median* 1.6 years) than non-Indigenous detainees (*mean* 5.1 years and *median* 3 years).⁷

1.3 The revolving door

The aggregate sentence length for ACT detainees in 2018 indicates that a significant proportion were sentenced to less than one year's imprisonment. The following is the percentage of sentenced detainees in each jurisdiction who were serving a sentence of less than 1 year.⁸

NSW	14.9%
Vic	18.9%
Qld	10.8%
SA	9.9%
WA	14.0%
Tas	32.3%
NT	38.5%
ACT	25.9%
Aus	15.6%

Re-imprisonment⁹ is a national issue. ABS data for 2018 shows the number of ACT detainees with a prior imprisonment episode:¹⁰

- 75% of all detainees [compared to a national rate of 56.7%]
- 90% of Indigenous detainees [compared to a national rate of 75.3%]
- 73.5% of male detainees [compared to a national rate of 57.6%]
- 78.3% of female detainees [compared to a national rate of 47.1%]

⁵ Australian Bureau of Statistics, *Prisoners in Australia 2018*, Table 17.

⁶ Ibid.

⁷ Ibid Table 26.

⁸ Ibid Table 27.

⁹ 'Re-imprisonment' is not necessarily the same as 'recidivism' as recidivist offenders are not always imprisoned.

¹⁰ Ibid Table 29. Prior imprisonment was not necessarily in the ACT.

While the re-imprisonment rate in the ACT appears out-of-step with the national rates the ABS notes:

Due to reporting methods prior imprisonment for the Australian Capital Territory includes both episodes of imprisonment under sentence and on remand. Thus, caution should be taken when comparing prior imprisonment in the Australian Capital Territory with other jurisdictions.¹¹

Care should also be taken in interpreting re-imprisonment data as a performance indicator for ACTCS, or other corrective services agencies for that matter. Re-offending is a complex social issue involving an unknown number of variables (e.g. unemployment, drug use, laws, policing, homelessness, mental health issues, social supports) with the net result reflected in prison populations.

1.4 The remand problem

Courts decide to remand people in custody; it is not a matter over which corrective services agencies have any control.

In 2009 remandees comprised 25.4% of the ACT detainee population and 21.8% of the national prison population. By 2017 the proportion of remandees had grown to 38.8% and 31.3% respectively.¹² In July 2019 the remand population at the AMC was 40% of the total population (59% of females and 39% of males).¹³

In 2018, ACT remandees spent a *mean* of 3.5 months in prison (*median* 2.7 months) compared to the national figures of 5.7 months (*mean*) and 3.2 months (*median*), while 26.3% of ACT remandees spent less than one month in prison compared to 22.2% nationally.

A further 33.3% spent between one month and less than three months in prison compared to 26.2% nationally.¹⁴

In the first six months of 2019 the AMC received 373 people on remand and discharged 237 remandees. In the same period only 40 sentenced detainees were admitted to custody. This throughput ("churn" in corrections' jargon) of remandees places an enormous strain on the AMC across a number of areas (e.g. admissions, health, visits, phone/email accounts, trust accounts).

Remanding people in custody also comes at a cost to the ACT budget. In 2015, when discussing bail, the [WA Auditor-General](#) wrote:

Imprisoning defendants who have been approved bail is costly. For instance, a person granted bail but who is remanded in prison for one week while they arrange to meet their bail conditions will cost the State about \$5,390. This is because the cost of bringing a defendant into the prison system is high regardless of the short time they spend there.

While there has been no similar cost modelling of admitting a person to prison in the ACT, it is reasonable to conclude that there are costs associated with transport of detainees, staff time involved in the reception/induction process, health assessments and provision of clothing. If a figure of about \$5000 per remandee was assumed, then in the period 1 January to 30 June 2019 alone ACTCS expended \$1.865M on admitting 373 remandees into custody.

11 Ibid Explanatory Note 106

12 [Remand Review, Table 3.1.](#)

13 Data provided by ACTCS.

14 Australian Bureau of Statistics, *Prisoners in Australia 2018*, Table 32.

In addition to the costs of admitting a remandee to the AMC, the daily cost of “maintaining” a detainee in 2017/18 was \$283.15. If that cost was applied to the mean time in custody of AMC remandees in 2018 (3.5 months) it would equate to about \$25,000 per remandee. As at 1 July 2019 there were 185 remandees in custody at the AMC which equates to a cost of about \$4.6M (\$25,000 x 185 remandees).

1.5 About the AMC

Some history and historical data on the AMC is provided in **Appendix 2** to this report.

1.6 The AMC in 2019

At the time of this review the AMC had a design capacity of 467 beds i.e. based on one detainee per built cell/room, plus some cells/rooms that were purpose-built to accommodate two people.

Table 1.2 AMC design capacity (beds) July 2019

Main units	Male	Female	Total
Sentenced/remand – all classifications	367	57	424
Special Units			
Transitional Release Centre*	15	n/a**	15
Crisis Support Unit	Either		10
Management Unit	Either		14
Health Centre	Either		4
Total all	414	25	467

Source: ACTCS Monthly Occupancy Report to the OICS

* TRC is located outside the AMC secure perimeter and accommodates men only

** Although AMC policy does not explicitly exclude female detainees from being accommodated in the TRC, in practice women are not able to access this facility.

It should be noted that 43 beds are not available for general use (special units), which means that there are only 424 beds to cater for the general detainee population, which has often exceeded 450 in 2019.

Table 1.3: AMC actual occupancy general use beds 2019 (as at start of month)

Occupancy	Jan	Feb	Mar	Apr	May	Jun
Males (367 beds)	414	423	415	407	433	415
% occupancy males	113	115	113	111	118	113
Females (57 beds)	40	37	37	33	38	37
% occupancy females	70	65	65	58	67	65
All (424 beds)	454	460	452	440	471	452
% occupancy all	107	108	107	104	111	107

Source: ACTCS Monthly Occupancy Report to OICS

In practice the AMC routinely accommodates a detainee population in excess of the design capacity by "double-bunking" cells/rooms ("two-outs"). This is also common practice in other jurisdictions.

It should also be noted that the AMC does not currently provide separate accommodation for remandees and that female detainees are no longer accommodated in the original (2009) Women's Community Centre. These issues were covered at length in the 2018 OICS [Remand Review](#) and, for that reason, are not repeated in this report.

General demographic data on the AMC detainee population is provided at **Appendix 3** to this report.

1.7 Limitations of this review

Due to time and cost considerations the review team did not examine in-depth:

- The nutritional standards of detainee meals;
- Post-release support of detainees;
- The operation of the Transitional Release Centre (TRC);
- The operation of the Court Transport Unit (CTU);
- The operation of specialist units such as the Crisis Support Unit, Management Unit, Induction Unit, Assisted Care Unit, and Therapeutic Community (SOLARIS).

1.8 Lack of ACTCS' management information and operational data impeded this review

The conduct of the review was frustrated by the inability of ACTCS to provide operational data in formats requested by the review team (see correspondence [here](#)). This was entirely due to the fact that most operational data is recorded on Excel spreadsheets or hard-copy registers/logbooks rather than, as in other jurisdictions, on the ACTCS Custodial Information System (CIS). The CIS dates from the 1990s and has extremely limited functionality to store and retrieve data. A long-awaited replacement for CIS (CORIS) is progressing but is unlikely to be operational before 2021.

This issue has been commented on by other reviews. For example:

...ACT Corrective Services does not have quality recording and reporting systems in place for key performance data. This shortcoming will, if not addressed quickly, result in ongoing flawed decision-making and accountability problems. (Hamburger 2011 p.100)

At the outset of this audit (June 2014) the challenge faced in ACTCS responding to requests for information on detainees and on custodial operations, specifically those relating to rehabilitative activities and services was highlighted. ACTCS officers, particularly those that had recently worked in other jurisdictions, emphasised the laborious nature of collating data using ACTCS records systems, which are electronic and paper-based. (Auditor-General 2015 p.142)

Of major concern to the review team was the poor summary recording of matters with significant human rights implications such as strip searching, use of force, separate confinement and segregation orders, time out of cells and incidents generally. We refer to these matters later in the report. It will not be sufficient for ACTCS to say that these problems will be resolved when CORIS comes on-line given that is unlikely to occur before the next AMC Healthy Prison Review in 2021 and, in any case, it is unclear whether CORIS will have the capacity to record the required information and provide the necessary reports. In our opinion ACTCS needs to find better ways to deal with this problem now (e.g. off-the-shelf databases) rather than continuing to rely on cumbersome spreadsheets and paper registers.

Recommendation 1:

That ACTCS implement a system or systems for the central recording of data on strip searching, use of force, separate confinement and segregation orders, time out of cells and incidents in a manner that facilitates inspection by oversight bodies and provides capacity for data interrogation and report generation.

CHAPTER 2: PILLAR 1

Safety



CHAPTER 2: PILLAR 1 – SAFETY

2.1 Early days in custody

2.1.1 Detainee transport

STANDARD 1

Detainees are transported in safe and humane conditions, are treated with respect, and due attention is paid to their individual needs.

Detainee survey

During their time in court cells and in transport vehicles:

- 72% (n=169) reported that custodial officers at the court were respectful
- 76% (n=174) reported that transport officers were respectful
- 80% (n=175) reported that court cells were not clean
- 63% (n=174) reported that transport vehicles were not clean

“Overall we were treated with respect being escorted to prison. ... But transport to the AMC is scary, filthy ... and smelling of urine. It seems like the condition of the transport depends on who was using the van just before because the van is supposed to be washed every morning.”

Submission from female detainees

Detainees are moved to and from the AMC and the Canberra City court complex by the ACTCS Court Transport Unit (CTU).¹⁶ For many people brought into custody either from the police watch house or direct from court, this is their first experience of the corrections system.

2.1.2 Court cells complex

The original court cells complex was built decades ago and was in a shabby state, suffered numerous maintenance problems and had insufficient holding cells to cater for the volume of people moving through the courts. The CTU staff worked in cramped and unpleasant conditions, not befitting a modern workplace.

With this background in mind, a new court cells complex opened on 22 July 2019. The new complex has the capacity to properly separate convicted and unconvicted persons, males and females and adults and children, something CTU has struggled to do in the past. It will also provide staff with a modern workplace. As with the old complex, the new facility is located completely underground below the courts.

¹⁶ The CTU also transports people from police cells to the court complex and children and young people to and from Bimberi Youth Justice Centre.

Given that the court cells complex was in a state of flux, the Inspector decided that it would not be productive to conduct a detailed review at this time. Rather, OICS will revisit the complex after it has been operational for a reasonable period by which time the teething problems with the building, equipment and procedures should have at least been identified, and hopefully, rectified.

2.1.3 The transport of children and young people

The CTU is required to transport children and young people to/from the courts and Bimberi Youth Justice Centre. Court Transport Unit staff are very concerned about implications, including their legal position, should they be required to use force on a child or young person (e.g. to prevent escape). Staff noted that, unlike Bimberi staff who are youth workers, CTU staff are not trained to any large extent to deal with children and young people, some of whom, despite their age, are of the size and strength of adults but may have additional needs or vulnerabilities compared to adult detainees. Bimberi staff (who are youth workers) do not accompany children on court escorts.

The Community and Public Sector Union (CPSU) submission to this review also raised concerns that Corrections Officers (COs) were not appropriately trained in managing juveniles.

It is beyond the scope of this review to delve into what formal or informal arrangements exist between the Justice and Community Safety Directorate (responsible for ACTCS) and the Community Services Directorate (responsible for Bimberi) for the court transport of children and young people. However, CTU staff have genuine and valid concerns that need to be acknowledged and addressed by government.

Recommendation 2:

That the ACT government acknowledge and respond to concerns expressed by Court Transport Unit staff about the transport and detention of children and young people by the Court Transport Unit.

2.1.4 Reception and admission

STANDARD 4

Detainees are safe and treated with respect on arrival and in the initial period in detention. Risks are identified and detainees are supported according to individual needs.

STANDARD 5

Appropriate initial checks of physical and mental health, and identifiable needs arising from a disability are carried out upon admission, and follow up assessments and other necessary steps are taken.

The admissions process

The admissions process commences when a detainee is received at the CTU. The checklists and questionnaires administered to the detainees at the CTU are the same as those applied when a detainee arrives at the AMC. This is good practice because it ensures that the process for determining any risk factors that need to be accounted for is robust, and risks identified at the CTU are validated at the AMC.

We found these to be good information gathering tools too, ensuring essential information relating to the detainee was obtained, including:

- Welfare needs, such as child and pet care arrangements;
- At-risk information, including risks from others and risk to self;
- General demographic information, including language and foreign national status;
- Any violence restraining orders in place;
- Drug and/or alcohol use;
- Previous offending history.

However, there is limited information gathered and compiled at present on disability (only a question asking the detainee to self-report a disability). This is discussed further under section 3.5.3.

Primary and mental health services are involved in the admissions process. They attend the admissions centre to assess each new detainee. These assessments are included in and attached to the initial questionnaire which assists staff to determine an appropriate placement for the detainee. However, 57% ($n=166$) of detainees surveyed reported that what they perceived to be urgent health issues were not dealt with at admission. This may suggest a lack of follow-up beyond the short health assessment done at admission. This view is supported by submissions received from detainees.

Detainees surveyed also reported that during the admissions process they were not informed about their rights and responsibilities (64%, $n=170$) and felt that they were not given enough information about routines (80%, $n=175$). Having a detainee working in a peer support role in the admissions centre specifically to assist with settling new detainees may improve detainees' experience. This would also take pressure off the COs who are busy with the procedural requirements of the admissions process. It is pleasing to note that the new men's induction unit has a peer support detainee accommodated permanently in the unit that can provide this support once the detainee reaches that point, though the equivalent role for the women is not currently filled (discussed further in section 2.1.5).

We note that new detainees were provided with tobacco and an advance of \$5 on their telephone account. This no doubt assists in settling new detainees.

Finding 1:

That the admissions processes at the AMC are embedded and well-structured but would be enhanced by providing detainee peer supports.

Recommendation 3:

That ACTCS provide male and female peer support workers in the admissions centre to support detainees on their arrival to the AMC.

The admissions centre

Officers in the admissions centre interview the new detainees across from their desk in the general admissions area, which is an open plan space. The questions they ask during these interviews include sensitive questions about their past offending, their current situation, their emotional state, their welfare needs, gang associations and so on. This information is not only private, but can also compromise the detainee's safety should it be overheard and disseminated.

Furthermore, the CCTV cameras of the admission cells where urinalysis is done could potentially be viewed from an area accessible to detainees and other staff. This is especially so with the considerable movement of staff and detainees through the admissions area that we observed. This risks breaching detainees' privacy. A possible improvement is to partition a space in admissions in which detainee interviews can take place more privately.

Finding 2:

That the admissions area is spacious, although privacy could be compromised.

Hygiene

New detainees arriving at the AMC change from their civilian clothes into prison issue clothes. Their civilian clothes are packed into a box, labelled with their name, and stored in the adjacent property store. These civilian clothes are not laundered as a matter of course when the detainee first arrives. Detainees must submit a request form for this to be done or to have these clothes signed out to family for them to be washed.

"I had an initial need for a shower etc. but they could not be provided the same day I arrived because a particular officer was not around."

Submission from female detainees

New detainees also do not have the opportunity to shower before they change into the prison issue clothing and go to the accommodation units. We note that there is a shower in the admissions centre but we observed that it is used as an overflow storage area. One CO informed us that the shower is unusable.

Finding 3:

That some basic hygiene practices are lacking in the admissions process.

2.1.5 Induction

STANDARD 7

Detainee induction is timely, accessible, appropriately targeted, and carried out in a respectful manner.

At the time of the onsite component of the review, a new Induction Policy and a new Induction Operating Procedure had recently been notified.¹⁷ Furthermore, a new position has been created – Induction Coordinator. We think the development of this position is good practice and the position holder is positive, motivated and proactive.

The new Induction Policy requires each male detainee to go through a comprehensive induction process during the first five days at the AMC. During this time, men will be accommodated in the induction unit located in AU South. At the time of the review, the Induction Coordinator was developing a structured day timetable to support the induction process. This was comprehensive and, if implemented, would mean all detainees going through the induction program in AU South would be well-placed to move into accommodation units.

“ I know there has been much “activity” around a new induction program for new detainees, since late last year, but it does not appear to be in place yet. There are so many regimes in AU-South where new receptions are placed, that I can’t see how it will work. ”

Submission from staff member

“ Not everyone gets an induction handbook– the one you do get is out of date and written for the men. ”

Submission from female detainees

The draft structured day timetable required cooperation and support from all areas of the prison. We thought that this may be difficult to achieve, particularly given the different regimes being managed in AU South, which means that very few detainees are allowed to mix. From speaking to detainees who had completed induction in late June, July and August, they commonly reported getting about 3–4 hours out of cell per day (it was commonly reported as 1.5 hours in the morning, and 1.5 hours after lunch).

Despite the excellent approach to induction with the new policy and coordinator role, we note that to be locked in a cell with one other person for up to 20 or 21 hours per day in the first five days of jail does not create an ideal environment for detainees at a particularly challenging time for them. In our view the men’s induction process has improved significantly from the time we conducted the Remand Review, but until the issue of separation of so many cohorts is dealt with, induction processes are less than ideal.

¹⁷ Corrections Management (Induction) Policy 2019 NI2019-387; Corrections Management (Induction) Operating Procedure 2019 (No 2) NI2019-416.

It is pleasing to see that a new female-specific induction handbook is being prepared (in draft at the time of the review). However, the induction program for women is problematic. Women inductees reside in SCC West for the initial five days, where, due to the different cohorts/management regimes they are locked in for long periods including upwards of 20 hours per day. SCC West also accommodates women on segregation and separate confinement orders and women with significant behavioural problems.

Of further concern is that at the time of the review there was no female peer support worker, the previous one having been released from the AMC months prior. We were told that this position had not been filled because the capacity to train a detainee was lacking at the time. The importance of filling this position cannot be overstated. One recent first-time female detainee told us that the peer support person was crucial to making her feel safe and helping her understand how the unit works.

Our detainee survey was conducted in April 2019, before the new induction policy was notified and the coordinator role had commenced. In that survey, 70% ($n=175$) of detainees reported that they did not understand their rights (legislated entitlements) as a detainee and 52% ($n=176$) reported that they did not understand what privileges are at the AMC. Forty-four percent ($n=156$) reported that they had been unable to contact family and/or children within seven days of arriving at the AMC. We expect that should the Induction Policy be fully implemented, many of these issues will be addressed.

Finding 4:

That the new Induction Policy is comprehensive and the appointment of an Induction Coordinator to support this is good practice.

Finding 5:

That the regime management restrictions in AU South and SCC West results in excessive time in cells, which impedes the full implementation of the new Induction Policy and is an undesirable experience for detainees.

Recommendation 4:

That the induction process for women be given urgent attention with regard to maximising time out of cells, provision of peer support and provision of up-to-date information about their obligations, rights and AMC routines.

2.1.6 Accommodation assessments

STANDARD 8

Detainees are placed in the least restrictive accommodation environment possible in the circumstances taking into account security risk assessment, as well as individual detainee needs. Placement is regularly reviewed.

Detainee Security Classification and Accommodation Placement

Each detainee in the AMC has a security classification, which is 'based upon risks posed to security, good order and the safety of the detainee, staff, other detainees, visitors to the centre and the public'.¹⁸ A detainee is to receive their classification within 14 days of their admission to the AMC.¹⁹ In addition to a classification decision, a decision is also made about which unit to place the detainee in at the AMC, and security classification is a factor in this decision.

Security classification and accommodation placement is complicated and involves input from a range of AMC staff including CTU staff, admissions centre officers, primary and mental health care staff, COs, supervisors and area managers. It was not possible in the scope of this review to assess whether security classification decisions take into account the factors set out in the Detainee Classification Policy because it would involve analysing detainees' individual case files in depth. We note that no issues were brought to our attention about security classification. However, there may be an issue regarding security classifications of Aboriginal and Torres Strait Islander detainees (see 3.5.2).

Some concerns were raised about accommodation placements. As noted in the Remand Review, remandees are not accommodated separately to sentenced detainees, contrary to the CM Act and ACT and international human rights law.

Additionally, women are not being accommodated in cottage-style accommodation, contrary to the Prisoner Classification Procedure 2009.²⁰ This is also discussed in section 3.5.1 of this report.

The CPSU submission to this review noted a concern held by staff that security classification was not being given due consideration in placement decisions due to a shortage of accommodation and detainees being placed in the first available space. The submission noted that this contributed to a reduction in the perception of safety amongst detainees and staff due to different security categories mingling.

We acknowledge that population increases at the AMC have put significant pressure on accommodation placements and this has made it difficult to meet detainees' individual needs. However, we also reiterate the recommendation from our [Critical Incident Review 01/19](#) earlier this year that accommodation placement decisions be appropriately documented. This ensures transparency around whether the factors listed in the Shared Cell Policy²¹ were considered when placing detainees in a shared cell.

18 *Corrections Management (AMC Detainee Classification) Policy 2012* NI2012-299.

19 *Ibid.*

20 Restricted procedure notified under the *Corrections Management Policies and Operating Procedure 2017 (No 2)* NI2017-55.

21 *Corrections Management (Shared Cell) Policy 2009* NI2009-162.

Finding 6:

That overcrowding at the AMC is placing pressure on the ability of ACTCS to make accommodation placements that address individual needs.

Protection

According to the Protection Policy,²² detainees may be classified as on “protection” if a senior custodial officer believes it is necessary for the detainee’s own safety. Protection status must be automatically considered for those charged or convicted of sexual or homicide offences against children, former police or prison officers, those that have been witness for the Crown, or those with a significant custodial history of being on protection. Protection detainees are “marked persons” in a custodial environment due to risk of assault, intimidation or harassment from other detainees. Protection detainees are accommodated in separate units from “mainstream” detainees, and generally have reduced access to programs, activities, work, and recreation. There is also a sub-category of protection called “strict protection”, although this term is not clearly defined in policy or practice and is currently being phased out.

As at July 2019, there were 117 detainees on protection. In terms of determining who will be on protection, we found the approach to be overly risk-averse – it was not about managing risk but avoiding it. We viewed Initial Classification and Placement forms for detainees placed on protection or strict protection that did not state any reasons for the decision, and no obviously apparent factors for placement (e.g. type of offence). Many detainees we spoke to in the protection units said that they did not know why they had been placed in protection and had not requested placement in protection. Some protection detainees reported that they would like to be considered for the (mainstream) cottages but were struggling to get their protection status reviewed so that they could be eligible. This was adversely impacting detainees’ accommodation placements as well as their opportunities to have some meaningful experiences whilst incarcerated.

The Protection Policy states that protection placement will ‘end 28 days after the order is given or, if a further order [is] given following an internal review, 90 days after the day of the further direction.’²³ We found that the protection review process mandated in the policy was not adhered to. There was no clear practice in place for removing a detainee from protection, despite some protection detainees indicating they would prefer to be accommodated in a mainstream unit. The requirements in the policy that set out a procedure for a detainee to apply for a review or variation of a protection decision were clearly not being uniformly applied or communicated to detainees.

We were informed that there is a review underway into who is on protection and why. An officer had been taken away from his normal custodial duties to conduct this review. The review hoped to make more sense out of the reasoning behind protection placements. This information could then be used to better inform protection placements going forward.

²² Corrections Management (Protection) Policy 2011 NI2011-50.

²³ Corrections Management (Protection) Policy 2011 NI2011-50.

Finding 7:

That the Protection Policy requirement of finite 28 day placements on protection with a review has not been adhered to leading to a large group of protection detainees, some of whom are kept on protection against their wishes.

Recommendation 5:

That practices for determining and maintaining protection placements be evidence-based, appropriately documented, and subject to a review mechanism.

2.2 Behavioural management

2.2.1 Encourage positive behaviours through incentives

STANDARD 9

The correctional centre regime encourages detainees to make positive choices and engage in positive behaviours.

Entitlements and privileges are set out in Chapter 6 of the CM Act. However, this information is not provided in the Detainee Handbook. It should also be noted that this handbook has not been updated since 2015. It is likely that this has contributed to 52% ($n=176$) detainees reporting in the survey that they did not understand what 'privileges' are at the AMC. Without this information readily provided, detainees would need to access the CM Act, or the Detainee Disciplinary Policy which provides some examples of privileges.²⁴ It is unreasonable to expect detainees to conduct their own research on things that affect their day-to-day living at the AMC.

At the time of the review, there was no policy in force setting out an incentive-based regime for positive behaviour. Detainees reported on this in the survey with 80% ($n=176$) stating that there were no incentive/rewards for detainees to behave in a positive way. Several submissions gave examples of the lack of incentives for the women, including that there are no cottages for women to progress to as a privilege, they cannot access the Transitional Release Centre, and very few can access the Transitional Release Program. When combined with the inconsistency in disciplines (discussed in section 2.2.2), there is a widely held perception amongst detainees and staff that positive behaviour is not recognised and supported.

"There are no levels of privilege based on behaviour for the women! I am doing a long time here and it is hard ... the men get to work towards moving into the cottages, women don't have anything like that."

Submission from female detainee

24 Corrections Management (Detainee Disciplinary Policy) 2012 NI2012-627, 10.

We are aware that a comprehensive Incentives and Earned Privileges (IEP) Policy is currently in draft. We are mindful that implementing this policy will require care because some detainees' access to privileges may be reduced until they have earned them back. This may be perceived by detainees as a reduction in living conditions or punishment.

We cannot stress enough that the new IEP Policy must *not* be framed around taking away privileges that detainees already have (e.g. in-cell TV), but rather it should provide real incentives for detainees to earn, such as longer visits. Effective communication with detainees in advance of and throughout the process of implementing the new IEP Policy will be important as will appropriate consultation with the ACT Human Rights Commission.

"We were asked to come up with a list of incentives that we wanted but it never went anywhere. These included – longer visits, longer and cheaper phone calls (currently \$5 for 10 mins, sometimes call doesn't go through but you're still charged), more inter-jail visits with partners and family members (currently they are only every 28 days), and family visits (it's really hard to get family visits at the moment, kids have to come in on two different days to see their mum and dad who are both in AMC)."

Submission from female detainees

Recommendation 6:

That ACTCS finalise and implement the Incentives and Earned Privileges Policy as a matter of urgency and include a review and evaluation mechanism of the effectiveness and impact of the new policy after 12 months.

Recommendation 7:

That ACTCS finalise and implement the detainee Disciplinary Policy as a matter of urgency and include a review and evaluation mechanism of the effectiveness and impact of the new policy after 12 months.

2.2.2 Adjudication and consequences for breach of rules

STANDARD 10

Any correctional centre disciplinary breaches and the consequences for breach are created under law or regulation and are clearly communicated to all detainees.

STANDARD 11

The system for determining whether breaches of correctional centre rules have occurred is fair, transparent, consistent, expeditious and accountable.

STANDARD 12

The consequences for detainees diverging from correctional centre rules, where proved, are always: established in law or regulation, appropriate, fair, consistent, and expeditious and are not cruel, inhuman or degrading.

Detainee survey

- 64% ($n=170$) reported that they were not informed about their rights and responsibilities on arrival at the AMC
- 70% ($n=175$) reported that they did not understand their legal entitlements as a detainee
- 74% ($n=90$) reported that the disciplinary process was unfair
- 72% ($n=87$) reported the penalty they received was unreasonable

Staff survey

- 65% ($n=104$) believed that the AMC is 'poor' in implementing disciplinary charges on detainees

It should be stated at the outset that ACTCS recognises that the existing detainee disciplinary policy and practices are deficient, and a new approach to detainee discipline is being developed. This is welcomed and of utmost importance, as "justice cannot stop at the prison gates".²⁵ In this context, the following section seeks to identify some of the deficiencies we identified in order to feed into the new policy development process.

The disciplinary process under the CM Act

Actions that constitute disciplinary breaches are set out in section 152 of the CM Act. They range from being disrespectful to a Corrections Officer to assault and attempted escape. If a detainee is suspected of committing a disciplinary breach, a Corrections Officer has discretion to counsel, warn or reprimand the detainee, put them in investigative segregation and/or give a presiding officer an initial report.²⁶ The presiding officer may refer this to an investigator who will then write a report that is given back to the presiding officer.²⁷ Based on either the initial report or the investigator's report, the presiding officer has discretion to:

- take no further action;
- counsel, warn, or reprimand the detainee;
- refer the allegation to the police or Director of Public Prosecutions; or
- charge the detainee with a disciplinary breach.²⁸

²⁵ *Golder v United Kingdom* (1975) 1 Eur Court HR 524.

²⁶ *Corrections Management Act 2007* (ACT) s 156(2).

²⁷ *Ibid* s 157.

²⁸ *Ibid* s 158(2)

A detainee charged with a disciplinary breach must be given a written charge notice that sets out the alleged conduct and the options the detainee has.²⁹ A detainee may, in writing, admit the disciplinary breach charged and accept the proposed disciplinary action.³⁰ If a detainee does not do this, the presiding officer must conduct a disciplinary inquiry.³¹ A detainee can make submissions to the inquiry, but is not entitled to a hearing under the CM Act.³²

After this inquiry, the presiding officer may take disciplinary action against the accused if satisfied on the balance of probabilities that the charge has been proven.³³ Disciplinary action can include a fine, withdrawal of privileges, or separate confinement.³⁴ If a detainee is unsatisfied with this decision they can apply to Director-General of JACS or his/her delegate (which includes the Executive Director of ACTCS and the General Manager of Custodial Operations) for a review of the decision.³⁵ After this review, a detainee can apply to an adjudicator for an external review of the Director-General (or Delegate)'s decision.³⁶ Importantly, the detainee may still be subject to the disciplinary action while the reviews are taking place.³⁷

Our observations

We observed and heard from staff and detainees alike that there is no standardised system in place to ensure that disciplinary functions are carried out in a robust and transparent manner. The process is discretionary with individual officers deciding on the level of punishment for transgressions, without a common frame of reference. We heard that officers will often charge a detainee, informally interview the detainee about the charge, suggest that the detainee plead guilty, and negotiate a punishment, to which the detainee invariably agrees.

The Schedule of Penalties Policy is supposed to assist 'in achieving a level of consistency and proportionality that will help maintain the credibility of the discipline process'.³⁸ However, from our discussions with staff and detainees this does not appear to be referred to in practice. Of the detainees surveyed who reported being subject to disciplinary proceedings, 74% ($n=90$) perceived the disciplinary process to be unfair and 72% ($n=87$) were of the view that the penalty they received was unreasonable. Staff at the AMC also acknowledged issues with the disciplinary process with 65% ($n=104$) of staff surveyed reporting that the AMC is 'poor' in implementing disciplinary charges on detainees.

Officers (CO1/2 level) told us that senior officers (CO3s) often over-ruled their discipline recommendations and handed out minor penalties to "keep the peace" with detainees. Correctional Officers showed us an actual case on the Custodial Information System where a detainee with a violent offence history, who had been found with a well-made shiv, appeared to have been given a few days separate confinement in his own cell by a CO3 as a discipline for having such contraband. These officers said that this penalty was 'a joke' given the serious nature of the offence.

29 Ibid s 159.

30 Ibid s 167.

31 Ibid s 170.

32 Ibid ss 194(2)(c) and 195(2).

33 Ibid s 171.

34 Ibid s 184.

35 Ibid s 173.

36 Ibid s 178(1).

37 Ibid ss 173(3) and 178(3).

38 *Corrections Management (Schedule of Penalties) Policy 2010* NI2012-629, 4.

In addition, we found that many staff felt strongly that the lack of consistency in disciplinary systems contributes to the perception that there is no effective behavioural management system. In response to two optional free text question on the staff survey, 'what are the things you would like to change at the AMC and how might you change them' and 'do you have additional comments?', 22 staff (n=107) raised the issue of improving behavioural management and discipline. Some of the comments are noted here.

In our interactions with detainees, many seemed not to be aware that they could request a review of a disciplinary charge. This may contribute to the practice of detainees simply accepting what they are given. It is troubling if detainees are accepting disciplinary breaches where they did not commit the breach or they are accepting disproportionate penalties simply because they are not aware of their right to seek review or feel that review is pointless. Disciplinary breaches will appear on a detainee's custodial record and may impact their chances of being granted parole, thereby extending their time in custody. It is pleasing to see that the Induction Handbook currently being drafted (a separate document from the 2015 Detainee Handbook) does tell detainees they may request a review of a disciplinary charge.

In relation to external review of a disciplinary charge, we were informed that the adjudicator had only received one referral for a review since his appointment in May 2017. He had to decline due to a conflict of interest arising from also being a member of the Sentence Administration Board. It is not clear whether detainees are aware of this mechanism for review. However, an external review can only occur after an internal review of the disciplinary inquiry decision by the Director-General (or Delegate).³⁹ Considering the reports from detainees that they are encouraged to plead guilty to a breach, it is probably rare that disciplinary inquiries are held, let alone escalated to the point of an external review.

"Clear definition of roles/guidelines should guide the discipline for detainees.

More consistency across the AMC with detainee discipline.

Detainees don't care about getting caught with phones, drugs or other contraband because nothing happens to them.

Disciplinary action is weak and bears little to no consequence for violence and weapons.

Would like to see a better understanding from management in relation to discipline and consistency in handing out relevant disciplines.

Disciplinary process is haphazard/weak.

Discipline of detainees (we are too soft on the bad ones). "

Staff comments on detainee discipline

Recommendation 8:

That ACTCS address the significant problems with the detainee disciplinary process including arbitrary and inconsistent application, and low awareness of right to review as a matter of urgency.

³⁹ Corrections Management Act 2007 (ACT) s 178.

2.2.3 Use of force, weapons and restraints

STANDARD 13

Force is only used on detainees as a last resort, in accordance with the law, used in the least restrictive manner possible, and with appropriate safeguards in place.

Use of force is covered in Part 9.7 of the CM Act, which is broadly consistent with Standard 13 above. Relevant ACTCS documents are the Use of Force Policy⁴⁰ and the Use of Force Procedure.⁴¹ The policy and procedure appear sound but are dated, having not been reviewed since they were notified in 2012 e.g. references to the 'Superintendent' instead of 'General Manager'.

The AMC records a summary of use of force incidents in an Excel spreadsheet rather than in a database, which makes interrogation of the data very difficult. For example, it is not possible to search for all incidents in a particular unit, or search multiple variables. Nor is there any description of the nature of the force used such as "handcuffs applied", "flexi-cuffs applied", "taken to ground". In 2018, some monthly reports list the use of force incidents as 'Minor' or 'Major', with no explanation as to the difference, while others do not.

In the 'details' section provided on each incident some entries are reasonably understandable while others are cryptic at best e.g. 'Mobile phone and accessories located'. Other than by reading each individual use of force report it is not possible to undertake any sort of analysis that would assist in understanding whether use of force at the AMC is being undertaken appropriately (how applied) and as the option of last resort, and even whether restraints were used. This is unacceptable from legal, occupational health and safety, and human rights perspectives.

The paucity of information also impedes OICS from knowing whether ACTCS is complying with Section 142 of the CM Act:

Reporting use of force

- (1) The director-general must keep a record of any incident involving the use of force under this part that causes injury or death to anyone.
- (2) The record must –
 - (a) include details of the incident, including the circumstances, the decision to use force and the force used; and
 - (b) be available for inspection under chapter 7 (Access to and inspection of correctional centres).
- (3) **The director-general must give a copy of the record to the inspector of correctional services.** (emphasis added).

The Inspector has not received a section 142(3) 'record' since OICS commenced operation in April 2018.

⁴⁰ Corrections Management (Use of Force) Policy 2012 NI2012-278.

⁴¹ Corrections Management (Use of Force) Procedure 2012 NI2012-277.

'How confident are you that if you use force against a detainee in the course of your duties in accordance with policies/procedures you would be supported by management?'

67.6% (n=71) of custodial officers responded 'Not at all confident'.

Use of force is a key area of risk for ACTCS and a point of vulnerability for detainees, but also staff if they are being questioned on whether force was used appropriately. Therefore, it is important that appropriate recording of use of force not be delayed by the development of the new whole of custodial recording system. Whether an interim measure involves improving practices around the current Excel database, or developing another option, immediate action is required (Recommendation 1 refers).

Staff told the review team that they are reluctant to use force on detainees even when it is lawful and necessary because they believe that "management" will not support them after the event. This was also reflected in the staff survey:

We note that ACTCS does not agree with the "staff view" on this issue and we also note that we saw no evidence which would support the "staff view". Due to the scope of the review we were not able to investigate this issue further.

"More training in use of force ... Most staff feel they will not be backed by senior management and their jobs are at risk when there is a use of force.

Use of force is required for a prison. We officers should be in control. Stopping use of force by making staff fear losing their jobs gives control to the prisoners.

Staff afraid of management reaction to use of force."

Staff comments on use of force

Finding 8:

That custodial officers do not feel adequately trained in the use of force and are concerned that if they employ lawful use of force they may face disciplinary repercussions.

STANDARD 14

Instruments of restraint are only used when no lesser form of control would be effective to address the risks posed by unrestricted movement, and the use of restraints is proportionate in the circumstances.

STANDARD 15

Weapons are only used as a last resort when no lesser form of control would be effective to address the risks posed in the circumstances. The use of weapons is legitimate, necessary, proportionate, and subject to rigorous governance.

Section 140 of the CM Act provides that:

- (2) The director-general must ensure, as far as practicable, **that the use of force involving a restraint or weapon is proportionate to the circumstances**, and in particular that:
- (a) the circumstances are sufficiently serious to justify the use;
 - (b) the kind of restraint or weapon is appropriate in the circumstances; and
 - (c) the restraint or weapon is used appropriately in the circumstances. (emphasis added)

Concerning weapons and restraints, ACTCS holds stocks of steel handcuffs, plastic flexi-cuffs (similar to large cable ties), batons and “tear gas” at the AMC.⁴² While the CM Act allows for the use of firearms, there are none and staff are not trained in their use. Handcuffs and flexi-cuffs are used frequently for general security (e.g. court escorts) but, as noted above, it is difficult to determine how frequently they are used in use of force incidents. In the detainee survey 73% (n=179) of detainees reported that handcuffs are only used by officers when required. Staff also have access to protective clothing and equipment (“riot gear”) which is sometimes necessary to protect them when dealing with an armed detainee in situations such as a cell extraction.

2.2.4 Separate confinement and segregation

STANDARD 16

Placement of detainees in separate confinement and segregation must only be undertaken on limited grounds strictly proscribed by law, based on a demonstrated need, and carried out in the least restrictive way and for the shortest possible time.

STANDARD 17

Where detainees are subject to segregation or separate confinement, they are treated with respect and dignity, and have meaningful opportunities to leave the unit and/or earn privileges.

The Management of Segregation and Separate Confinement Policy,⁴³ the Segregation Operating Procedure⁴⁴ and the Separate Confinement Operating Procedure⁴⁵ were notified on 13 June 2019. They are a significant improvement on the policies and procedures they replaced in the way they set out the types of segregation and separate confinement and the provisions of the CM Act that authorise them. The system to review segregation directions set out in the policy is comprehensive. These policies address some of the concerns raised in our report of a critical incident [Assault of a detainee at the Alexander Maconochie Centre on 1 January 2019](#).

It was challenging for us to review whether this policy is being used in practice yet because ACTCS advised us that data on segregation and separate confinement is kept in spreadsheets and would be difficult to collate into the form requested (see [here](#)). The alternative of examining individual detainee case files was not possible in the scope of this review. The information we do have is that 83% (n=177) of detainees surveyed perceived that segregation and separate confinement are not used as a last resort at the AMC.

⁴² ACTCS advised that gas has never been deployed. Current staff do not recall batons ever being used on a detainee.

⁴³ *Corrections Management (Management of Segregation and Separate Confinement) Policy 2019* NI2019-381.

⁴⁴ *Corrections Management (Segregation) Operating Procedure* NI2019-383.

⁴⁵ *Corrections Management (Separate Confinement) Operating Procedure* NI2019-384.

There are numerous sections on segregation and separate confinement in the CM Act, reinforcing that the further restriction of a detainee's liberty is a serious matter. It is essential that ACTCS collects data that can be easily interrogated on its use of segregation and separate confinement in the AMC (Recommendation 1 refers).

Management Unit

Male detainees on segregation or separate confinement orders may be placed in the high security Management Unit (MU). We found that the MU was operating well. Officers appeared to be adhering to their responsibilities in allowing the detainees their time out of cell and keeping appropriate records. It was pleasing to see that, unlike other units, the MU was staffed during the normal staff lunch break. This is good practice. There was evidence that managers were attending the unit daily to check the detainees were being held according to an appropriate regime.

Finding 9:

The Management Unit appeared to be functioning well.

2.3 Security & Intelligence

STANDARD 18

Detainees are managed within a structured and transparent system that provides for graduated levels of restriction and security according to the risks posed by the individual detainee.

STANDARD 19

The physical environment is one where risks to security are identified and mitigated.

STANDARD 20

There are effective procedural security measures with continual monitoring of operational performance to ensure risks to security are identified early, treatment strategies are implemented and detainees' safety and freedom of movement are optimised consistent with the need for security and good order.

STANDARD 23

Effective systems are in place to detect and confiscate weapons, illicit substances and other contraband introduced, manufactured, carried or secreted by detainees, visitors, staff or others.

STANDARD 24

All searching is lawful and proportionate, and carried out in a manner that is respectful of the inherent dignity of the person being searched.

STANDARD 25

Searches of detainee cells and their property are carried out in a professional and accountable way and appropriately recorded.

2.3.1 Overview

The security envelope at the AMC serves a number of key purposes:

- To keep detainees from escaping and to keep intruders out (largely by means of the multi-function external perimeter – fences, alarms, detection systems, lights, cameras);
- To house detainees in accommodation that provides a level of security commensurate with their assessed security risk/needs, but no more restrictive than it needs to be;
- To provide a safe environment for detainees, staff and visitors;
- To minimize the introduction and trafficking of contraband, particularly drugs.

The review team examined security at the AMC at a higher level than would be the case if the review was just about security. That is, we did not delve into all the details that would be looked at in a full security audit of a prison. Nonetheless, we are satisfied that the basic security envelope is sound and that the security and intelligence teams are highly professional and working well.

We identified some risks that need to be addressed by ACTCS and some security-related practices and processes with room for improvement. These matters are covered in detail in a confidential appendix (**Appendix 4**) to this report, which includes recommendations (C1, C2 and C3) that cannot be aired in public. Unfortunately, we are unable to explain the reasoning behind the security-related recommendations in the body of this report without addressing some details that need to be kept confidential. The OICS will request that the government responds privately to us on the confidential recommendations.

Finding 10:

That the basic security envelope at the AMC is sound and that the security and intelligence teams are highly professional and working well. However, there is room for improvement in some areas.

2.3.2 Key threats: drugs, mobile phones and weapons

Former and current detainees, and some staff told the review team that drugs are readily available at the AMC to anyone who can afford to buy them and drug debts are often the cause of “stand-overs” and assaults⁴⁶. In the detainee survey 53.4% (*n*=174) of respondents reported that ‘It is easy to get hold of drugs not issued directly to you by a doctor in the AMC (including illicit drugs)’ and 33.3% (*n*=173) of respondents reported that ‘It is easy to get needles/syringes in the AMC’.

Detainees also told us that mobile phones are in abundance and are used to arrange drug deliveries and to keep in touch with criminal associates on the outside. According to detainees, drugs are routinely thrown over the perimeter fence at night, directed from detainees inside using phones.

The presence of drugs/phones is not unique to the ACT, it occurs in most, if not all prisons. However, hard evidence as to the extent of the problem is difficult to come by and conclusions reached on the available evidence can be flawed. Selected contraband finds at the AMC in 2018 are shown below:

Table: 3.1 Selected contraband finds, AMC 2018⁴⁷

Item	Finds	Rate*
<i>Drug-related</i>		
Alcohol	11	2.3
Illicit & non-prescribed drugs	55	11.5
Other drug	45	9.4
Drug paraphernalia	145	30.2
Total	256	53.3
<i>Weapons & tools</i>		
Shivs	32	6.7
Other weapon	31	6.5
Tools	19	4
Total	82	17.1
<i>Mobile phone-related</i>		
Phones	49	10.2
Phone chargers	38	7.9
SIM or SD card	36	7.5
Total	123	26.6
Total all	461	96

Source: ACTCS

* finds per 100 detainees – approximately 480 average daily number of detainees

⁴⁶ Cigarette debts were also mentioned as common reason for assaults.

⁴⁷ The items are some of the various types of contraband found at AMC. They were selected for this table for reason of their particular relevance to safety and security.

While the data confirms that illicit drugs, weapons and mobile phones are circulating in the AMC we do not know the number of contraband items that *were not* found (e.g. did 49 mobile phones represent 95% of phones at the centre or 5%) or whether the searching program was adequate (refer to Recommendation 12 below).

Concerning drugs, ACTCS has a policy and a procedure for drug testing.⁴⁸ The policy states that 'Random testing will be undertaken based upon a random selection of detainee identification numbers consistent with the requirement of the Act' but is silent on the sampling methodology.

Given this "silence", we are unclear as to the rationale for the random drug testing program at the AMC. For example, the HM Prison Service (UK) (HMPS) stipulates the minimum percentage of tests that must be conducted at prisons each month depending on the population size of the prison (5% – 10%) and that at least 14% of random tests must be conducted on weekends.⁴⁹ If the HMPS formula was applied to the AMC (10% per month for a 400+ population) then the AMC would have needed to conduct about 580 random tests in 2018/19. It conducted just 202. Of these 202 random tests, 37 (18.3%) returned a positive result with Methamphetamine (*ice, blue, crystal*) being the most common find (detected in 38% of positive tests).

It was also noted that the urinalysis testing area used in admissions was not kept as a 'sterile' area in that the door was not locked when not in use. This is not good security practice.

Finding 11:

That the number of random drug tests performed at the AMC appears inadequate given the reported prevalence of drugs in the centre.

Other matters arising from the confidential Appendix 4 to this report:

Recommendation 9:

That ACTCS develop and implement a policy for the management and protection of human information sources.

Recommendation 10:

That ACTCS conduct a risk review to identify which internal fences and gates need to be designated as security barriers, and once identified, fences that do not meet the minimum security standards described in this report must be replaced as a matter of urgency and unnecessary gates removed.

48 Corrections Management (Drug Testing) Policy 2015 (No 2) NI2015-684 and Corrections Management (Drug Testing) Procedure 2015 NI2015-739.

49 HM Prison Service, Prison Service Order #361, Mandatory Drug Testing, 2005.

Recommendation 11:

That ACTCS give serious consideration to a total redesign of the AMC visitor/staff pedestrian entry to better optimise entry barrier control and the efficient movement of people in and out of the centre.

Recommendation 12:

That ACTCS take immediate action to develop and implement a random cell and communal area search program for the AMC.

Recommendation 13:

That ACTCS review cell searching training and undertake refresher training for custodial staff who may be required to search cells and other areas at the AMC.

Recommendation 14:

That ACTCS erect clearer signage at the AMC boundary warning that people and vehicles entering are subject to searching for prohibited items.

Recommendation 15:

That ACTCS review the number of K9 drug detection teams at the AMC and explore the possibility of employing a K9 mobile phone detection team either as part of the existing K9 Unit or on occasional loan from another jurisdiction.

Recommendation 16:

That ACTCS develop inventories to accurately record and account for all armoury equipment and supplies across the AMC.

Recommendation 17:

That ACTCS develop and implement clear instructions for staff regarding the recording, control and disposal of contraband and provide necessary training to relevant staff.

2.3.3 Searching of people

STANDARD 26

Searching of visitors and their property are carried out in a professional and accountable way and appropriately recorded.

STANDARD 27

Searching, screening and testing of staff is done in a manner that is respectful of staff privacy, and in accordance with clear guidelines.

STANDARD 28

Strip searching of detainees is only carried out on reasonable grounds, carried out in the least restrictive manner, and is respectful of detainee dignity.

Detainee survey

- 54% ($n=177$) reported that strip searches of detainees are carried out with due sensitivity and respect

Staff survey

- 97% ($n=115$) believed that it was reasonable for staff to be subjected to occasional searches when arriving at work
- 32% ($n=115$) reported being subjected to a drug detection dog search at the AMC
- 74% ($n=113$) reported being subjected to some form of a search in the previous 3 months

The AMC employs passive and active measures for searching people:

Passive measures

The passive measures are the walk through rota-turn “door” in the pedestrian entry area (similar in appearance to a revolving door) which can detect metal objects and hand-held metal detectors (“wands”). Although in use in other jurisdictions, the AMC does not employ Ion Mobility Spectrometry (IMS) devices (ion scanners), which can detect drugs. Correctional Service Canada’s (CSC) [research](#) on ion scanners found that the devices are effective in detecting some fine powder drugs (e.g. cocaine) but perform poorly detecting others (e.g. heroin and amphetamines), and are not particularly effective in detecting pills or marijuana. The review team notes that the CSC research is somewhat dated (2011) and IMC technology may have improved since then. There may also be other technologies that could be employed at the AMC.

Recommendation 18:

That ACTCS review the current state of portable drug detection technology and its possible application at the AMC.

Active Measures

The active measures are pat-down (frisk) searches, strip searches, body searches and drug detection dogs. The CM Act provides for frisk searches of detainees, corrections officers 'or anyone else working at or visiting a correctional centre'.⁵⁰ ACTCS does not keep data on frisk searches.

The CM Act provides that detainees can be strip searched on the basis of a reasonably held suspicion that the detainee has a 'seizeable item' concealed on their person⁵¹ or where it is 'prudent to do so'⁵² such as where the detainee has been out of the control or immediate supervision of a Corrections Officer. There are strict provisions in the CM Act about the conduct of strip searches that are intended to, as far as possible, protect the privacy and dignity of the person being searched.⁵³ Section 110 of the CM Act requires that a 'register' of strip searches must be kept and be available for 'inspection'. However, there is no single strip search register at the AMC, rather there are a number of unit registers spread across the jail, which makes 'inspection' a laborious and time consuming task.⁵⁴

A body (cavity) search may be conducted on a detainee by a doctor appointed under section 22 of the CM Act on reasonable grounds that the detainee has inserted something in their body.⁵⁵ No body searches have been conducted since the AMC opened.

Recommendation 19:

That ACTCS maintain a consolidated strip search register as required under Section 110 of the *Corrections Management Act 2007*.

⁵⁰ Section 111(1).

⁵¹ Section 113B.

⁵² Section 113C.

⁵³ Section 115.

⁵⁴ In an initial request to ACTCS for data on strip searches dated 21 November 2018, ACTCS responded by noting that whilst 'information was available on operational registers, it would have to be linked to generate required reporting'. A further email request of 11/08/19 was made to ACTCS requesting strip search data but no response was received.

⁵⁵ Section 116.

Searching of visitors

The security process we observed for visitors to enter the AMC was somewhat undignified. Reception staff check the pockets, mouth and hair of visitors, including children, in full view of others.

“ The use of drug sniffer dogs may be argued as a necessity in order to control the entry of contraband, most particularly drugs, into the prison. That is not to deny, however, that for visitors, most particularly women and children, to be arranged into a line and subjected to a dog sniffing ones feet, legs and at times crotch and behind, is for many people embarrassing at the least and for others traumatic. Being obliged to submit ones baby or very young children to the attention of a sniffer dog raises disturbing questions. ”

Submission from Winnunga

However, 84% ($n=44$) of the small sample of visitors surveyed felt that the searches conducted on them were done professionally and respected their dignity. Whilst searching of visitors is necessary, there must be constant vigilance to consider how it can be done in the least restrictive, and most dignified manner. As part of this, staff conducting searches must have good people skills.

2.4 Safety

Both the detainee and staff surveys asked questions about perceptions of safety, which are interesting to compare. Responses were on a 1 to 4 scale (where 1 is low sense of safety and 4 is high sense of safety). There was significantly lower sense of safety among staff (1.87) than among detainees (2.45). Each group is discussed in turn below.

2.4.1 Detainee safety

Correctional facilities are safe places for detainees to live.

Detainee survey

- 62% ($n=178$) reported feeling safe for most or all of the time
- 60% ($n=178$) thought it was likely or very likely that they would be assaulted by another detainee
- 51% ($n=178$) reported being bullied by another detainee
- 52% ($n=179$) reported being assaulted by another detainee
- 19% ($n=146$) reported being sexually harassed or sexually assaulted by another detainee
- 29% ($n=180$) reported being stood over for their medication by other detainees

Averaging out the questions on safety and security reveals a statistically significant difference between male (2.40) and female (2.87) detainees, indicating that female detainees feel significantly safer than male detainees. There was no difference between Indigenous (2.44) and non-Indigenous (2.46) detainees.

The annual report of the Commonwealth Productivity Commission (Report on Government Services – ROGS) includes data on prisoner-on-prisoner assaults and prisoner-on-officer assaults for each jurisdiction. ROGS notes that the data is not comparable across jurisdictions.

Table 3.2: Detainee-on-detainee assaults and (rate per 100 detainees)⁵⁶

Year	Serious assault	Assault
2011/12	4 (1.55)	45 (15.84)
2012/13	7 (2.63)	10 (3.76)
2013/14	8 (2.41)	18 (5.43)
2014/15	11 (3.21)	43 (12.56)
2015/16	3 (0.75)	68 (16.92)
2016/17	16 (3.59)	70 (15.72)
2017/18	11 (2.32)	76 (16.02)
Total	60	330
Mean	8.57	47.14

Source: Rates data, ROGS 2019, Table 8A.16. Raw data, ACTCS

It should be noted that the data captures assaults that came to the attention of ACTCS (e.g. detainee with a visible assault-type injury or incident witnessed by staff, viewed on CCTV, etc.). As detainees are reluctant to self-report assaults for fear of retribution or being labelled a “dog” (informant) it is likely that the data understates the true extent of prisoner-on-prisoner assaults.

As to the data itself, the ‘serious assault’ rate has been quite variable with no evident trend. The ‘assault’ rate has been relatively stable over the last three years. However, it is unclear as to why there were significant variations in ‘assault’ between 2011/12 and 2012/13 and again between 2013/14 and 2014/15.

⁵⁶ Refer to Appendix 6 for definitions of assault categories.

2.4.2 Staff safety

Correctional facilities are safe places for staff to work.

Staff survey

- 75% (n=113) reported feeling safe most or all of the time
- 62% (n=115) thought it was likely or very likely that they would be assaulted by a detainee
- 60% (n=108) thought that, even when fully staffed, there were not enough staff in their workplace to ensure their safety
- 85% (n=114) expressed some fear about experiencing a serious injury at work
- 32% (n=115) reported being seriously injured at work, including being on stress leave
- 34% (n=115) reported being told by a doctor that they are at risk of developing a serious stress-related illness

As noted above, the general feeling of safety among staff is lower than for detainees. There was no statistically significant difference in feelings of safety between male as compared to female staff members.

The data on prisoner-on-officer assaults is likely to be far more accurate than prisoner-on-prisoner assaults given that one would expect officers to report any assault on them, if for no other reason than needing to make a WorkCover claim or to take sick leave.

Table 3.3: Detainee-on-officer assaults and (rate per 100 detainees)⁵⁷

Year	Serious assault	Assault
2011/12	0	2 (0.77)
2012/13	0	0
2013/14	0	2 (0.60)
2014/15	0	3 (0.88)
2015/16	0	0
2016/17	0	8 (1.80)
2017/18	0	5 (1.05)
Total	0	20
Mean	0	2.86

Source: Rates data, ROGS 2019, Table 8A.16. Raw data, ACTCS

⁵⁷ Refer to Appendix 6.

Although the data suggests that officers are at low risk of being assaulted by detainees, the staff survey revealed that 62% ($n=115$) of staff thought it was likely or very likely that they would be assaulted by a detainee.

Custodial officers in particular can receive verbal abuse, taunts and threats from detainees, and one officer told the review team, “You never know if you are about to get punched in the face”. This uncertainty about how to deal with aggressive detainees may give rise to the heightened perception of risk that was expressed in the staff survey. It should be noted that detainees also report being the subject of abuse and taunts from staff, however, overwhelmingly we observed positive interactions.

Finding 12:

That staff perceive that they are at a higher risk of assault by detainees than available assault data suggests is the case.

Recommendation 20:

That ACTCS source conflict resolution and de-escalation training for staff to better equip them to deal with verbally aggressive detainees.

2.5 Leadership and management of safety, resources and systems

2.5.1 Strategic and performance planning and evaluation

STANDARD 30

Each correctional centre has a strategic management plan in place, which is reviewed and revised as required.

STANDARD 31

Correctional centres regularly review and evaluate their own performance against their plans.

ACTCS has a two-page Strategic Plan 2019–2024 which sets out goals and aspirations for the agency. The strategic plan does not mention performance measurement for anything associated with the operation of the AMC that could inform an opinion as to whether the centre was operating well or otherwise. Similarly, there is no performance reporting on ACTCS in the Justice and Community Safety Directorate [annual report](#).

In Victoria, all prisons (public and private) are subject to quarterly reporting to the Commissioner, Corrections Victoria (CV), on a range of Service Delivery Outcomes (SDOs) and Key Performance Indicators (KPIs). There are 26 SDOs and 25 KPIs (private prisons only). Each SDO/KPI has a specified performance level (not published) to be achieved but these may vary from prison to prison depending on the nature of the prison e.g. high, medium, low security.

Finding 13:

That ACTCS does not measure its strategic planning goals against Key Performance Indicators (KPIs), which means that management is not able to monitor how the AMC is performing against those goals.

Recommendation 21:

That ACTCS develop a set of qualitative and quantitative Key Performance Indicators (KPIs) for the AMC that reflect the unique nature of the AMC as a prison with diverse operational challenges and complexities.

Supporting plans

The review team found that the AMC does not have an asset management plan, which means that plant and equipment is not being scheduled for replacement in forward budget plans. If something fails and has to be replaced, the AMC would have to meet costs (replace or refurbish) from its current year budget. Similarly, the AMC does not have a facility maintenance plan to allow it to budget for (potentially) high cost refurbishments such as repainting of accommodation units and other buildings. We also saw evidence that routine preventative maintenance was not being attended to e.g. moss/lichen on footpaths that present a slipping hazard when wet. This sort of maintenance work would be suitable for detainees.

Of major concern to the review team was the state of electrical “test and tagging”, with many examples noted of electrical equipment that had not been tested, in some cases, for years. Should an appliance (e.g. a unit fridge) with an out-of-date test tag catch fire, or someone be electrocuted, there could be serious, including life-threatening consequences:

The Work Health and Safety Act 2011 places a duty of care to provide a safe work place. Failure to maintain electrical equipment in a safe condition, or to use equipment in accordance with manufacturer’s instructions may result in injury or death to yourself, workers, or other parties⁵⁸.

We were told that the AMC owns an electrical safety testing device which, if correct, could be used by an electrician or ‘competent person’ to carry out in-house testing. Given the apparent extent of the problem, ACTCS needs to address the testing issue as a matter of urgency and there are companies in Canberra that specialise in this work.

Concerning day-to-day maintenance, at the time of the on-site inspection the maintenance staff had about 30 pages of requests that they were working through. The review team heard information from staff to suggest that maintenance jobs were not always appropriately triaged based on urgency, for example, a leaking tap versus a security matter. On an earlier visit to the AMC a Corrections Officer showed us a faulty lock on a security gate that had been reported “weeks prior”.⁵⁹

Our impression is that the AMC maintenance team is under-resourced to deal with the day-to-day work around what is now an *aging facility*. We think more use should be made of suitable detainees to undertake some maintenance work.

58 [Worksafe ACT](#).

59 This had been fixed by the time of the on-site review inspection.

Staff survey

What are the things you would like to change at the AMC, and how you might change them?

Maintenance issues being fixed-more staff in maintenance electronic gates/doors/cameras always failing---invest the money to have the system fixed and technicians always on site

It was encouraging to see at the time of the review that a lead painter was being recruited. We were told this person would run a team of appropriately qualified detainees to work on painting jobs in the jail. This is a welcome move and efforts to utilise detainees to assist with maintenance around the jail should be prioritised, given it provides meaningful work for detainees utilising their skills, and meets important maintenance needs.

Finding 14:

That the resources available to undertake routine maintenance at the AMC are inadequate and that appropriately skilled and screened detainees could be better utilised to assist maintenance staff with routine tasks around the AMC.

Recommendation 22:

That ACTCS develop an asset management plan for the AMC to ensure that there is timely and budgeted replacement or refurbishment of major plant and equipment at the AMC.

Recommendation 23:

That ACTCS develop a facility maintenance plan for the AMC to ensure that there is timely and budgeted attention given to maintaining the AMC's physical infrastructure.

Recommendation 24:

That, as a matter of urgency, ACTCS undertake a comprehensive electrical safety "test and tag" program at the AMC in accordance with ACT law.

2.5.2 Emergency management

STANDARD 30

Effective emergency management and incident response plans are in place, including evacuation plans.

Staff survey

- 29% ($n=115$) reported that they were not at all familiar with the AMC emergency instructions.
- 57% reported 'somewhat familiar' and 15% reported 'familiar'
- 62% ($n=78$) believed that emergency instructions are *unclear* about how to deal with emergency situations

Custodial staff only:

- 59% ($n=71$) reported that their training was 'ineffective' in preparing to respond to the most recent emergency situation they were involved in

The AMC has the foundations for effective emergency response, however, additional staff training and 'live' emergency management exercises, as well as training and access to specialised equipment and a review of identified response positions on the roster, would build on this foundation and improve the capacity of the AMC to respond to emergencies.

The AMC has established a comprehensive set of up to date (2018) emergency procedures, supported by a detailed and comprehensive set of schematics and an established Emergency Management Centre within the centre.

Emergency management exercises have been conducted at the centre but have so far been restricted to table-top exercises. The Head of Security advised that he was currently developing further emergency exercises, which will involve the fire and police services.

The review team notes that "live" emergency management exercises in a prison (e.g. a fire evacuation drill) are far more challenging and complex than on the "outside" (e.g. an office block) due to the ever-present security concerns in a prison.

The Head of Security also advised that more staff training was required in emergency response procedures, and training and access to specialised equipment was also required for security unit officers.

The CO3 Security stated that in his opinion, the immediate response positions on the roster may not always be available due to redeployment or inability to immediately leave their area of responsibility. For example, security officers are at times redeployed to undertake escorts away from the AMC.

The AMC does not have a 'Fire Awareness Officer', or 'Fire Warden'. This position would ensure that all fire equipment is inspected on a regular basis, to ensure all fire equipment (including breathing apparatus) is serviceable. The review team understands there was a Fire Warden in place some 18 months previous however, this position has lapsed.

Finding 15:

That the AMC has sound emergency management plans and procedures but more staff training is needed to improve their confidence in dealing with emergencies.

Recommendation 25:

That ACTCS re-establish a position of "Fire Warden" or "Fire Awareness Officer" at the AMC as soon as possible.

2.5.3 Incident reporting and response

STANDARD 33

Any incidents that occur are appropriately internally recorded, analysed and any lessons learnt are identified. Relevant staff are involved in this process and outcomes are disseminated.

ACTCS has appropriate policies and procedures for reporting incidents that occur at the AMC and the CTU. Depending on the seriousness of the incident, reports may be provided externally to the Minister for Corrections and Justice Health, the ACT Justice and Community Safety Directorate (responsible for ACTCS) and the Inspector of Correctional Services.

ACTCS and the Inspector have a [Memorandum of Understanding \(MOU\)](#) concerning 'critical incidents' (as defined in section 17(2) of the ICS Act). Aside from reporting 'critical incidents' to the Inspector, the ED ACTCS has been forthcoming in providing oral advice to OICS on other incidents that he felt we should know about lest the Inspector was asked for comments by the media. This "heads-up" advice has been helpful and appreciated.

Unfortunately, the incident *reporting* process is not supported by a robust incident *recording* system in that incident summary reports are recorded on an Excel spreadsheet (as are use of force reports and lock-in episodes). This spreadsheet is virtually impossible to "interrogate" if one wanted to examine trends over time e.g. places where drugs or mobiles phones have been found, or identify units with high prevalence of violent incidents etc. This sort of information is important for intelligence and security staff and for violence prevention strategies. Nor does the spreadsheet provide any useful information about follow-up to incidents (Recommendation 1 refers).

Finding 16:

That the summary recording of incidents by ACTCS is not conducive to analysis or tracking in terms of follow-up action.

Concerning incident reviews undertaken by ACTCS, these can be local (AMC/CTU) reviews of minor incidents or formal Internal Management Reviews (IMRs) of serious incidents, excluding 'critical incidents' which may be reviewed by the OICS (s 17(2) of the ICS Act). ACTCS is not required to provide reports on non-critical incidents to the OICS.

2.5.4 Record keeping

STANDARD 35

The correctional centre keeps up-to-date, well-organised, secure and permanent records of key information.

In the [Remand Review](#), OICS found (Finding 39) that 'a considerable body of work needs to be done to bring detainee hard files to an acceptable state.' The ACT government accepted the finding, noting that 'ACTCS is committed to ensuring files are managed properly and are comprehensive. ACTCS is actively pursuing options for improvements in record keeping...'.⁶⁰ The response gave 30 December 2019 as the implementation date. Given that action is apparently underway, the review team did not revisit the issue.

2.5.5 Staff

STANDARD 37

There are appropriate staffing levels to ensure the correctional centre functions effectively, and the manner of appointment is mindful of both security of tenure and the need for flexibility for management.

Staff profile

As at December 2018 the AMC staffing (Full Time Equivalent – FTE) comprised⁶¹:

Operations Permanent	207.79
Operations Temporary	20.00
Operations Casual	2.45
Total	230.24
Admin Permanent	9.00
Admin Temporary	2.00
Total	11.00
Detainee Services Permanent	23.00
Total all	264.24⁶²

⁶⁰ [ACT government response to Remand Review](#).

⁶¹ ACTCS People and Governance Report, December 2018.

⁶² It is unclear as to whether Court Transport Unit (CTU) staff are included in this data.

Staffing difficulties

The Operations Manager told us that there were currently 11 CO2 vacancies at the AMC. The Staff Clerk advised that about 10% of the Centre's staff were on workers' compensation at any one time and that the CO3s spent significant time contacting officers to try and fill vacant posts on overtime each day.

Mandatory Training takes place on a Tuesday between 1pm and 4pm. The AMC has been running use of force and Breathing Apparatus (BA) training all day on regular Mondays/Thursdays and Fridays to bring all staff to a standard but this has been done generally through overtime.

On Monday 1 July 2019, there were eight overtime shifts rostered during the day shift, and two posts left unstaffed – the second officer in the Master Control Room and the second officer in the Women's Community Centre (which now accommodates male protection detainees).

There were also seven officers rostered for mandatory breathing apparatus training. The roster shows a second officer's name against each of the training participants, indicating that relief was provided for each participant. Additionally, there were nine officers on annual leave and two on workers' compensation.

These staffing difficulties may be impacting upon staff well-being. An analysis of the data gathered in our survey indicated a statistically significant lower well-being among male staff compared to female staff. This difference is also observable within the Corrections Officer, Unit Manager and Operations Manager cohort. Overall, this cohort of staff had a lower well-being compared to staff in other roles. Staff well-being was also lower among those who have been working at the AMC for more than five years.

Rosters

Staff feedback about roster arrangements was generally positive. In response to the free text question on the staff survey 'what are the most satisfying things for you about working at the AMC?' around 20% ($n=73$) identified the roster and/or having 12-hour shifts and time off as positives. Eighty-three percent ($n=94$) of staff felt that the roster system was effective or generally effective.

The review team examined the six-week roster for one of the AMC accommodation areas. Two rotations are rostered, enabling officers to know their shifts for three months at a time. Included in the roster is a line for 'relief' and one for 'training' which are built into the roster to avoid vacancies and enable each officer on the roster to do a block of night shifts and participate in training where required.

As this is the rostering practice for each area of the AMC, they should all have similarly balanced rosters. However, leave for each officer is not built into the roster and officers' absence on workers' compensation or personal leave can also not be factored into the roster.

Vacant positions, annual leave, maternity leave, personal leave and workers' compensation create roster gaps that cannot necessarily be covered from within the roster, and thus can create overtime, or unstaffed posts and lock-ins. The cost of replacing those staff members is borne by the centre, frequently in overtime.

Staff we spoke to told us that centre management was doing all it could to reduce the number of lock-ins but felt that this was being done at the expense of officer and detainee safety due to some posts being unstaffed. This anecdotal information was reflected in responses in the staff survey where 60% ($n=108$) of respondents thought that, even when fully staffed, there were not enough staff in their workplace to ensure their safety and 55% ($n=108$) thought that, even when fully staffed, there were not enough staff in their workplace to ensure the safety of detainees.

Staff survey

What are the things you would like to change at the AMC, and how you might change them?

3 more positions on shift (1 more remand cottage officer; 1 more AU officer; 1 more Rover)

Employ more staff urgently; advertise through more channels

More officers in each yard

More staff to detainee ratio

Staffing resource is a significant problem within offender services impacts directly on ability to conduct meaningful change/interactions

What cannot be gleaned from the roster is the actual number of posts and staff required to best operate the centre. There are posts on the daily roster which seem to cover multiple roles, some of which appear to be in areas which may need permanent staffing to function effectively.

The CPSU submission noted that workers felt current staffing levels were not safe and argued that there needs to be minimum operational staffing requirements established for essential posts, planned activity and industry work, and then adjusted up based on risk profile, with built in contingency for when the need for additional staff arises.

A full staffing review would be required to ascertain if there are enough staff at the centre to ensure that it operates efficiently and effectively, which was beyond the scope of this review.

Staff training

STANDARD 38

Staff are appropriately qualified, skilled and experienced for functions to be performed effectively, have appropriate management, mentoring and supervision, and behave with integrity.

STANDARD 39

The learning and development needs of staff are regularly assessed and addressed so that all staff are fully equipped to perform their duties.

Staff survey

Custodial staff only:

- 89% (n=71) did not feel adequately trained in the use of chemical agents
- 78% (n=72) did not feel adequately trained in the use of force
- 70% (n=73) did not feel adequately trained in the detainee disciplinary process
- 59% (n=71) reported that their training was 'ineffective' in preparing to respond to the most recent emergency situation they were involved in
- 49% (n=74) did not feel adequately trained in the use of restraints
- 36% (n=73) did not feel adequately trained in searching procedures

All staff:

- 89% (n=109) did not feel adequately trained in a "loss of control" situation
- 85% (n=108) felt adequately trained in CPR/first aid
- 76% (n=109) did not feel adequately trained in staff self-care, such as dealing with stress
- 71% (n=99) did not feel adequately trained in detainee case management
- 71% (n=105) did not feel adequately trained in the management of detainees with mental health issues
- 70% (n=107) did not feel adequately trained in the management of detainees with drug issues
- 55% (n=109) did not feel adequately trained in occupational health and safety
- 52% (n=107) did not feel adequately trained in awareness of particular detainee needs

- 52% (n=108) did not feel adequately trained in emergency response (fires, natural disasters, etc.)
- 51% (n=107) did not feel adequately trained in suicide prevention

Training of AMC staff is the responsibility of the Training and Development Unit (TDU), ACTCS Head Office, which is also responsible for Community Corrections training. For the AMC the primary training focus is on recruit training for Corrections Officers (COs)⁶³ and on-going and refresher training for substantive COs.

⁶³ These are custodial staff, often referred to in other jurisdictions as 'prison officers'.

Recruit training courses vary in length in other jurisdictions but, with the exception of Victoria, all are between 10 and 14 weeks duration:

Table 3.5: Recruit training course durations

Jurisdiction	Recruit training (weeks)
NSW	10
SA	12
WA	14
Qld	10
NT	11
Tas	13
Vic	8
NZ	10
Average	11
ACT	8

Source: Other than ACT, agency websites accessed on 24/07/19

The ACT Custodial Recruit Training (CRT) program comprises a six-week classroom-based program followed by a two-week on-the-job supervision period where recruits are required to complete a work book attesting to successful completion of a set or required tasks e.g. escort a detainee. Following recruit training, officers must complete the Certificate III in Correctional Practice CSC30115, which is a nationally recognised and accepted qualification for ‘prison officers’. This qualification must be obtained during their first year of employment.

Recruit courses in other jurisdictions also have a combination of classroom and on-the-job training e.g. SA provides six weeks of each. The review team was told by staff that until a couple of years ago the ACT recruit course was 10 or 11 weeks in duration but was reduced to eight weeks for reasons which are unclear. We were also told by the ACTCS Executive Director that the course is under review and is likely to be increased in duration.

It was outside the scope of this review to conduct an inter-jurisdictional analysis of the content of CO recruit training programs, however it is evident that the ACT is out-of-step with most other states and territories and New Zealand with regard to the duration of its program. This may explain, at least in part, why AMC staff feel that they are undertrained, and in some cases, grossly undertrained in a number of key areas of concern to them. Experienced staff expressed concerns to the review team on a number of occasions that the new recruits were underprepared to be “on the floor” immediately after completion of recruit training and suggested there needed to be longer training and more mentoring.

Not all the training needs identified by staff could or should be incorporated into the recruit training course. In any case recruit training is directed at the “basics”, which should be built on by specialised training e.g. dealing with people with mental health problems, working with detainees with a disability, CALD, etc.

Finding 17:

That there is a significant disparity in the duration of the ACTCS Corrections Officer custodial recruit training course (8 weeks) compared to other jurisdictions (average 11 weeks).

Recommendation 26:

That the ACT government commission an independent review of the ACTCS Corrections Officer custodial recruit training course, including a comparative analysis of similar courses in other jurisdictions, and the adequacy of on-going and refresher training provided to all AMC and Court Transport Unit staff.

Staff grievances and complaints

STANDARD 40

Staff are supported and have avenues to raise and address grievances that affect them in a timely and effective way.

In the staff survey, 23 staff ($n=115$) reported putting in a grievance or complaint about a work-related matter. Eighteen of those reported they were 'not at all happy' with way the complaint was handled, with the other five 'partially happy'.

Twenty-seven staff who had *never made a complaint* gave the following reasons:

Table 3.6: Reasons staff gave for not making complaints

Reason	Frequency
Never had any reason to	4
Thought it would be useless	7
Problems were taken care of informally	3
Don't know how to make complaints at the AMC	1
Didn't feel safe making a complaint	10
Other reason	2
Total	27

Source: OICS staff survey 2019

The issue of staff airing grievances (making complaints) about other staff, and in particular, complaints about their "superiors", came up in comments appended to staff survey forms, a union delegates' focus group meeting held during the review, discussions with the CPSU and unsolicited approaches to the review team by staff members during the on-site component of the review in July 2019.

The consistent theme from these sources was a perception that "junior" COs don't believe that management want to hear about complaints from staff about staff, whereas complaints made by detainees about staff are rigorously investigated and punishments are handed out accordingly. Disturbingly, there was a belief or fear expressed by many that making a complaint would lead to retribution in some form or another.

The review team accepts that the information we received is anecdotal and it was beyond the scope of this review to examine actual complaints and how they were handled by management. Nonetheless, the perception amongst rank-and-file staff that the complaints system is ineffective or unjust cannot be ignored.

2.5.6 Policies and procedures

STANDARD 41

The correctional centre has clear, comprehensive, internally consistent and up to date policies and procedures on all relevant areas. Policies and procedures are Notifiable Instruments and are available on the ACT Legislation Register.

STANDARD 42

Operational practices reflect policies and procedures.

Staff survey

- 73% (n=113) can easily access relevant policies, procedures and local instructions
- 66% (n=111) reported that they are informed quickly of changes to policies, rules or regulations that affect them

Significant work has been underway over recent months to review ACTCS policies and procedures to bring them up to date. Our [Remand Review](#), released in February 2019, made the finding that 'significant work must be done in a timely manner to bring policies and procedures to a standard the community should expect for a custodial environment'. This finding was accepted by the ACT government and the timeframe for completion was listed as 30 June 2019. As at September 2019 a significant number of policies still need to be updated. We recognise that significant work has been done and note that in general the updated policies and procedures are an improvement on outdated preceding policies.

Recommendation 27:

That ACTCS publicly commit to an updated timeframe for bringing policies and procedures to a standard the community should expect for a custodial environment.

It is noted that there has been limited stakeholder consultation on the updated policies and procedures. Whilst stakeholder consultation can slow processes down, it has the benefit of allowing a more diverse range of perspectives to be considered and targeted consultation (to only the most relevant stakeholders) can be done in a reasonably timely way. This may prevent issues or concerns with policies and procedures becoming real-life concerns after the policy/procedure is notified. We see merit in ACTCS consulting with the oversight entities on policies and procedures, particularly as there is already an established group that engage regularly with ACTCS (the AMC Oversight Agencies Collaborative Forum).

Recommendation 28:

That ACTCS consult with the oversight entities when developing and updating policies and procedures.

In addition, policies and procedures that are restricted must still be notified on the ACT Legislation Register. The CM Act states: 'Each corrections policy or operating procedure is a notifiable instrument' and 'A notifiable instrument must be notified under the Legislation Act.'⁶⁴ Currently ACTCS is using the *Corrections Management Policies and Operating Procedures 2017 (No 2)*⁶⁵ to notify a list of policies and procedures that are restricted. This is completely inappropriate and may be a breach of the CM Act. It removes transparency because the *list* of 'notifiable instruments' on the ACT Legislation Register does not reveal the existence of all policies and procedures. This makes it extremely difficult for detainees to find which policies and procedures exist, and apply to them.

The Transitional Release Procedure is included on that restricted list for a reason that is entirely unclear to the review team. Lack of publication of this instrument has understandably caused significant frustration for detainees and community organisations working with detainees on reintegration. Detainees and their support networks are unaware if there are timeframes around when they should have received a response to their application for transitional release and if there are criteria that they need to meet.

Other policies and procedures in the list of restricted policies, such as the Gate Policy, have good reason to be restricted. However, it is still very important that they are notified individually (rather than via another instrument) to ensure transparency. It also makes it easier for oversight agencies like the Official Visitors and the Human Rights Commission, who must be given access to those policies under section 15(2) of the CM Act, to know what policies and procedures exist.

Other jurisdictions publish information about policies and procedures on their websites. For example, Queensland Corrective Services has a list of its [Custodial Operations Practice Directives \(COPDs\)](#) some of which are noted as 'In confidence' (not available to the public). Some others that can be read online have redactions of sensitive information – this approach is preferable to restricting a whole document because of some sensitive content.

Recommendation 29:

That ACTCS notify all current and future policies and procedures, including those that are restricted, on the ACT Legislation Register as individual notifiable instruments.

Recommendation 30:

That ACTCS review all restricted policies and procedures with the aim of making as many as possible fully unrestricted or unrestricted with necessary redactions of material that would be likely to disclose information that may endanger public safety or undermine justice, security or good order at a correctional centre.

64 Section 14(2).

65 NI2017-55.

CHAPTER 3: PILLAR 2

RESPECT AND DIGNITY



CHAPTER 3: PILLAR 2 – RESPECT AND DIGNITY

3.1 Respect and dignity of individuals

Staff and detainees treat each other with respect and dignity.

Detainee survey

- 5% ($n=179$) reported that staff treat them fairly and with respect 'most of the time'.
29% answered 'sometimes'
- 21% ($n=180$) reported that most staff are interested in their needs 'most of the time'.
47% answered 'sometimes'

Staff survey

- 52% ($n=115$) believed that staff and detainees get on 'generally well'
- 49% ($n=110$) believed that they have dealt very effectively with an individual detainee's problem 'most of the time'
- 51% ($n=111$) reported that working with detainees all day is a strain on them 'most of the time' (10%) or 'sometimes' (41%)

The review team have formed the impression that overall, staff and detainees do treat each other with respect and dignity. This is primarily based on extensive observation (during the review week with the eight external members of the review team, and OICS permanent staff regularly visiting the AMC and CTU), and discussions and submissions from staff and detainees. We note, however, that only 5% of detainees surveyed ($n=179$) reported that staff treated them fairly and with respect 'most of the time', with a further 29% reporting 'sometimes'. Analysis of the survey data found that female detainees perceived the interaction between staff and detainees to be significantly more positive than male detainees. Additionally, older detainees (60 years or over) were more likely to perceive the interaction between staff and detainees as 'positive' than detainees in the 21 to 29-year-old age group.

3.2 Management and staff respecting and supporting each other

Management listens to and supports staff in the workplace.

Most of the information on this topic came from the answers given by staff to questions in the staff survey.

Staff survey

Management processes

- 49% ($n=111$) believe that it is usually clear who has delegated authority to make decisions
- 77% ($n=108$) have found it hard to keep up with all the changes that have occurred at the AMC in recent times
- 78% ($n=110$) do not believe that management make changes to the way they do things when it is needed
- 84% ($n=111$) disagreed that the AMC was run well

Management relations

- 73% ($n=108$) believe that management treats them with respect and dignity
- 71% ($n=112$) feel that they are trusted to accomplish their work objectives
- 71% ($n=111$) feel comfortable to go to their supervisor with suggestions or concerns about operational matters
- 69% ($n=111$) know exactly what their supervisor expects of them
- 63% ($n=111$) reported that their supervisor asks their opinion when a work-related problem arises
- 56% ($n=110$) reported receiving constructive feedback from their supervisor about their work performance
- 55% ($n=110$) do not believe that their hard work will lead to recognition of them as a good performer

Overall, while the results are somewhat mixed, the answers to the two questions about changes in the workplace suggest that ACTCS needs to engage more with staff about its direction and what it is trying to achieve. Union delegates told us that their meetings with AMC management are a one-sided affair where they are often just informed about decisions affecting staff after they have been made. An analysis of our survey data showed that staff were less satisfied with management processes than with management relations.

There were also a range of comments in the free text section of the staff survey that expressed the opinion that management did not adequately support frontline staff, hear their concerns, or value their opinions. Based on the number and nature of the comments from staff on the survey and reported directly to the review team, the relationship between frontline staff and management was a source of significant tension and anxiety for frontline staff. The survey data also showed that staff members who have been working at the AMC for longer had a worse perception of management relations, particularly those who have been working at the AMC for over five years. In addition, Corrections Officers, Unit Managers and Operations Managers reported poorer management relations than staff in other roles.

The CPSU submission similarly noted officer concerns that there was 'insufficient communication and consultation with the Officers, particularly in decision making processes'. Many staff members (custodial officers and also non-uniformed staff such as programs staff), also commented that supervisors and managers rarely visited units and other workplaces. While the review team understands that senior staff are busy dealing with the day-to-day complexities of running a prison, it is important that managers, from the General Manager down, get out of their offices, be seen "out the back" and engage with frontline staff.

ACTCS needs to reflect on the fact that 84% ($n=111$) of staff disagreed that the 'AMC was run well'.

3.3 Daily life

3.3.1 Living conditions

STANDARD 43

Where detainees are accommodated in cells, these cells have sufficient space and comforts to meet detainees' daily needs, afford them adequate privacy, fresh air and natural light.

STANDARD 44

The correctional centre built environment is the least intrusive on detainee liberty as possible in the circumstances; meets all relevant health, safety and environmental standards; considers special needs of detainees; and is conducive to rehabilitation.

STANDARD 45

Detainees have access to clean toilets and ablution facilities and may access them, in privacy from other detainees, staff and security cameras and as far as possible, at a time of their choosing. Correctional centre environments comply with good public health practices with respect to environmental health and personal hygiene.

Detainee survey

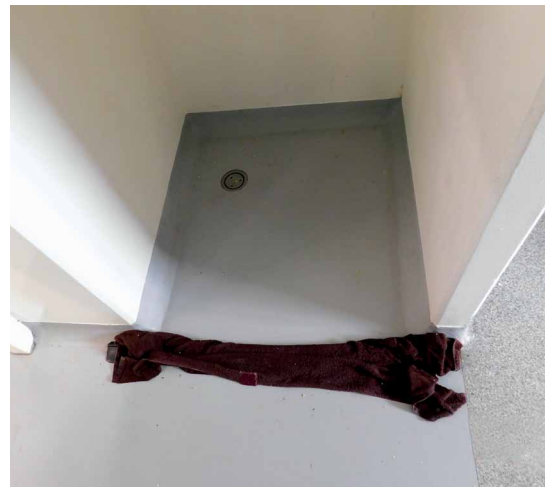
- 69% (n=174) reported that equipment and services are not well maintained at the AMC
- 55% (n=178) described AMC as 'very crowded' and 29% as 'somewhat crowded'
- 31% (n=178) reported that they would prefer to live in a non-smoking unit
- 26% (n=178) reported that they had no privacy at all in their unit

A typical cell at the AMC measures about 9m² (including the toilet and shower), which is consistent with the *Standard Guidelines for Prison Facilities in Australia and New Zealand*⁶⁶ for a single person cell (8.75m² as the minimum habitable single cell size including ablutions, and 12.75m² for a double cell including ablutions). To put 9m² into perspective, it is about the size of small bedroom in a family home into which a shower, toilet, desk, chair and shelving have been added. If that cell is then 'double bunked' the additional occupant has to bring his/her clothing and belongings in there and find somewhere to put it. He/she must also shower and use the toilet with no or very little privacy. It is not uncommon to find showers with no curtains (see Photo 2 below).

This is a doubled-up cell OICS photographed in an older unit at the AMC in 2018. It was in a poor state of repair and maintenance.

Photo 1: Doubled-up cell in Sentenced Unit

Source: OICS 2018

Photo 2: Cell shower in Accommodation Unit

Source: OICS 2019

66 Standard Guidelines for Prison Facilities in Australia and New Zealand (1990). The 2012 revision the Standard Guidelines for Corrections in Australia refers back to the 1990 document in relation to cell size. The 2018 update, called the Guiding Principles for Corrections in Australia does not refer to cell size.

Notwithstanding that detainees are responsible for some, if not most, of the cell damage (e.g. graffiti) they are not responsible for “fair wear and tear”, the poor quality double bunks that have been put into single cells or the problem of shower flooding that occurs in a number of units due to inadequate floor wastes that easily clog up with hair and other debris. The shower in Photo 2 had no curtain or curtain holders and detainees were using towels to try and prevent flooding both of their cell and the landing (to the left of photo), which occurs regularly in units.

The detainees occupying the cell in Photo 3 were using the sticky labels from milk containers as curtain holders. These labels are seen throughout the centre used in many imaginative ways, including to cover smoke detectors so they do not go off when detainees smoke in their cells.

“ They gave us curtains but no one ever came back to hang them up – some of the girls end up using sticky labels from the drink bottles etc to try and stick them up.”

Submission from female detainees

Photo 3: Curtain holder in Accommodation Unit



Source: OICS 2019

As discussed in section 2.5.1 of this report, there are significant maintenance and repair issues at the AMC that impact on detainees, including those who try to do the right thing by keeping their cells as neat and clean as possible. Detainees in one unit told us that they would be happy to clean-up and paint their cell if they had the materials.

A member of the review team, with very recent experience working in a privately-operated prison, commented that the condition of units in the AMC would cost a private operator dearly by way of fines and loss of performance-linked fees.

Concerning health and hygiene, the review team was struck by the pervasive smell of stale cigarette smoke in all units, including areas where meals are prepared and/or consumed. We also saw communal area fridges that were over-stocked and grubby, and cooktop filters clogged with grease.

Finding 18:

That the general condition of accommodation and communal areas at the AMC is poor and in urgent need of a concerted refurbishment effort and longer-term maintenance planning.

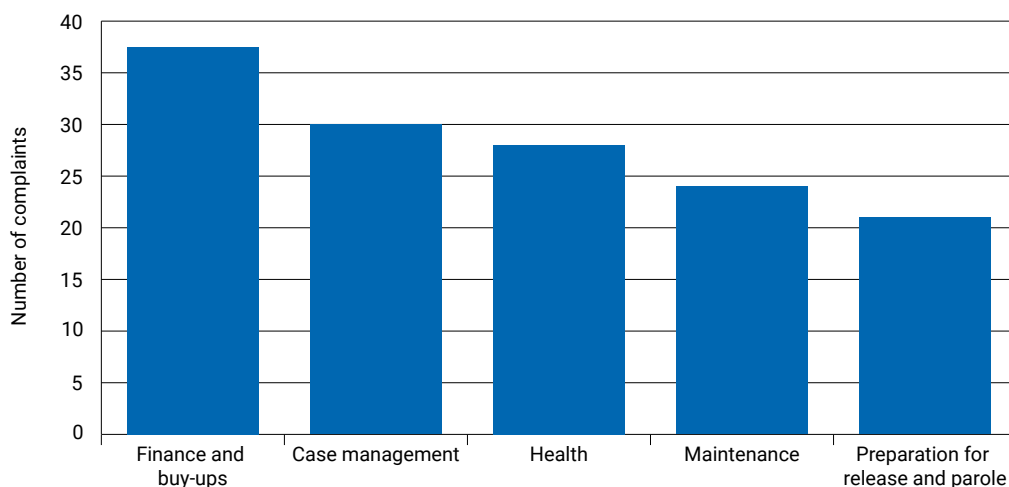
3.3.2 Detainee trust accounts**STANDARD 49**

Detainee monies are to be recorded, stored, transferred and controlled in an effective manner.

The system used for detainee trust accounts is now fully automated with multiple checks and balances in place and regular audits occurring. Under the Detainee Trust Fund Management Policy,⁶⁷ detainees are allowed to receive \$150 per week into their trust account from family or friends. They can also request that up to \$150 per week be transferred to their trust account from their external bank account. The policy is unclear as to whether this is in addition to, or instead of, a deposit made by family or friends.

Detainees can have a maximum of \$1000 in their trust account, with any excess held in a holding account. Detainees can spend a maximum of \$100 per week on buy-up, \$150 a week on canteen items, \$150 a week on phone credits and \$150 a month on an activities buy-up. It is our view that providing detainees with such large amounts of money to spend may contribute to the risk of standovers and creates an environment of inequity. Detainees who do not have access to external sources of money are reliant on their wages from employment within the AMC or the unemployment wage of \$15 a week. Detainees in the Transitional Release Centre are deducted board based on their earnings. However, there is currently no mandatory withholding of wages earned by detainees within the AMC. This type of scheme is implemented in other jurisdictions, such as Victoria, to ensure that detainees have access to funds when they are released to assist with reintegration.

In the 2018–19 financial year the top complaint theme to the Corrections Official Visitors was finance and buy-up as illustrated below:



67 Corrections Management (Detainee Trust Fund Management) Policy 2019 (No 2), NI2019-313.

A significant source of ‘finance complaints’ has been the time it takes for EFT payments (e.g. from a partner to a detainee) to actually reach a detainee’s trust account due to bank processes that we all experience. For example, an EFT made on a Thursday may not reach a detainee’s account until the following week. This causes problems for detainees who need funds for buy-ups or to top-up their phone accounts. While this process is out of the control of the AMC, detainees need to be better “educated” about how the EFT system works so that they can arrange transfers early enough to allow for the delays. Complaints to the Official Visitors about finance have declined significantly in the second quarter of 2019, which may be attributed to improved communication with detainees about timeframes for EFT transfers.

Finding 19:

That AMC detainee monies appear well-managed and monitored.

Finding 20:

That there is no compulsory savings scheme for detainees employed within the AMC to ensure they have funds on release.

3.3.3 Detainee buy-ups

STANDARD 50

Detainees can access for purchase a reasonably wide-range of products which are comparable in price to such items as they are available in the local community.

Detainees can purchase from a large range of items provided by Corrective Services NSW (CSNSW) in a weekly grocery buy-up and from a monthly activities buy-up. This is an automated service for the AMC as they only have to send the detainees’ order forms and receive the orders which have been packaged into sealed clear plastic bags. The orders are delivered to the relevant units where staff provide a security and quality check before distributing to detainees. Detainees do not know if something is unavailable until they do not receive it in their order. Any issues such as this are referred back to CSNSW for investigation and resolution the next week with either the product being delivered or a refund. There is no evidence of an incentive-based approach to buy-ups as all detainees receive the same order form.

Detainees also have access to the canteen (known as the “cigarette buy-up”) each week. The items available are mostly tobacco and foods/supplements such as eggs, frozen meat and protein powder. Having only limited items available makes purchasing, monitoring and storing inventory easily manageable. The canteen was clean, tidy, organised and efficient. There appeared to be sufficient checks and balances in place, both manual and electronic. Detainees are rostered to attend the canteen to purchase items and “bagging up” is available for those unable to attend. The women are required to pre-order and have their orders delivered, further restricting them to their unit.

In the detainee survey, 84% ($n=174$) of respondents described the variety of buy-up food as 'poor' or 'fair' and 79% ($n=176$) described the quality of buy-up food as 'poor' or 'fair'. This view was reflected in the written submissions received from detainees which also raised that items on buy-ups are overpriced. This heavily impacts those who do not have a job outside the wing or external support to supplement their AMC income. One detainee stated on a submission to the review "you don't even get paid enough to buy tobacco – highest paid wing job is \$34 [per week], tobacco is \$36".

Finding 21:

That the buy-up service provided by Corrective Services NSW has many advantages for the AMC. However, it provides the AMC with little opportunity to influence service delivery and leaves the AMC vulnerable should NSW decide not to continue providing the service.

Finding 22:

That the detainee canteen is a small operation that runs well with ample opportunity for development.

3.3.4 Food and drink

STANDARD 52

Detainees have access to nutritious food and drink in sufficient quantity to avoid hunger and thirst. Where meals are served, this is done at times consistent with the cultural norms of Australia e.g. not before 5pm.

Detainee survey

- 88% ($n=172$) described the quality of food served from the central kitchen as 'poor' (50%) or 'fair' (38%)
- 60% ($n=177$) described the freshness of fruit and vegetable as 'poor' (23%) or 'fair' (37%)
- 54% ($n=143$) reported that food choices usually take account of special needs

The cottages and WCC are self-catered so detainees are allocated \$50 that they can use to order food for the week, an amount that has not changed since at least 2011. In practice, detainees tend to pool their funds and agree on what to purchase for the week. Some men commented that \$50 per week for food is inadequate for an adult male, particularly given the high price of meat. We observed that the cooking and food storage facilities, particularly the fridges, in some units were unhygienic.

Other accommodation units have their food prepared by the kitchen and delivered to the unit. In the women's unit (SCC) the East and South wings were both self-catered and receiving meals from the kitchen.⁶⁸ On previous visits to the women's unit OICS staff have observed fridges crammed full of food.

68 The women in West wing only receive kitchen meals.

The review team found that the AMC kitchen was run to a high standard. We were told that improvements are planned to allow the kitchen to cater for the increased detainee population. The menus used by the kitchen are seasonal and run on a two-week rotation. Eighty-six percent ($n=172$) of detainees surveyed described the variety of food served from the central kitchen as 'poor' (50%) or 'fair' (36%). The menus have not been assessed by an independent qualified nutritionist since 2011. The review team was told that this is in the process of being done and should be completed in the coming months.

Sixty-eight percent ($n=157$) of the detainees surveyed reported that the amount of food served from the kitchen was 'insufficient'. This was supported by the review team's observations. Detainees informed us that lunch is the least appealing meal provided (in terms of variety and quantity: filled bread rolls) and the fillings in the rolls was minimal – we sampled meals including lunch rolls and verified this. While breakfast and dinner were more substantial, there is an insufficient quantity of food to last the day. This was summarised most aptly by a detainee in a written submission:

The meals provided by AMC Kitchen comprise what I term a subsistence diet. The dinners are a good size, and when they arrive at 4:30pm people are usually hungry and eat shortly after. By 8pm they are hungry again and consume the bread or cereal supposedly for breakfast. In the morning they are hungry and wait for 11:30am Lunch... half the inmates go around daily asking others for food, because they are 'starving', and it is hard to give them food as many inmates cannot spare it.

This may be mitigated by detainees who have external financial support, allowing them to purchase food from buy-ups. We observed detainees cooking bacon and eggs in a unit "between meals", which would have been a personal expense. This creates inequity amongst the detainee population and potentially increases the risk of standovers.

We also heard from a number of Muslim detainees that despite requesting a 'no pork' meal, they had on a number of occasions received pork in meals (at least one case had been acknowledged by ACTCS and the detainee had received an apology). While mistakes can be made, the frequency of the occurrences is concerning. Other Muslim detainees were not aware that the non-pork meat was Halal, and so were eating vegetarian meals 'to be safe'. They found the vegetarian lunch rolls were not filling. ACTCS has indicated that advising detainees of dietary specifications and how to meet specific dietary needs would be part of the new Detainee Induction Handbook.

Finding 23:

That many detainees consider that the quantity of food provided by the kitchen is insufficient.

Recommendation 31:

That ACTCS review the \$50 per week per detainee self-catering allowance, noting that the allowance has not been increased in at least nine years, and in future, ensure that the allowance is adjusted annually in accordance with the Consumer Price Index.

3.4 Consultation and complaint handling

STANDARD 53

There are mechanisms in place for consulting with detainees about matters which affect them.

STANDARD 54

Grievance processes are user-friendly for detainees with low-levels of literacy, or for detainees with a disability that impacts on their ability to make a complaint.

3.4.1 Detainee Request Forms

Detainees use a Detainee Request Form, colloquially called a “bluey” to make a request (such as to have money put into their trust account, or for additional clothing etc.) or to make a complaint. Detainees and staff expressed frustration with this system because there is no way to track the progress of the request. The form is filled out in a triplicate book and once the top form is torn from the book there is no way to track whether it reaches the appropriate staff member. One detainee stated in a submission ‘Bluey’s disappear into a huge black hole never to be seen again’.

Furthermore, there appears to be no established ‘alternative channels’ for detainees to make requests where they have limited English, low literacy or cognitive skills or face other barriers. Instead, these detainees are forced to rely on assistance from other detainees or staff willing to follow up on their behalf.

ACTCS advised there is consideration of moving to a central email system through which detainees can submit requests. While this is a good idea, a ‘no wrong door’ policy should be part of this approach with accessibility mechanisms built in for detainees with additional needs or those who do not have a computer in their cell.

Finding 24:

That the paper-based “bluey” system is an unsatisfactory way for detainees to submit requests and make complaints.

3.4.2 Detainee Delegates

It is positive that the AMC has regular monthly male and female delegates meetings, attended by senior management of various areas at the AMC, with some oversight entities as observers. A detainee delegate is a paid work position (job), and as part of the review a team member attended women’s and men’s delegates meetings. However, information received by the review team and our own observations reveal that these meetings are falling well short of providing a meaningful opportunity for consultation and exchange of ideas between AMC detainees and management.

In June 2019 ACTCS notified a detainee delegate's policy and an operating procedure, formalising the process.⁶⁹ These instruments also introduced a number of changes to previous practices; significantly that delegates may now only serve for one 12-month term and may not be reappointed, whereas previously some delegates had served for a number of years. When members of the review team met with the "old" male delegates in July 2019 this issue of non-reappointment was a source of much angst and suspicion with the long-serving delegates believing that the new policy was aimed at silencing them and replacing them with more compliant detainees.

Additionally, male delegates told us that meetings are currently a one-sided affair that are used by the AMC to tell them about things that management wants communicated to the other detainees and that when delegates raise issues they are frequently dismissed. The review team notes that there is an imbalance of power with the delegates' arrangements in that:

- Delegates are appointed, and can be dismissed, by the General Manager.
- The General Manager decides which AMC staff will attend meetings.
- Agenda for meetings is managed by AMC staff.
- Meetings are chaired and minuted by AMC staff.

Measures need to be taken by ACTCS to improve the quality of consultation that occurs at delegates' meeting. Meetings must be more than a forum to inform detainees about changes: a newsletter or email on PrisonPC⁷⁰ could perform that function. A delegate system is rooted in concepts of democracy, that members of a body politic (in this case, a prison) should have a voice about matters than affect them. Granted, there are significant limitations to what prison management may be able to do about many aspects of daily life in jail, yet having a respectful discussion and exchange and forum for two way communication contributes to detainee well-being.

A formal Terms of Reference for detainee delegates' meetings could be drawn up jointly that covers matters such as meeting objectives, roles and functions of participants, types of matters dealt with and so on. Such a document would provide guidance to delegates new to the role, as given the new policy, turnover of delegates will be more rapid and any assistance to help bring them up to speed is desirable. Consideration could also be given to having appropriately skilled delegates take the minutes for the meeting. This occurs, for example, in Acacia Prison in WA, and would be a meaningful task for a delegate. Given that delegates are drawn from different units across the prison, there may be utility in them meeting out of session to identify issues of common concern or brainstorm proposals to address issues.

Recommendation 32:

That ACTCS develop, jointly with current detainee delegates, a Terms of Reference for delegates meetings to clearly articulate the objectives and expectations for that forum, with an emphasis on constructive engagement.

⁶⁹ *Corrections Management (Detainee Delegates) Policy 2019 NI2019-396; Corrections Management (Detainee Delegates) Operating Procedure 2019 NI2019-395.*

⁷⁰ The PrisonPC is a basic in-cell computer that provides detainees with a limited email facility and limited access to approved internet "white sites" e.g. ACT Legislation Register.

3.4.3 Internal complaints

Detainee survey

- 64% ($n=83$) reported that a grievance complaint they had made to the AMC was dealt with unfairly
- 43 detainees had never put in a grievance complaint did not because they thought it would be 'useless'
- 13 detainees had never put in a grievance complaint did not because they didn't know how to
- 17 detainees had never put in a grievance complaint did not because they feared retribution

The review team was not overly surprised that 64% of survey respondents reported dissatisfaction with the internal AMC complaints/grievance process, or the reasons given for not making a complaint given that in our collective experience prisoners often feel that they do not get a "fair go" when making complaints. It should be noted, however, that that perception is not always supported by the facts.

It is important that the AMC has a fair and transparent complaint handling process and that decision makers provide complainants with written replies in a timely manner. This process is also important to the external oversight bodies given that it is not unusual (in other jurisdictions) for prisoners to make the same complaint concurrently to a number of agencies, and in our experience, oversight bodies expect complainants to pursue their complaints at the lowest possible level (e.g. beginning with a unit officer) before escalating them "up-the-ladder".

ACT Corrective Services has a new policy and a procedure dealing with detainee complaints,⁷¹ which was notified in late October 2019.

"You don't get any feedback from complaints and there is usually no record of the complaint

If you want to complain about an officer that's on, it's usually them that you have to give the form back to.

Poor handling, poor investigation, and inadequate record keeping and communication regarding any complaints."

Submission from female detainees

⁷¹ Corrections Management (Detainee Requests and Complaints) Policy 2019 NI2019-687 and Corrections Management (Detainee Requests and Grievances) Operating Procedure 2019 (No 1) NI2019-688.

3.4.4 External complaints

Detainee survey

- 52% (n=179) did not know about the prison Official Visitors (OVs) scheme
- 55% (n=179) did not know how to contact an OV
- 60% (n=179) did not know what the ACT Ombudsman does at the AMC
- 49% (n=177) did not know how to contact the Ombudsman
- 61% (n=176) did not know what the ACT Human Rights Commission (HRC) does at the AMC
- 49% (n=178) did not know how to contact the HRC

The review team was concerned about detainees' apparent lack of knowledge of the external oversight bodies (OVs, Ombudsman, HRC), all of which are active at the AMC and deal with detainees' complaints regularly.⁷² It may be that the 'did not know' responses came from detainees who had not needed to make a complaint and therefore had not asked about the avenues available to them. In any case, there appears to be a need to better inform detainees during the induction process of their rights to complain to independent oversight bodies. The current Detainee Handbook (from 2015) has very basic information about the oversight bodies, which is clearly not sufficient. Other strategies could include professional signage (not sheets of paper taped to walls) in units, an induction video that covers complaint handling or further familiarising peer support and delegates with the role and function of oversights and bringing them on board in raising awareness. It is encouraging to see clear guidance on these roles in the Male Detainee Induction Handbook (currently being drafted), likewise the new practice of an Official Visitor regularly visiting the induction unit is positive.

Recommendation 33:

That ACTCS engage with oversight entities through the AMC Oversight Agencies Collaborative Forum to consider ways to improve awareness of external oversight bodies amongst detainees.

⁷² OICS has no power to deal with individual complaints from detainees or staff.

3.5 Equity, diversity and faith

3.5.1 Women

STANDARD 56

The specific needs of female detainees are met.

Detainee survey

25 of the 40 women responded to the survey (63%) but not all answered all questions. Women were about 9% of detainee population but 14% of all survey respondents.

- 40% (n=25) first time in adult custody
- 32% (n=25) had been in juvenile custody
- 33% (n=24) were primary carers
- 36% (n=25) were Indigenous
- 38% (n=24) had a disability (not defined)
- 67% (n=24) were under 40 years of age, 2 were 60 or older
- 38% (n=24) completed Year 8 or less. A further 39% completed Year 10
- 56% (n=25) were not aware or fully aware of education options at the AMC
- 84% (n=25) did not believe education options met their needs
- 59% (n=24) did not feel a sense of achievement from participating in education programs

- 49% (n=23) were remand-only
- 45% (n=20) waited more than a week to contact their family/children after admission
- 28% (n=25) reported that strip searches were conducted with respect and dignity 'all of the time' and 48% reported 'most of the time'

Female detainees were, until November 2017, accommodated in the 29 bed minimum security Women's Community Centre (WCC) cottages with additional placement of several women in the Crisis Support Unit and Management Unit. The decision to move the women into the SCC was discussed in detail in the [Remand Review](#) with the finding that the decision 'was at odds with the design philosophy of the AMC and recognised best practice concerning the care and management of women in detention.' As at 2 July 2019, the WCC cottages were accommodating 38 male detainees on strict protection (130% design capacity). At the same time the 57-bed high security SCC unit was accommodating 27 women (30 unoccupied cells – 47% capacity).

In our opinion, the situation of the women has declined further since our last review. One concern is the induction program for the women. This is discussed in section 2.1.5 of this report. Other areas of concern are as follows.

"We are just women in a man's prison..."

Submission from a female detainee

Recreation

While a “green space” has been provided it is small and uninviting compared to the former accommodation in the WCC.

Photo 4: Part of the women’s “green space”



Source: OICS 2019

“One of the best things to do to help you keep your sanity is to walk, but there is nowhere to walk. Some of the women walk up and down the wings but it’s not good enough. The women need space and fresh air to exercise.”

Submission from female detainees

Men in the WCC have a fenced tennis court, and as we observed, new racquets and tennis balls. They are also free to access an indoor/outdoor gym whenever they wish and walk around the extensive grounds, do gardening etc.

Women are, we understand, being allowed to attend the gym in the multi-purpose recreation facility three times a week. Oval access for walking/running does occur but remains problematic for many women (as does walking to the gym) because of their exposure to verbal

abuse/comments from male detainees. Women regularly report not using the oval for this reason. This may explain why 46% ($n=24$) of the women surveyed said that they cannot exercise most of the time. Exposure to verbal abuse also occurs when the women walk to visits, Hume Health Centre, education, programs and the library. When they were located in the WCC they could access all of these areas with little or no exposure to male detainees.

Meaningful activity

Women at the AMC believe that they do not have a structured day. Sixty-eight percent ($n=17$) of the women who responded to our survey reported that they are bored most of the time. The review team notes that ACTCS considers that female detainees do have a structured day (work, programs, recreation, education, etc.) but ACTCS asserts that many women do not avail themselves of these opportunities.

Fifty-two percent ($n=25$) of women surveyed reported that they do not have meaningful work. Less than ten women are employed in the bakery and all we spoke to enjoyed this work, but they do not obtain a recognised qualification that they can use to gain employment upon release. The only other work available to women are as unit cleaners, food handlers, peer support (currently unfilled), and delegates. The lack of available employment is impacting on the women's access to funds to make phone calls, purchase to buy-ups etc. Ninety-two percent ($n=24$) of the women surveyed reported that they do not get paid enough to meet their basic needs at the AMC. Efforts need to be made to find an "industry" or other skills training or activities that could be undertaken within the SCC.

"We just want equal access to things – the same as what the men get!"

Submission from female detainees

Access to the education centre and the library is limited to a couple of times a week when male detainees are not present. Educational courses on offer are built around Certificate I and II courses that require up to a year to complete – much longer than most detainees (male and female) are in the AMC. Essentially, even if women did attend these courses, very few, if any, would obtain a recognised qualification before release, so there is little incentive. A recently released female detainee reported that she had participated in almost all the programs offered during her time at the AMC and not one of them has been useful to her since release – she even had to redo a drug and alcohol program as the ones in the AMC did not count towards getting her drivers' licence back. Women also expressed frustration that education is frequently delivered via worksheets to be completed in their own time, rather than interactive teacher-led schooling.

Finding 25:

The lack of a structured day for the women is creating boredom and not assisting with rehabilitation and preparation for release.

Programs

The number and variety of programs run for the women in the AMC is inadequate. There are 13 programs listed in the ACTCS Compendium of Programs that female detainees are eligible for. However, in June 2019, there were only three programs run for the women. One of these was the Cognitive Self-Change program which is only for sentenced detainees and runs for a two to four-hour session per fortnight. The other group program run was Self-Management and Recovery Training (SMART) which addresses addictive behaviours and runs for two hours a week. The women informed us that these two programs do run but sessions are often cancelled and no make-up sessions are offered. The only other program running was Directions ACT which is individual counselling regarding alcohol, illicit drugs and smoking. ACTCS could not provide us with the number of women using this service in June 2019.

We were informed by ACTCS that there were numerous non-program activities run for the female detainees during June 2019. However, this information was not consistent with what we were told by service providers and female detainees. For example, ACTCS head office informed us that the Yarning Circle had run during June whereas the detainees and the usual facilitator informed us that it did not, and it had not run in the following months. This is disappointing because of how valuable the women found the Yarning Circle. This indicates that ACTCS may not understand what is happening with program delivery on the ground. On a positive note, the women reported that they find the Real Understanding of Self Help (RUSH) program run by Winnunga Nimmityjah very useful.

The women also expressed frustration at the lack of information they are given about what programs are, or should be, available. They had never heard of the Self Care for Women program that is listed in the ACTCS Compendium of Programs. The women were told that they would be able to access the Out of the Dark program for victims of family violence but ultimately it was not run, apparently due to lack of a suitable facilitator. The women's frustration is exacerbated by their perception that ACTCS does not meaningfully consult with them on what programs they would find helpful.

As raised by ACTCOSS in their submission, a further issue is that many of the activities that do actually run are offered by community sector organisations that are not funded by ACTCS. For example, the [Women's Centre for Health Matters](#) has organised many activities for the women, including arranging for various services in the community to deliver information sessions for the women, without funding from ACTCS.

We note that other community organisations providing programs in the AMC to men voiced similar frustrations about lack of funding for their work providing key programs and activities. There are services or programs that community organisations may be better placed than ACTCS to provide due to their expertise – for example, programs or services directly linking with the community (e.g. specialist community health services), meeting diverse needs of detainees from culturally and linguistically diverse backgrounds, detainees with a disability, some Indigenous programs etc. An additional benefit of having community organisations provide services in prison is the reintegration value: community organisations may be able to continue to support detainees post-release. Support from ACTCS could come in a range of ways, for example, a senior manager as focal point responsible for ensuring agreed programs do not meet administrative, logistical or security hurdles in coming to fruition (a concern raised with us on multiple occasions as part of the review), or grants to cover the expenses associated with delivering the program or activity.

Recommendation 34:

That ACTCS take active steps through the provision of in-kind or financial support, to recognise the value that community organisations can bring to the correctional environment by providing certain programs, services and activities.

Rehabilitation and preparation for release

In relation to rehabilitation and preparation for release, it is concerning that women continue to be subject to a double disadvantage. Not only are they unable to access the Transitional Release Centre, but their access to the Transitional Release Program has been extremely limited. The eligibility criteria for this program is, from the perspective of detainees, mysterious in that the Transitional Release Procedure 2010 is not only "restricted" i.e. not available to detainees, but also not notified as a separate individual instrument on the ACT Legislation Register. It is unacceptable for this procedure to be withheld from detainees, effectively preventing them from knowing about key services and programs and their eligibility for them (see also section 2.5.6 about policies and procedures).

We are aware of only two women being approved for transitional release to date in 2019, with a further two denied. All four applicants had to wait a significant period of time (many months) to hear back on their application. One woman had a job lined-up but due to delay in approval that opportunity fell through, causing further frustration.

Recommendation 35:

That the eligibility criteria, expected timeframes and other relevant information about the Transitional Release Program be made public and clearly communicated to detainees, and ACTCS make a concerted effort to encourage female detainees to apply and support their full participation if eligible.

Staff

It is very concerning that the Women's Care Team appears understaffed. This is a key unit for identifying and addressing women's needs in the AMC. We were informed that the team had previously had up to five staff, but currently had two which appeared to be impacting upon service delivery, advocacy and support for the women.

ACT Corrective Services acknowledged that the resources of the Women's Care Team had reduced prior to the review, but stated that there were no vacant positions as such, as the Women's Care Team is not a separately staffed unit but a multidisciplinary team drawn from a range of functions within the prison. It also noted to us that low resourcing at the time of the review has since been addressed with two 'dedicated but not exclusive' Sentence Management Officers working with the women.

Recommendation 36:

That ACTCS seek an independent assessment on the staffing profile and capacity required for the Women's Care Team to meet the objective of a gender responsive correctional environment, with sufficient meaningful activity, and develop a plan to reach the minimum acceptable level within 1 year.

We were informed of a positive recent practice that COs who specifically want to work with the women are regularly being rostered on to the women's unit. This improves the respect between the staff and the women, contributing to a positive feeling in the unit, and feedback from some women and community organisations working with women has been positive.

Several submissions raised the need for trauma informed training for staff in the AMC, particularly those working with the women. It was also noted that there is a lack of female mental health workers and doctors. This is important for the women because many of them have experienced abuse and violence by men.

3.5.2 Aboriginal and Torres Strait Islander detainees

STANDARD 57

The distinct cultural rights of Aboriginal and Torres Strait Islander detainees, also protected in the *Human Rights Act 2004* (ACT), are met.

Detainee survey

- 43% ($n=42$) reported that their needs as an Indigenous person were 'rarely' or 'never' met

Staff survey

- 80% ($n=115$) believed that the AMC respects and recognises the needs of Indigenous detainees

Demographics of Aboriginal & Torres Strait Islander detainees

Table 4.1: Aboriginal & Torres Strait Islander detainees' conviction status as at 11 June 2018

Detainees	Remand	Convicted	Total	% Remand
Women	11	5	16	69
Men	35	62	97	36
Total	46	67	113	41

As at 1 July 2019:

- Indigenous women accounted for 44% of the total female remand population ($n=16$) and 18% of the total female convicted population ($n=11$).
- Indigenous men accounted for 22% of the total male remand population ($n=169$) and 20% of the total male convicted population ($n=266$).

Table 4.2: Aboriginal & Torres Strait Islander detainees' conviction status as at 1 July 2019

Detainees	Remand	Convicted	Total	% Remand
Women	7	2	9	78
Men	38	54	92	41
Total	45	56	101	45

There was no statistically significant change in the Indigenous remand population at the AMC in the period June 2018 to July 2019. The large increase in the percentage of Indigenous female remandees (69% to 78%) needs to be viewed in the context of the population size, which exaggerates small variations in the numbers. However, even allowing for the small numbers, it is concerning that the percentage of Indigenous female remandees in 2018 and 2019 was nearly double the rates for males.

Protection status

As at 1 July 2019, Aboriginal and Torres Strait Islander detainees ($n=101$) comprised:

- 22% of the AMC detainee population ($n=462$).
- 21% ($n=44$) of the detainees with a protection status ($n=214$).

There were no women (Indigenous or non-Indigenous) on protection (refer to **Appendix 3**, Table A3.2 for details).

Security ratings

As at 1 July 2019, Aboriginal and Torres Strait Islander detainees ($n=101$) comprised:

- 8% ($n=5$) of all Minimum security detainees ($n=64$).
- 31% ($n=92$) of all Medium security detainees ($n=381$).
- 24% ($n=4$) of all Maximum security detainees ($n=17$).

There were no women (Indigenous or non-Indigenous) classified as Maximum security. It is of concern that Aboriginal and Torres Strait Islander detainees make up 22% of the detainee population but 31% of Medium classification group, 24% of the Maximum group and only 8% of the Minimum classification group (refer to **Appendix 3**, Table A3.3 for details).

Finding 26:

That Aboriginal and Torres Strait Islander detainees are over-represented in the Medium and Maximum security ratings of AMC detainees and significantly under-represented in the Minimum classification group.

Recommendation 37:

That ACTCS engage an independent Indigenous expert to review the security rating system to ensure that it is free of any “cultural bias” that could result in Aboriginal and Torres Strait Islander detainees being over-classified.

Receptions and discharges

In 2018/19, Aboriginal and Torres Strait Islanders accounted for:

- 24% ($n=194$) of all people admitted into custody at the AMC ($n=804$).
- 25% ($n=210$) of all discharges ($n=837$).
- Indigenous women comprised 33% ($n=49$) of all women admitted ($n=147$).
- Indigenous men comprised 22% ($n=144$) of all men admitted ($n=656$).

(refer to **Appendix 3**, Table A3.4 for details).

Finding 27:

That Aboriginal and Torres Strait Islander women are over-represented in admissions to the AMC compared to non-Indigenous women and Indigenous men. This is a broader justice sector issue that government and non-government agencies should reflect on.

AMC Indigenous Services Unit (ISU)

The ISU comprises the Coordinator, an Indigenous Liaison Officer (ILO) and an Indigenous Services Officer (ISO). The ILO is the conduit between community/family outside and the detainees. The ISO coordinates services inside the AMC.

Of major concern to the Coordinator is the absence of a female Indigenous staff member to engage with Aboriginal and Torres Strait Islander female detainees because, he explained, his male staff cannot, for cultural reasons, talk to the women, and the women cannot talk to them, about “women’s business”. This problem creates a huge void in the support the unit can provide to the Indigenous women at the AMC.

A suggestion from the Indigenous member of our review team to address this communication gap was for the ISU to consider adopting an ‘I want parade’ for the women a few times a week. This could be implemented even before a female staff member is added to the ISU. This is an informal mechanism used at Bunbury Regional Prison in WA for detainees to voice a complaint and resolve issues at a unit level. The WA Inspector of Custodial Services has found this to be good practice in their 2017 [Inspection of Bunbury Regional Prison](#). At Bunbury, the ‘I want parade’ occurs daily for half an hour each morning with detainees queuing up to speak to an officer who can attend to their request. It also provides a feedback loop as the next day the officer can report back to the detainee on the status of their request. The process depends on the staff involved being genuinely committed to listening to detainees and following up as best they can on their requests. It is designed for low level issues that can be resolved relatively simply. For example, a detainee may request to see an Elder and the ISU staff member may be able to arrange contact. A mechanism such as this may help the women feel more connected to the ISU.

The Coordinator also expressed frustration about the volume of administrative work that detracts from actually providing support and services to the Aboriginal and Torres Strait Islander detainees, which he feels is barely adequate at present given the number of Indigenous detainees and their often complex situations, including intergenerational trauma.

Most review team members spoke with the ISU staff during the on-site component of the review and all were impressed by the commitment and dedication of the three staff. In short, they are doing a good job but are over-worked and have experienced some challenges in delivering the services needed by Aboriginal and Torres Strait Islander detainees. For example, we were told that they sought approval months ago to develop an induction video for Indigenous detainees, many of whom have literacy problems, but that concept has not yet had feedback or approval.

Finding 28:

That the AMC Indigenous Services Unit is committed and makes an important contribution but is under-resourced to provide basic services to Aboriginal and Torres Strait Islander detainees.

Recommendation 38:

That the ACT government, as a matter of urgency, fund the creation of a new position in the Indigenous Services Unit to work specifically, but not exclusively, with female Indigenous detainees and that this position be designated as female-only and Indigenous-only.

Recommendation 39:

That the ACT government fund the creation of a new administration officer position in the Indigenous Services Unit at a level comparable to other such positions in ACTCS.

Cultural activities, services and programs

The AMC provides a range of services and programs for Aboriginal and Torres Strait Islander detainees. In the first half of 2019 this included:

- Annual AMC NAIDOC Family Day.
- Annual NAIDOC Community Art Exhibition.
- Elders & Community Leaders Visitation program.
- Elders & Community Leaders Healing program.
- Elders & Community Leaders 'Men's' Yarning Circle program.
- Elders & Community Leaders 'Women's' Yarning Circle program.
- Transfer of Art & Culture (TAC) (Men).
- AMC Indigenous Chaplaincy Service (Men).
- 'Circle of Security' Parenting Program.
- Culture and Land Management (CALM) Program (Men).

In addition, external organisations provide programs such as:

- Worldview "Prison to Work" Opportunity Pilot.
- Tjillari Justice Strong Culture, Strong Families, Strong Children.

The review team notes that two of the most innovative and well-regarded⁷³ programs (TAC & CALM) are *not* available to Aboriginal women. Elders & Community Leaders Visitation Sessions are held at the visits centre for the men. Elders often do not make it down to the women's unit in SCC to visit the women, so they miss out. This further marginalises the women who have few opportunities to engage in any productive activities outside the confines of their accommodation unit.

The major cultural event at the AMC is the annual NAIDOC Week celebrations, and in particular the family day event, during which Indigenous detainees enjoy a barbeque with family and friends and engage in traditional dance and music and display their artworks. To the credit of the ISU and the AMC, this a very well-organised and popular event.

Traditional art has important cultural significance for Indigenous detainees. It is a spiritual, healing

73 Feedback from detainee participants.

activity rather than just a pastime or hobby. Detainees expressed deep concerns to the review team that a recent “crackdown” on the amount of property detainees can have in their cells may lead to them not being able to paint when they are locked-in. One detainee told us that he often had trouble sleeping and that if he woke up in the middle of the night he would do some painting to help him relax. The review team brought the detainees’ concerns to the attention of the General Manager Custodial Operations during the on-site component of the review in July 2019.

Male and female detainees hold Yarning Circles separately and usually indoors. The Yarning Circles may be facilitated by visiting Elders. Unfortunately, detainees’ attendance at Men’s Yarning Circles is dependent upon staff being available to escort them from units at the appropriate times, but this does not always happen resulting in detainees arriving late or not at all.⁷⁴ We also heard from Aboriginal controlled community organisations about difficulties getting access to the AMC and what they considered to be the overly restrictive supervision by Corrections Officers that impinged on their ability to carry out their programs.

The Yarning Circles are particularly important for male detainees as they provide one of the few opportunities to catch-up with members of their extended family who are also in the AMC but accommodated in other units. At one of the Yarning Circles men told us that Aboriginal detainees should have their own unit so they can support and look after each other.

It is difficult to see how an “Aboriginal unit” could be provided at the AMC given the design of the centre and other constraints (e.g. population pressures, cohorts, protections), however the review team believe that more could be done to facilitate contact between extended family members at the AMC. While we are aware that the AMC is cautious about allowing detainees with different security ratings and protection statuses to mix, consideration should be given to providing “events” (e.g. touch footy) for Aboriginal men from different units to catch-up with family on a regular basis.

It was suggested that there would great benefit in having an Indigenous peer support worker meet new arrivals and help them through the reception process. We see a lot of merit in this suggestion (applied to new female receptions as well) given that it would hopefully reduce the stress on new arrivals, assist the reception staff and provide peer support jobs (male and female).

Finding 29:

That NAIDOC Week celebrations at the AMC are very important for Indigenous detainees and their families and are well-organised by the Indigenous Services Unit and supported by AMC management and staff.

Finding 30:

That two of the most innovative and well-regarded Indigenous programs at the AMC (TAC & CALM) are *not* available to Aboriginal and Torres Strait Islander women.

74 Witnessed by review team members at a men’s Yarning Circle.

Recommendation 40:

That ACTCS be mindful of the spiritual significance of art for Aboriginal and Torres Strait Islander detainees before taking decisions that could affect detainees' access to their artworks and art materials.

Recommendation 41:

That ACTCS explore ways for Aboriginal and Torres Strait Islander detainees with extended family members at the AMC to be provided with opportunities to get together for social interactions on a regular basis.

Recommendation 42:

That ACTCS consider employing Indigenous peer support workers, who can as part of their role meet and assist Aboriginal and Torres Strait Islanders on their admission to the AMC.

Recommendation 43:

That Aboriginal and Torres Strait Islander female detainees be given access to the CALM and TAC programs as a matter of priority.

3.5.3 Detainees with a disability**STANDARD 58**

The specific needs of detainees with a disability are met.

Detainee survey

- 30% ($n=165$) identified as having a disability
- 44% ($n=71$) reported that their needs arising from a disability are 'rarely' or 'never' met
- 28% ($n=71$) reported being discriminated against by other detainees
- 39% ($n=72$) reported being discriminated against by staff

Staff survey

- 52% ($n=115$) believed that the AMC respects and recognises the needs of detainees with a disability 'generally well'. 17% responded 'generally poorly'

The term disability covers a range of conditions, for example, a physical, cognitive/intellectual, or psychosocial disability. The experience of having a disability in detention can vary widely and be very significant. For example, there may be physical accessibility issues; limitations around understanding prison routine and instructions; barriers to fully participating in programs, education and work; a risk of increased social isolation; increased vulnerability to bullying, harassment and physical or sexual violence; difficulty coping with prison conditions resulting in co-morbidity with mental health disorders and other physical conditions; and behavioural responses or actions resulting from not understanding rules and expectations that are punished as discipline breaches.⁷⁵

In our survey, 30% of detainees ($n=165$) self-identified as having a disability. Nationally there are estimates that as much as 50%⁷⁶ of detainees have a disability compared with around 18% in the general population.⁷⁷

ACTCS does not currently systematically capture data on the prevalence of disability in the AMC. A question is asked on the induction form: do you have a disability? This relies on self-reporting. There is currently no question about whether someone receives a Disability Support Pension. Detainees may not be willing to self-report a disability or may not consider themselves to have a disability. They may never have been diagnosed with a disability or diagnosis may be complex.

There may also be cross-cultural barriers to acknowledgement or disclosure. In their submission to this review, Advocacy for Inclusion argued for the ACT to adopt a practical screening method that applies to *all* detainees early in the admission process (thereby avoiding the issue of those not wishing to identify), that captures cognitive/intellectual disability, low-literacy and comprehension and independent living skills. This would appear to be the way forward.

Capturing data about the prevalence of disability in jail is important. Quality data can ensure that reasonable adjustments and support can be provided to the right people at the right time. Of course, these responses may have budgetary implications – for example, additional specialised staff may be required to meet a need that has been identified. However, appropriate data capture should not wait for all resources to be secured first. Data can help understand the scope of the issue, assist with strategic planning, and has relevance to multiple areas of AMC operations including program and education design, recreation opportunities and staff training content. Good data can also inform options with low or no budgetary implications, for example, working out areas where accessible communication is needed such as signage or easy English versions of handbooks etc.

The AMC has the Assisted Care Unit for male detainees with complex needs, but for women detainees the West Wing of the SCC informally serves this function, the same wing that is used for induction of new detainees and women separated for disciplinary reasons.

Problems identified to us in both units included mobility issues around access to bunks and physical environment and personal care needs that were not being met. In some cases, detainees were reliant on the assistance and goodwill of fellow detainees. This included issues around toileting and incontinence which can be highly embarrassing for detainees. Accessibility of bunks was raised in our Remand Review and we remain concerned about retrofitted top bunks in many cells designed for one detainee, with inadequate guardrails and ladders.⁷⁸

75 The Australian Institute of Health and Welfare: *The Health of Australia's Prisoners* 2018, 77.

76 ACT Government 'Disability Justice Strategy 2019–2029: A Strategy to Address the Unequal Access to Justice in the ACT' (2019), 3 citing Human Rights Watch 2018, *I Needed Help, Instead I Was Punished: Abuse and Neglect of Prisoners with Disabilities in Australia*.

77 Australian Bureau of Statistics, *Disability, Ageing and Carers*, Australia: First Results 2015.

78 See the concerns raised in our thematic review of remand: ACT Inspector of Correctional Services (2019), *Report of a review of the care and management of remandees at the Alexander Maconochie Centre*, Canberra, para 4.4.2.

Disability organisations and the ACT Office for Disability have highlighted the challenges in relation to detainees that are on an NDIS package in the community receiving appropriate supports in custody and then connecting with appropriate supports on release. Additionally, they have emphasised the need to improve processes around identifying and supporting detainees who do not currently have an NDIS plan but may be eligible and benefit from an NDIS package post release, or other supports to transition out of AMC.⁷⁹ ACTCS has been involved in discussions with the NDIA on this issue.

The review team found that key processes at the AMC were not disability friendly. For example, the detainee handbook provided to all detainees on induction is not available in easy English, nor is there information in other formats such as an induction video.⁸⁰ The peer support and delegates program has the potential to be tailored to meet the needs of detainees with a disability (for example, giving peer support workers and delegate's disability awareness training). The process for complaints – to put in a 'bluey' and then in many cases, continually follow up with COs to get a response, was not particularly disability responsive. Moving to a complaint 'inbox' that detainees could email from their PrisonPC may have some benefits but may not be accessible to all.

There has been some ad hoc training of AMC staff in disability. However, training should be standard for all new recruits, and where needed, additional in-depth training should be provided, particularly to staff working in areas such as Admissions and Induction.

Many of the issues highlighted above have, to varying degrees, been identified in the recently released [Disability Justice Strategy 2019–2029](#) (DJS) and opportunities to address them are set out in the [First Action Plan 2019–2023](#) under the Strategy. This Strategy is a welcome initiative and ACTCS has committed to a number of important initiatives in the First Action Plan. Importantly, ACTCS has committed to develop its own Disability Framework.

In light of ACTCS' commitment and the whole of justice system approach adopted in the Strategy, OICS' recommendation is aligned with the DJS.

Recommendation 44:

That ACTCS' proposed Disability Framework is informed by consultation with key stakeholders and completed in a timely manner to ensure ACTCS can meet or exceed the goals and time frames contained in the ACT Disability Justice Strategy First Action Plan 2019–2023.

3.5.4 The needs of older detainees

Most prisons are designed for young, fit men. The [AMC Functional Brief](#) was cognisant of the needs of older detainees and the projected increase in this cohort as a proportion of detainees, noting: 'The design of the AMC will have to take this into consideration, seeking design inspiration from aged care facilities and hospitals'. There are some accessibility features of the AMC, for example, requiring compliance with Australian Standards for building and facility access. However, the significant overcrowding limits the ability of AMC management to ensure older detainees can access an appropriate physical space.

⁷⁹ Advocacy for Inclusion, ADACAS, Towards a Disability Justice Strategy.

⁸⁰ As noted earlier, a request for an Indigenous induction video was not responded to by AMC management.

The needs of older detainees are varied: they may face age-related decline in functioning including eyesight, hearing and mobility as well as age-related mental health issues. Their mobility may be limited, they may have chronic and complex health conditions. Due to age and frailty older detainees may be at increased risk of victimisation. Vocational, employment and work programs designed for younger detainees may not meet their needs.

As at 24 June 2019, there were 60 detainees in the AMC that were aged 50 years or older, or just over 8% of the AMC's population. The oldest detainees were 78 years old. In the past decade 'the number of older detainees incarcerated in the ACT has increased by approximately 250%, the largest increase in Australia, and nearly three times the national average'⁸¹ and there are a range of factors explaining this including the impact of the Royal Commission into Institutional Responses to Child Sexual Abuse and prosecution of historic sex offences.

We observed a range of adaptive equipment that had been provided by ACTCS to assist with daily life and heard that the process for ordering this equipment is relatively straightforward although the equipment must be risk assessed. Detainees can order a soft diet or have special dietary requirements catered for. The recreation program does not have any activities specifically for older detainees (for example, low impact strength and conditioning programs).

Detainees raised concerns with us including restrictions on their ability to access medication in times outside the set rounds and their inability to store medication in their cell (in many cases a necessary limitation in a custodial environment but nevertheless causing anxiety), chronic and complex health needs, as well as detainees with advanced ageing conditions reliant on other detainees to perform basic functions such as preparing food (in the case of the cottages), or assisting with hygiene. As noted in our Remand Review, concerns remain that top bunks in retrofitted cells originally designed as single cells have inadequate guard rails, no proper ladders and ladders to top bunks in some cottages were not appropriately fixed. This creates a significant OHS risk and older detainees may be particularly vulnerable due to reduced mobility.

The AMC does not have a specific functional role responsible for dealing with the needs of older detainees. Instead, the needs of older detainees are dealt with as they arise through each functional area – for example, Head of Accommodation for physical accommodation needs, and Detainee Services for matters relating to programs and work, or Sentence Managers. Justice Health are responsible for the health needs. Consideration could be given to having a dedicated function or focal point for needs of aging detainees that could take a holistic approach across the whole custodial environment, and link in with relevant community organisations that provide support and advocacy.

Unlike some jurisdictions, the ACT does not currently have a policy that specifically considers the needs of older detainees. A policy framework that identifies and seeks to address the needs of this cohort is important. It should consider the impact of aging for detainees not just in terms of physical and mental health and the suitability of the physical environment, but also how the AMC can develop or adapt programs, work and recreational activities to meet this cohort, and training or other needs for staff. Given the startling increase in this cohort over the past five years, it could also address longer-term prison estate planning to meet the needs of the ageing population.

Recommendation 45:

That ACTCS develop a policy approach that articulates and responds to the needs of older detainees.

⁸¹ Isabella Jackson (2019) "An awful state of affairs for you": reflecting on the experiences of older detainees in the Australian Capital Territory" Australian National University College of Law Winter Internship Paper.

3.5.5 Religious, spiritual and cultural needs

STANDARD 55

ACT Correctional Centres and services take active steps to prevent and address discrimination including on the grounds of status as an Aboriginal or Torres Strait Islander person, race, sex, religion, ethnicity, nationality, cultural and linguistically diverse backgrounds, gender identity, sexuality, intersex status, disability, health condition, age, political conviction, irrelevant criminal record and other grounds in the *Discrimination Act 1991* (ACT) and relevant Commonwealth discrimination laws. ACT Correctional Centres and services take active steps to prevent unlawful vilification.

STANDARD 61

Specific religious, spiritual and cultural needs of detainees are considered.

Detainee survey

Religion:

- 40% ($n=109$) reported being able to practice their religion 'most of the time'
- 33% ($n=121$) reported being able to speak to a religious leader of their faith 'most of the time'
- 37% ($n=164$) reported being discriminated against by other detainees because of their religion
- 22% ($n=163$) reported being discriminated against by staff because of their religion

Race:

- 39% ($n=166$) reported being discriminated against by other detainees because of their race
- 28% ($n=163$) reported being discriminated against by staff because of their race

Age:

- 22% ($n=168$) reported being discriminated against by other detainees because of their age
- 22% ($n=166$) reported being discriminated against by staff because of their age

Staff survey

- 28% ($n=112$) reported a good understanding of the vision, mission, values and behaviours of the AMC. 58% reported some understanding

Access to religion and faith

The AMC has a Chaplaincy Service consisting of 1.0 FTE, including a Chaplain and Assistant Chaplain. The team does not formally represent any particular denomination or faith tradition and provides pastoral services to all detainees (although the Chaplain is an Anglican priest). The Chaplaincy Service involves volunteers of different faiths that visit regularly including different Christian denominations, an Indigenous Christian Chaplain and a Muslim Imam. Other faith leaders, including Jewish and Buddhist visitors, come from time to time. Faith services are held regularly – Christian services are held weekly on a rotating basis in different units, so detainees can usually attend a service every three weeks. Indigenous chapel is held every three weeks. Friday prayers for Muslims are held fortnightly. Different cohorts of detainees can mix in Indigenous Chapel and Friday prayers but not for Christian services.

ACT Corrective Services contract the provision of Chaplaincy services for the AMC to the Anglican Diocesan Services who employ the AMC Chaplaincy Coordinator and the Assistant Chaplain. Chaplaincy staff are onsite five days a week (although attend weekend services as well). The Chaplain's role includes coordinating the volunteer visitors, relaying requests from detainees to volunteer visitors, providing religious texts on request, providing bereavement support and services, and visiting specific units such as the induction unit, crisis support unit and management unit. We were impressed with the level of commitment of the extended Chaplaincy Service – it is clear that providing pastoral care to detainees is a vocation not just a job for these staff – and for many of the team it is completely voluntary, or additional hours are done without being paid overtime. The workload of the Chaplaincy Service is significant. The FTE (paid) staffing level has not increased since the AMC's opening, despite an almost 150% increase in detainee numbers (based on ROGS average daily state in 2009/10 of 189 detainees).

The challenge of having so many cohorts at the AMC impacts religious worship: for Christmas and Easter, there are up to 25 different services in the units, rather than one larger service, and numbers at Friday prayers has on at least one occasion limited the ability of Muslim detainees from attending (see further, below). Detainees of different cohorts can mix in different circumstances, for example in some cases at visits, programs and other special events. A more flexible approach to cohort mixing in faith services (in line with security considerations) unless there are legitimate grounds to preclude mixing should be adhered to. This has the potential to increase detainee access to faith services and take a strain off faith volunteers conducting services.

Finding 31:

That the approach to separating cohorts for some religious services reduces the frequency with which detainees can access faith services and puts greater demands on Chaplaincy staff and volunteers.

Recommendation 46:

That the ACT government considers funding an expanded multi-faith Chaplaincy Team in light of the increase in detainee population and noting the broad scope of their work.

Detainee Religion Policy

It appears that aspects of current practice around religion at the AMC do not align with the new Detainee Religion Policy.⁸² The policy notes that detainees must be offered the opportunity to register their religion with ACTCS, though it suggests that access to religious objects, faith leaders, and services is not contingent on registration. However, we were informed by ACTCS staff that in practice, detainees must be registered as a member of a faith to be able to attend a service of that faith. This is unduly restrictive as some detainees may not wish to formally register a religion or may be considering their religious beliefs yet still wish to attend a service.

The new policy is also overly opaque around consequences for the Coordinating Chaplain or a religious visitor that 'has engaged in an unsolicited visit or attempt to persuade a detainee to change their religious registration' (more colloquially understood as attempting to convert a detainee). The consequences for such actions are a referral directly to the ACTCS Intelligence and Integrity Unit. However, the policy provides no definition of an 'unsolicited visit' or 'attempt to persuade', nor what the consequences for the Coordinating Chaplain or religious visitor might be. We heard from a faith leader who had real concerns that this policy undermined faith leaders' professionalism and exhibited a lack of trust towards faith leader volunteers that ACTCS have engaged (and who have attended all the requisite security training) to provide a valuable service to detainees in the jail.

The experience of Muslim detainees

The review team notes there have been particular challenges faced by some Muslim detainees in meeting their religious needs whilst in the AMC. This includes access to appropriate food. We are aware of numerous detainees receiving pork despite being on a 'no pork' special diet. The review team also spoke with a number of detainees who were not aware that all non-pork meat in the AMC is Halal certified, and staff were not able to clarify for them. A number were getting frustrated with eating the vegetarian meals which they were doing 'to be on the safe side'.

"There was one woman recently who was Muslim, over Ramadan, her meals were often forgotten or not brought to them at the right times. They do follow Ramadan traditions for the men but it didn't really work out for the woman."

Submission from female detainees

Some detainees expressed a desire to have more regular Friday prayers (currently fortnightly) and had been frustrated at numbers being capped (on at least one occasion). This appears to be inconsistent with the Detainee Religion Policy which provides that a detainee (singular) may only be excluded from attending a religious service where there are reasonable grounds to suspect the attendance may jeopardise the safety of any person, or security or good order at the correctional centre, or the detainee has previously misbehaved at a religious service and

was managed in accordance with the Discipline Policy. The Detainee Religion Policy also requires the General Manager to designate 'areas for religious worship and observance that can suitably accommodate the number of detainees who wish to attend'.

82 Corrections Management (Detainee Religion) Policy 2019 NI2019-409.

The review team heard of difficulties for the Muslim Imam in getting FOB⁸³ access, with the reason given being that there were limited FOBs and a relatively low number of Muslim detainees. At the time of the review, the number of Muslim detainees was around 30, and FOB access was relatively recently provided due to 'sufficient numbers'. As a consequence of not having their own FOB, the Imam had to be escorted by a Chaplain, and the Chaplain was required to be around as an escort even when the Imam was talking privately with detainees.

It is completely unacceptable that volunteer leaders of any faith, that have obtained the requisite approvals from ACTCS and attended security training, must depend on the Chaplaincy service in order to access their community. It is an unsatisfactory explanation that there is a general lack of FOBs. Detainees should also have the option to contact the faith leader of their choosing directly – for example, by email, as is the case with detainees contacting official visitors. The current system, of relying on the Chaplaincy service to pass on a message to a leader of different faith that someone wants to see them, undermines the key role of trust and confidence that faith leaders have in relation to their community, and is an excessive burden on already stretched Chaplaincy resources.

Islam is the second most populous faith in the AMC, and in light of concerns raised, their experience warrants further consideration.⁸⁴

Recommendation 47:

That ACTCS commit immediately to providing “electronic key” access to AMC accredited leaders of all major faiths subject to the normal security clearance process and security awareness training that applies to all visitors who require unescorted movement around the AMC.

Recommendation 48:

That ACTCS facilitate means for detainees to contact accredited faith leaders directly (e.g. by email or telephone), without that contact dependent on ACTCS staff.

Recommendation 49:

That the ACT Human Rights Commission conduct a review of the experiences of Muslim detainees accessing their faith in the AMC.

83 FOB is an “electronic key”.

84 See, for example, the thematic review of Her Majesty’s Chief Inspector of Prisons, 2010, ‘[Muslim prisoners’ experiences: A thematic review](#)’.

Detainees from diverse cultural and linguistic backgrounds**Detainee survey**

- 7% (n=171) did not have English as their first language
- 13% (n=160) came from a minority ethnic or cultural group

Staff survey

- 60% (n=115) believed that the AMC respects and recognises the needs of CALD detainees 'generally well'. 17% responded 'very poorly'

The review team heard of particular challenges faced by detainees who had English as an additional language – for example, challenges in obtaining interpreter services when connecting to external services, meeting religious requirements around food, and legal issues that may arise from being a foreign national (for example, a risk of immigration deportation after release).

In this regard, the new induction process (as discussed in section 2.1.5) is welcomed. The new designated position of Induction Coordinator presents an ideal opportunity to understand individual needs arising from religion, faith or cultural background for newly-arrived detainees. The Induction Coordinator can play a part in ensuring these needs are met to the maximum extent possible (for example, by clarifying cultural or religious requirements relating to food or Chaplaincy – the latter is already occurring). The Induction Coordinator would be well-placed to make an initial link for detainees with community organisations, such as Legal Aid, or liaise with the Sentence Management Team to ensure linkages are made. It is also important that ACTCS staff undergo training in cultural awareness and particularly how detainees from diverse backgrounds, languages, religions and cultures may have particular needs or preferences in areas such as food, prayer and religious objects, and how these needs can be accommodated into the AMC's daily routines and requirements.

3.6 Health wellbeing and social care**3.6.1 Overview**

The Hume Health Centre (HHC) is functioning well considering a number of constraints and pressures arising from factors including lack of physical clinic space and limitations on the ability to get patients in and out of the clinic in a timely way. There are a number of positive developments on the horizon that are likely to somewhat ameliorate these constraints including physical expansion of the clinic and new streamlined medication management systems. The introduction of Winnunga Nimmityjah Aboriginal Health Service (Winnunga) as a primary health care provider has been well received by many of the detainees accessing the service and is a novel and innovative approach. Further measures to improve coordination between Winnunga and Justice Health Services (JHS) should be prioritised.

3.6.2 Primary healthcare

STANDARD 62

Conditions in detention promote the health and wellbeing of detainees, the health care service evaluates, promotes, protects and improves the physical and mental health of detainees, paying particular attention to detainees with special health-care needs or with health issues that hamper their rehabilitation. The standard of health care is equivalent to that available to other people in the ACT in the public health system.

Detainee survey

- 82% (n=179) reported that it was difficult to get general medical services when needed
- 51% (n=170) reported that it was difficult to get over-the-counter medication when needed
- 58% (n=167) reported that medication was 'never' or 'rarely' provided in a timely way

Health Services at the AMC are provided by JHS and based out of the HHC in the centre of the AMC and delivered by a multi-disciplinary team which includes Medical Practitioners (General Practitioners and Psychiatrists), Registered and Enrolled Nurses, a range of Allied Health practitioners including Psychologists, Occupational Therapists and Social Workers. Dental services are also provided at the HHC through the Canberra Health Services Oral Health Program. JHS provides a specialist Mental Health Service at the AMC.

Since October 2018, Winnunga has established a primary health service for Aboriginal and Torres Strait Islander detainees. The Model of Care is the ACT Government's response to Recommendation 5 of the [Moss Review](#), that 'Winnunga Nimmityjah Aboriginal Health Service be integrated into the provision of health care at the AMC in order to introduce its holistic model of care to Indigenous detainees.'

The HHC operates seven days with staff on a mix of shifts, covering operations from 6am to 8:30pm. The primary care model delivered is 'nurse led' as occurs in other correctional centres in Australia, yet it is positive that the AMC HHC has a significant amount of GP hours allocated (if not permanently filled at the time of the review).

Detainees requiring higher levels of care or treatment are able to access this via escorts to the Canberra Hospital or other specialist services as required.

"Health staff and Corrective Services staff have been unable to coordinate or schedule their services in a manner which is optimal to detainees. Too often detainees have to wait for meds, which makes them late for activities, or even to decide not to attend. Delivery of meds should be coordinated with purposeful activities, but staff from the two departments do not seem capable of working together effectively."

Submission from staff member

Physical environment

The clinic effectively has three interview rooms (one for Winnunga) and one large procedure/emergency room. The size of the clinic is completely inadequate for the numbers of detainees in the AMC. An expansion of the clinic is planned with work commencing in 2019. However, it appears that while this will bring the clinic up to a size to meet current numbers it does not appear to address the demands should detainee numbers rise further.

Although beyond the scope of this review, the review team noted the importance of adequate health facilities inside the planned Alexander Maconochie Reintegration Centre.

Wait times

The major concern identified by detainees in relation to health services is wait times to see primary health nurses, doctors and particularly to see a dentist. The delays in appointments was also noted by Justice Health Staff in discussions with the review team and the Health Services Commissioner in her submission. In the detainee survey, 82% ($n=179$) reported that it was difficult to get general medical services when needed.

ACT Health provided OICS with a point in time snapshot of wait times. The most recent data provided (November 2018) recorded average wait times as follows:

Table 4.3: GP and nurse wait times at the AMC (November 2018)

Type of service		Average wait time
GP clinics	non-urgent routine care	2 weeks
Nursing clinics	non-urgent routine care	1 week

It is difficult to compare these wait times directly to community standards given the paucity of data on ACT Health public wait times.

The wait times for medical appointments is dependent on a number of factors including clinic capacity, unfilled staff positions (discussed below in relation to dental services), and patient flow (discussed below).

Patient flow

The complexity of the cohorts at the AMC, reliance on rovers to escort detainees to the HHC, and limitations on the number of detainees allowed in the clinic at any one time significantly impedes the flow of detainees to the clinic, reduces capacity, and contributes to wait times. There is currently no specific KPI or requirement for patient flow and access at the clinic. When the current HHC expansion work is complete, patient flow targets should be identified jointly by ACTCS and Justice Health and monitored.

Recommendation 50:

That on completion of the Hume Health Centre (HHC) renovations, ACTCS and Justice Health jointly agree on and monitor Key Performance Indicators in relation to access and flow of detainees in the HHC.

Process for requesting to see medical staff

The usual approach to obtain a medical appointment is that detainees are required to submit a form (bluey) via nursing staff, which is then triaged daily and given an urgent, semi-urgent, routine rating. There is no opportunity for a walk-in appointment or scheduled morning 'sick parade'. Detainees can raise issues with staff on medication rounds although this is not an ideal scenario as there is little privacy and it is not the purpose of the rounds. Emergencies and very urgent cases were reported as being well managed.

The review team was pleased to learn that there is some flexibility in methods for detainees seeking appointments with a "no wrong door" policy for primary care access, where staff were encouraged to receive requests from detainees at all contact points rather than purely directing detainees to 'fill in a "bluey"'. This is important as detainees raised concerns with the review team that blueys can get lost or not be followed up, something also noted by the Health Services Commissioner. Reliance on written forms (or even if 'blueys' were to transition to an electronic email inbox) can be a barrier for some detainees.

Smoking of tobacco

Detainee survey

- 66% ($n=180$) reported that they smoked tobacco
- 31% ($n=179$) would prefer to live in a non-smoking unit
- 25% ($n=128$) of smokers would give up smoking if offered free support

Smoking by detainees and staff is permitted at the AMC. Staff have designated outdoor smoking areas. According to the recently notified Smoking Policy,⁸⁵ detainees may only smoke in designated areas in the AMC (not in cells or communal areas in cell blocks and cottages). However, the review team observed that this Policy is not adhered to in practice. Detainees are permitted to smoke outdoors and in accommodation units, including cells. As noted in section 3.3.1, detainees take steps to cover up smoke alarms in cells. It is unclear how this "smoking regime" came about given that the [AMC Functional Brief \(2005\)](#) noted:

Smoking will be permitted in outdoor areas e.g. green spaces and yards. Smoking will not be permitted in cells and cottage rooms or in enclosed common areas. The objectives are to foster a healthy lifestyle, to protect staff and other prisoners and to avoid litigation.

⁸⁵ Corrections Management (Smoking) Policy 2019, NI2019-487.

Smoking in prisons in other Australian jurisdictions is totally banned with the exception of WA which currently allows prisoners to smoke in outdoor areas⁸⁶ and SA which will ban smoking by the end of 2019.⁸⁷ Smoking bans were introduced in:

NT	2013
Qld	2014
NSW	2015
Tas	2015
Vic	2015
SA	by the end of 2019
WA	2008 (indoor smoking ban only)

Detainees raised concerns about non-smokers being placed in a shared cell with detainees who do smoke. We observed that detainees are currently allowed to smoke in their cells and do so during lock-ins. As well as being significantly unpleasant for non-smokers (detainees and staff alike), this also subjects detainees and staff to health risks. Smoking raises human rights concerns for both non-smokers and smokers, including the right to humane treatment when deprived of liberty⁸⁸ and the right of detainees not to have the home interfered with arbitrarily,⁸⁹ as the AMC is their de facto home. For as long as smoking is still permitted at the AMC, a non-smoker must never be *compelled* to share a cell with a smoker.

Staff were not specifically asked about smoking in the staff survey, however free text comments in response to the question 'What are the things you would like to change at the AMC and how might you change them', staff responses included:

'Ban smoking'

'Get rid of smoking/Tobacco within the AMC, non-smoking officers should not be subjected to tobacco smoke (future health problems?!!) it's against the law'

'Stop smoking in this place. It is detrimental'

In 2019 it should not be necessary to argue the "health case" for a smoke-free prison environment, or to explain the obvious fire risks of smoking indoors and of detainees possessing cigarette lighters. At the end of the day it is a matter for the ACT government to decide.

Finding 32:

That the current "smoking regime" at the AMC is contrary to the original (2005) AMC Functional Brief, which proposed outdoor smoking in designated areas only, and the AMC Smoking Policy.

86 WA Corrective Services announced on 21/02/19 that 'All indoor areas in prisons, including cells, will soon be smoke free': <https://www.correctiveservices.wa.gov.au/rehabilitation-services/health-care/default.aspx> (accessed on 07/06/19).

87 SA Department for Correctional Services <https://www.corrections.sa.gov.au/about/our-research/smokefree-prisons-strategy> (accessed on 07/06/19).

88 *Human Rights Act 2004* (ACT) s 19.

89 *Ibid* s 12(a).

Finding 33:

That the ACT will soon be the only Australian jurisdiction that permits smoking in correctional centres.

Recommendation 51:

That relevant policies and practices are changed to ensure that non-smokers are never compelled to share a cell with a smoker.

3.6.3 Dental care

STANDARD 64

Detainees are provided with dental treatment and care to the standard equivalent to others in the ACT in the public health system.

Table 4.4: Dentist wait time at the AMC

Type of service		Average wait time
Dental	Urgent cases	Longest wait 16 days (8 clients were considered 'urgent' in the period)
	Non-urgent cases	Longest wait time is 865 days (191 clients on wait list in period)

HHC dental service uses a different classification system (urgent/non-urgent) to the community standard (that has four categories of urgency) so wait times are not directly comparable, and furthermore, Justice Health did not provide average wait times, rather the longest wait time and number of clients on the waitlist.

For what it is worth, the ACT Health Directorate Annual Report 2017/18 notes that the Dental Health Program has a mean waiting time of six months for adults on the routine dental service waiting list.

The wait time to see a dentist was a matter raised in the [Moss Review](#) into the death in custody of Steven Freeman. Mr Freeman had requested a dental appointment on 1 January 2016 as he was 'unable to eat or sleep due to the pain' but as at his death on 27 May 2016 he had not yet seen the dentist.

There is a dental treatment room in the HHC including dental chair and equipment. At the time of the review, dental services were provided two days a week at the HHC, notwithstanding that funding for additional days had been procured by Justice Health but had not resulted in staffing of additional days. The review team observed the dental chair operational on one day of the review however, on that day the dentist was only able to access two patients during that shift, whereas a full day in another prison may reasonably involve treating eight patients.

The long wait list to see a dentist was one of the most significant issues of concern raised with the review team. In the detainee survey 87% ($n=167$) reported that it was difficult to get dental services when needed. Forty percent of AMC detainees are on the non-urgent dental wait list with the longest wait being just under three years. Therefore, it is understandable that detainees raised the issue of access to a dentist in the survey, and frequently with the ACT Health Services Commissioner. Whilst the urgent list of dental pain and infection management were dealt with in a reasonably timely way (for example, in October 2018 the 14 clients triaged as urgent were booked in to be seen within a week, and in November 2018 the longest wait was 16 days), those with less urgent or preventive dental needs do not get dealt with. This causes more serious, painful and costly problems that then have to be fixed urgently. The waitlist for dentistry is a missed opportunity for preventive interventions.

Recommendation 52:

That the ACT Health Services Commissioner review the provision of dental health services at the AMC.

Recommendation 53:

That Justice Health align dental priority categorisation at the AMC Hume Health Centre in line with the community.

3.6.4 Other health services

STANDARD 65

Where detainees require urgent, emergency or specialised health services they can access required services in a timely way.

Detainee survey

- 86% ($n=173$) reported that it was difficult to get specialist medical services when needed
- 72% ($n=166$) reported that it was difficult to get psychological services when needed

The HHC's emergency response procedures and practices appear sound and the relationship with the Canberra Hospital appears to be working well. Emergency equipment at the HHC was well maintained and accessible.

The Canberra health service was utilised for secondary specialist reviews. The waiting list and waiting periods for secondary specialist reviews were reported to be comparable to public access times and detainees did not receive higher levels of priority than the general public.

The number of medical escorts per day is capped and any shortage of escorts at times can impact non-urgent scheduled medical appointments as might any priority/emergency patient transfers. There is no recording of cancellation numbers and reasons although this was reported to be a frequent occurrence. This increases the risk of undetected medical issues and delays in treatment.

The use of telehealth was close to non-existent. Telehealth access, if appropriately implemented has the potential to bring timelier (and possibly greater) patient access to specialist review but may also reduce the number of escorts required and reduce security risks inherent with external transfers. Reduction in escorts would have significant flow on benefits for staffing capacity across the prison.

Recommendation 54:

That Justice Health capture data on cancellation of non-urgent scheduled medical appointments and the reasons for this.

Recommendation 55:

That Justice Health investigate the viability of telehealth in the AMC to increase patient access to specialist review and treatment.

3.6.5 Health services for Aboriginal and Torres Strait Islander detainees

STANDARD 74

Physical and mental health services are responsive to the needs of Aboriginal and Torres Strait Islander detainees. A holistic definition of health is adopted when working with Aboriginal and Torres Strait Islander detainees. This means health status includes attention to physical, spiritual, cultural, emotional and social well-being.

Detainee survey

- 41% ($n=56$) of Indigenous detainees reported that they were 'rarely' or 'never' able to access Winnunga for their health needs

The introduction of Winnunga in October 2018 as an Aboriginal health service directly delivering culturally safe comprehensive primary health care to Aboriginal detainees in the AMC is an Australian first. The review team applauds the initiative.

Feedback the review team received from detainees was overwhelmingly positive, particularly from the women's area who appreciated the holistic approach and time that the Winnunga staff were able to spend in the women's unit. Furthermore, the review team spoke to recently released detainees that had maintained continuity of care with Winnunga in the community, and this throughcare link is clearly a strength. As at July 2019 there were approximately 20 patients who had transitioned to Winnunga, a lower number than initially anticipated in the timeframe. The review team did not delve in depth into the reasons for this but note there are plans for Winnunga to increase patient levels when more medical staff became available.

We are concerned about an issue that arose after the onsite component of the review, whereby ACTCS unilaterally introduced a limitation preventing Winnunga Social Health Workers dropping by units to see clients. Instead, Social Health Workers were told to make appointments to see clients in pre-booked program rooms. Winnunga had determined that drop-by service was the most appropriate means to connect with clients in the AMC (rather than, for example, requiring clients book

a pre-arranged appointment at a specific time and location), and had been following this practice for a significant period. ACT CS cited the need for a more structured approach and safety and security reasons for this change, however, OICS is not aware of incidents or specific security concerns relevant to this change. In our view, ACTCS' action imposed a significant restriction on Winnunga's ability to determine the most culturally appropriate mode of service delivery of holistic care, and was out of step with the ethos of the partnership of co-delivery of service with an Aboriginal Controlled Health Organisation. We are also concerned at the apparent lack of consultation or engagement prior to the change.

As with new and novel services there will be challenges. Based on our discussions with key health personnel, it is clear that there is room for improvement in relation to interagency coordination of relationships, clarification of operational goals and commitment to front-line issue resolution processes. However, with ongoing commitment to the partnership, Winnunga's presence in the AMC will continue to enhance the AMC and has the potential to improve outcomes for Indigenous detainees.

Recommendation 56:

That Winnunga, Justice Health and ACTCS as a priority, jointly identify any blockers to more effective cooperation and service delivery and strategies to overcome them.

3.7 Mental health

STANDARD 79

Correctional centres make appropriate and adequate provision to meet the mental health care needs of detainees.

STANDARD 80

There is a comprehensive policy of mental health in place that includes strategies to prevent suicide and self-harm, including specific and specialised support to those at risk.

In the detainee survey 72% ($n=166$) reported that it was difficult to get psychological services when needed. Submissions and discussions with detainees indicate the challenge in accessing general psychological services.

Acute mental health needs are dealt with by Forensic Mental Health, with a multi-disciplinary team approach and appropriate information sharing mechanisms in place. However, the lack of general psychological support⁹⁰ for detainees appears to be a significant gap. Psychological services have been provided by the Corrections Psychological and Support Services (CPSS) team, but as of 1 July 2019 there was only one psychologist providing support in the AMC, for almost 500 detainees, and that psychologist was on unscheduled leave. A prison of commensurate size and detainee profile to the AMC should have in the range of 6–10 psychologists.

90 As distinct from Forensic Mental Health psychologists who have a different role.

The review team understands that a restructure is currently underway with the dissolution of the CPSS structure, and the recruitment of an additional clinical psychologist working in the programs team bringing the overall number of psychologists to two. However, it is unclear as to whether this new psychologist will provide general services to detainees or only work in the programs team. Whilst any additional psychologist staffing is welcomed it is unlikely to meet the current level of demand and therefore a gap is likely to remain in the management of adjustment disorders and mild-to-moderate mental health conditions.

“Mental health overall is very poor – there is no priority access unless it is urgent, and usually once someone has self-harmed.”

Submission from detainee

Recommendation 57:

That ACTCS take immediate steps to obtain an independent appraisal by an appropriately experienced expert to ascertain the appropriate FTE of general practice psychologists for the AMC and develop a plan to reach the minimum acceptable staffing level within 1 year.

Forensic Mental Health Services at the AMC appear to be functioning well, and the multi-disciplinary team including psychiatrists, an occupational therapist, social worker and mental health nurses is a strength.

The practice of transferring patients receiving ‘depot’ injections for psychiatric conditions to the Canberra Hospital Emergency Department is less than ideal due to inherent risk in moving the patient/detainee to a busy emergency department. The actual transfer of patients out of a custodial setting is itself good practice: the principle of equivalence⁹¹ requires if detainees need involuntary psychiatric treatment, they should receive the treatment not in a custodial setting but instead in a therapeutic setting with proper safeguards.⁹² The busy environment of ED is not an ideal place for this treatment. There are specialist mental health facilities in the ACT such as Dhulwa or the Adult Mental Health Unit with staff with specialist mental health training that may be more appropriate places for treatment to be administered.

Recommendation 58:

That ACT Health and ACTCS investigate the feasibility for detainees under a psychiatric treatment order receiving depot injections at approved mental health facilities aside from The Canberra Hospital Emergency Department.

The Crisis Support Unit appeared to be functioning well, although the CCTV cameras vision of cells did not afford detainees privacy when using the toilet. This important privacy issue, easily rectifiable, was identified in the [2011 Knowledge Consulting Review](#) and should have been addressed then.

91 Persons deprived of their liberty have the right to equivalent care to what they would receive in the community.

92 See, e.g. The Royal Australian & New Zealand College of Psychiatrists (2017) ‘Involuntary mental health treatment in custody’ [Position Statement 93](#), November.

Recommendation 59:

That ACTCS make changes to the existing CCTV setup in the AMC Crisis Support Unit to provide for protection of detainees' privacy when using toilets, while still ensuring appropriate observation for safety purposes.

3.8 Substance use and treatment**STANDARD 81**

Correctional centre systems have a comprehensive and integrated drug strategy that seeks to prevent the supply of drugs into the correctional centre, reduce the demand for drugs and minimise the harm arising from drug use in correctional centres through education, treatment and enforcement. Systems to test detainees for the presence of illicit substances are used in ways that comply with relevant standards to ensure the integrity of the testing procedures and the results.

Detainee survey

- 84% (n=174) reported that it was difficult to get alcohol at the AMC
- 67% (n=173) reported that was difficult to get needles/syringes at the AMC
- 67% (n=170) believed that drug programs at the AMC helped detainees with drug problems
- 54% (n=174) reported that it was easy to get non-prescribed and illicit drugs at the AMC

The review team notes that the AMC does not have a current 'comprehensive and integrated drug strategy' since the expiry of the most recent relevant strategy in 2017. The ACT Justice and Community Safety Directorate and Canberra Health Services are developing a Drug and Blood Borne Virus (DBBV) Strategy, based on tripartite goals of reducing supply of drugs, reducing demand for drugs, reducing harm caused by drugs. Finalisation of this document should be prioritised.

Currently there are a number of limitations working against the harm reduction limb of the tripartite drug strategy.

There are currently no notified policies or procedures relating to overdose prevention and response, which represents a significant gap requiring attention. Custodial staff need to have clear operational guidance on recognising and responding to overdose.

The AMC lacks a drug detoxification facility and there are limited drug rehabilitation programs available. Aside from the Solaris Therapeutic community (which, as an aside, women cannot access), there are no therapeutic facilities for drug detoxification and rehabilitation. The submission from Winnunga argues there is a need for a fully operational drug detoxification facility.

The lack of a needle and syringe program (NSP) at the AMC is noted and detracts from a harm minimisation limb of the draft DBBV strategy. The ACT community has access to a government-funded needle and syringe program, and evidence indicates NSPs are effective in reducing transmission of BBVs. Instead, detainees share dirty syringes across the jail. The review team heard anecdotal reports from detainees concerned about contracting blood borne viruses through use of shared needles. A joint submission to the review from the Australian Injecting & Illicit Drug Users League (AIVL) and Canberra Alliance for Harm Minimisation and Advocacy (CAHMA) drew attention to the Fifth National Hepatitis C Strategy which notes that detainees are a priority population and there is a need for more 'equitable access to successful preventative measures for all priority populations, with a focus on sterile injecting equipment through needle and syringe programs'. Positive headway to reduce the prevalence of Hepatitis C in the AMC due to new antiviral products is being hampered by lack of a NSP.⁹³

Finding 34:

That lack of a needle and syringe program at the AMC reduces the effectiveness of harm minimisation.

Furthermore, the review team understands that custodial staff do not currently have access to Naloxone after hours (i.e. when the HHC is not staffed). Naloxone is a drug that can temporarily reverse opioid overdose and has limited negative side effects but could be lifesaving in case of a drug overdose if an ambulance does not arrive in time. It is understood that there is a nasal spray version of Naloxone which would be an easy to administer form of the drug.

Recommendation 60:

That ACTCS and Justice Health examine the feasibility of making Naloxone available for administration after-hours in case of a drug overdose (including a trial of nasal Naloxone if feasible), supported by appropriate training in administration of the drug.

Recommendation 61:

That ACTCS and Justice Health examine the feasibility of making Naloxone available to all detainees with a recent history of opioid use as part of a release pack.

In light of the [ACT Health Services Commissioner's 2018 report into methadone](#) and follow-up, this review has not looked in to methadone prescribing at the AMC in any detail. However, we do note the high proportion of AMC detainees that are on Opioid Substitution Therapy (OST) and in particular, methadone. We also note that concerns were raised with us from a range of sources, including correctional staff and detainees, that methadone was being used as a pain management tool. One detainee told us that he was prescribed methadone after complaining about pain from a leg injury – he said that he had not been an opioid user on the outside.

⁹³ Harkness, B, Levy, M, Evans, R, Wenke, J. (2017) 'Why is there still hepatitis C transmission in Australian prisons? A case report' 14 *Harm Reduction Journal* 75.

Of welcome note was the imminent commencement of a trial of subcutaneous injection of buprenorphine. This has the potential of revolutionising OST in the correctional environment as it is a once per month injectable and negates diversion.

3.9 Medicines optimisation/pharmacy

STANDARD 83

Correctional facilities have in place safe facilities and procedures for the distribution of medication to detainees that reduces risk of incorrect dispensing and diversion.

Medication management is the single highest work impact within the HHC. It was reported that over 500 script rewrites need to occur every 28-days and this requires a clinical Rector or other medical officers to spend at least two days per week writing scripts on the paper 28 day prescription forms. Other jurisdictions have long-term medication charts which stretch to three or six months and this may be more appropriate for this environment for some patients. However, it was reported that an electronic medication management system would be introduced within the next three to six months – this needs to include remote prescribing.

This should improve compliance with the medication management cycle and clinical safety as well as reducing the need for regular rewriting of scripts. The unique nature of the correctional environment, which is more akin to long-term management of chronic patients in the community, should be considered in relation to the appropriate length of scripts which will assist in reducing the impact on medical officer time. Use of primary care nurse practitioners should also be considered as these positions would have prescribing rights, further impacting availability of medical staff.

Medication errors and the seizing of medications was reported as a significant driver of complaints to the Health Services Commissioner, as well as significant disruption to continuity of medication when detainees arrive at the AMC. However, the balance between confirming medication prescriptions from the community when someone comes into custody, along with the need to prescribe against the custodial formula does mean there are times when detainees will be taken off the community prescribed medication. Communication mechanisms for this process may be contributing to the complaints as detainees reported a lack of explanation as to why these processes were occurring.

The use of non-opiates for pain management appeared to be a particular focus and issue of frustration of detainees. Avoidance of diversion was often described as the rationale for the different approach to analgesia.

Finding 35:

Supervised medications and Opioid Substitution Therapy appeared efficient and well-managed, with appropriate identification of patients.

CHAPTER 4: PILLAR 3

PURPOSEFUL ACTIVITY



CHAPTER 4: PILLAR 3 – PURPOSEFUL ACTIVITY

4.1 Time out of cells

STANDARD 87

The hours out of cells facilitates access to work, programs, services, recreation, and overall rehabilitation.

According to ACTCS policy:⁹⁴

- 4.1. Correctional centres will establish a core day which allows all detainees, who are not subject to specific regimes due to poor behaviour, disciplinary action, or the provisions of part 9.2 of the *Corrections Management Act 2007*, the opportunity for a **minimum of 9.5 hours' time out of cell or cottage accommodation**. (emphasis added)

In the [Remand Review](#), OICS noted that (concerning out-of-cell hours):

The ACT has not performed well against the national average and most other jurisdictions. Furthermore, in regards to average out-of-cell hours for all detainees, the ACT has gone backwards since 2009/10, which may be related to a steady increase in the Average Daily State (ADS) of detainees and the need to accommodate them in the existing secure custody facility.

Unfortunately, there was no improvement in 2017/18, with the ACT again going backwards and again registering below the national average:

Table 5.1: Out-of-cell hours (secure custody prisoners) 2016/17–2017/18

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
2016/17	6.8	10.9	9.8	11.7	8.9	8.6	8.7	9.9	9.5
2017/18	7.0	10.7	8.6	11.3	8.4	8.4	8.4	9.4	9.0

Source: ROGS 2019, Table 8A.12

Table 5.2: Out-of-cell hours (all prisoners) 2009/10–2017/18

	09/10	10/11	11/12	12/13	13/14	14/15	15/16	16/17	17/18
Aust	11.4	11.4	11.1	10.0	10.1	10.1	9.9	10.1	9.9
ACT	14.1	13.3	10.5	8.6	8.9	8.9	9.0	8.9	8.4

Source: ROGS 2019, Table 8A.12

⁹⁴ *Corrections Management (Regime Planning) Policy 2018* NI2018-600.

The number of out-of-cell hours provided to detainees is a result of scheduled lock-ins (e.g. night-time, staff lunch break) and non-scheduled lock-ins. In the 2018 Remand Review OICS noted:

the most common reason (for lock-ins) at the AMC is staff shortages i.e. insufficient staff on hand to provide full coverage of the roster. In the period March/April 2018 there were 236 lock-in events (one lock-in may have covered a number of units) of which 68 (29%) were attributed to 'staff shortages'⁹⁵ and 99 (42%) were attributed to 'staff training'. Other reasons for lock-ins were 'escorts' (11 – 5%), 'facilities issues' (3 – 1%), 'searching' (24 – 10%), 'security' (8 – 3%), 'incident response' (19 – 8%) and 'other staff/staff meetings' (4 – 2%).⁹⁶

For the purposes of this review, ACTCS provided 2019 data on lock-ins:

Table 5.3: Unscheduled lock-ins January – June 2019 by reason in hours

Reason	Jan	Feb	Mar	Apr	May	Jun	Total
Staff shortages	3781	2518	2406	5651	1819	261	16436
Searches	289	800	1240	50	511	1679	4569
Escorts	44	123	117	0	0	0	284
Training	0	0	0	590	179	0	769
Incidents/security	437	3058	569	247	592	152	5055
Maintenance	144	132	88	71	147	114	696
Other	116	361	0	1379	1573	865	4294
Total	4811	6990	4420	7988	4792	3070	32071
% staff shortage	78	36	54	71	38	9	51
Approximate hours/detainee	9.9	14.7	9.4	16.7	9.7	6.4	66.8

Source: ACTCS

The data in Table 5.2 does not include "cohort" lock-ins, which staff in a number of units told us before and during the review that they are not required to record. Cohort lock-ins occur when groups of detainees in a unit who cannot mix together share the available un-lock hours between them. For example, if there were three cohorts in a unit each cohort would get about three hours out-of-cells per day. These lock-ins are additional to the other lock-ins reported in the table. The fact that cohort lock-ins are not recorded means that the out-of-cell hours data reported to ROGS by the ACT is inaccurate.

Leaving aside the "cohort issue" the data shows that in the first six months of 2019 51% of unscheduled lock-in hours were due to staffing problems. Overall the average detainee lost 66.8 hours out-of-cell time due to unscheduled lock-ins, which equates to about 7.4 detainee days.⁹⁷

⁹⁵ This was a catch-all term that was not defined/explained by AMC in the data collection.

⁹⁶ AMC lock-ins spreadsheet, March/April 2018.

⁹⁷ In a best-case scenario a detainee could get about 9 hours out-of-cell per day.

In its submission to the review the CPSU made comment on unscheduled lock-ins:

There has been an increase in unplanned lock-ins at the AMC, which leads to unnecessary and increased agitation and conflict amongst detainees. This has been directly attributed to ongoing staffing shortages. Staff also report feeling unsettled when there is an increase in lock-ins.⁹⁸

Finding 36:

That ACTCS has failed to achieve its target of a minimum of 9.5 hours out-of-cell hours since 2011/12.

Finding 37:

That the average annual out-of-cell hours provided to detainees in the ACT has been wanting compared to the national average and this does not reflect well on the AMC in a human rights jurisdiction.

Finding 38:

That staff shortages are a significant contributor to lock-ins of detainees during normal unlock hours.

Recommendation 62:

That ACTCS record cohort lock-ins and include this data in its reporting on out-of-cell hours for the annual Report on Government Services (ROGS).

4.2 Education and activities

4.2.1 Education

STANDARD 89

All detainees are informed about and able to access further education and vocational and continuing training relevant to their needs and interest, and encouraged to participate in them.

⁹⁸ Northam, M, CPSU Submission to the ACT healthy prison review, 22/05/19.

Detainees are lacking in formal education

In a 2012 report the Organisation for Economic Co-operation and Development (OECD) reported that 73% of 25–64 year old Australians had ‘obtained at least upper secondary education’.⁹⁹ A Mitchell Institute study found that 74% of Australians had completed Year 12 or an equivalent qualification at age 19 (the figure for the ACT was 84.8%). For non-Indigenous Australians the figure was 75.2% compared to 58.4% of people who identified as Aboriginal and Torres Strait Islanders.¹⁰⁰ The survey conducted as part of this review asked detainees about their highest level of education completed. A significant number of detainees (20) did not answer this question, which may suggest embarrassment about their level of schooling.

Table 5.4: Highest education level by Indigenous status

	Frequency			Percentage		
	<i>Indigenous</i>	<i>Non-Indigenous</i>	<i>Total</i>	<i>Indigenous</i>	<i>Non-Indigenous</i>	<i>Total</i>
Year 8 or less	11	18	29	23.9	13.4	16.1
Year 10	14	53	67	30.4	39.6	37.2
Year 12	4	20	24	8.7	14.9	13.3
Apprenticeship/TAFE	5	13	18	10.9	9.7	10.0
University	4	18	22	8.7	13.4	12.2
Missing data	8	12	20	17.4	9.0	11.1
Total	46	134	180	100.0	100.0	100.0

Source: OICS detainee survey 2019

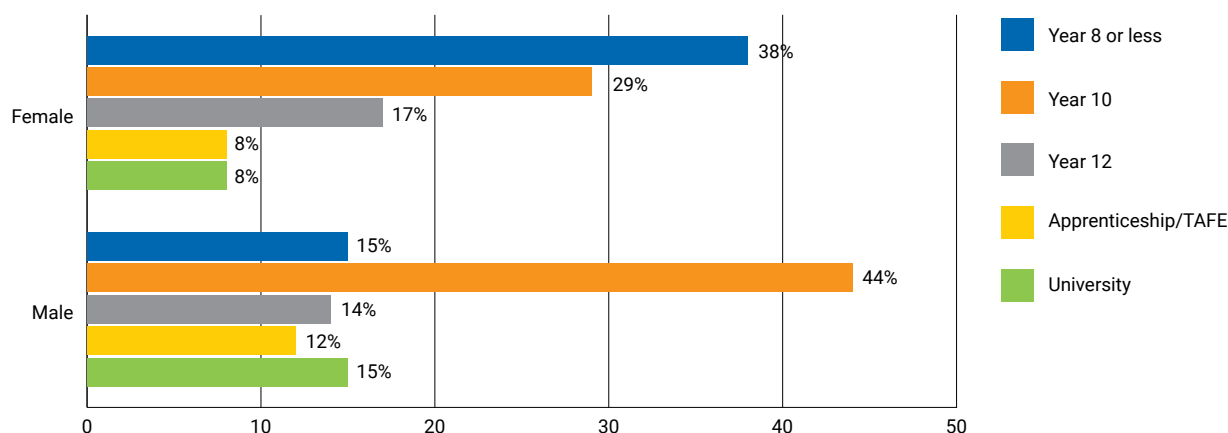
Indigenous detainees overall reported less formal education than non-Indigenous detainees but particularly for the category of Year 8 or less. Compared to the general population where (as noted above) around 75% of the adult population had completed Year 12 or equivalent, detainees reported between 9% for Indigenous people and 15% for non-Indigenous people.

An analysis of the results from our survey indicated that the female detainees in the AMC have a considerably lower education level than the male detainees.

99 Education at a Glance: OECD Indicators 2012, Country Note Australia, 8.

100 Lamb, S, Jackson, J, Walstab, A and Huo, S (2015), ‘Educational opportunity in Australia 2015: Who succeeds and who misses out, Centre for International Research on Education Systems’, for the Mitchell Institute, Melbourne: Mitchell Institute.

Highest level of education completed



It would be unrealistic to suggest that ACTCS could redress the formal education shortfalls of detainees who may spend relatively short periods in custody, particularly those on remand. In essence, the AMC cannot provide a comprehensive education to detainees in any way comparable to a high school or TAFE.

Education and training available at the AMC

The provision of education and training at the AMC is outsourced under contract to **FORSITE Training Pty Ltd**. Forsite offers detainees a limited range of accredited and other courses (refer to **Appendix 5** for details).

The Certificate I and II courses would take between 48 weeks and two years to complete if the minimum weekly commitments were applied e.g. one day per week. The core units in the certificate courses place a strong emphasis on Language, Literacy & Numeracy (LLN).¹⁰¹ Detainees are “encouraged” to undertake relevant courses as a requirement for being employed in various AMC jobs e.g. as unit cleaners.

“A lack of basic literacy among many detainees is a huge barrier to their rehabilitation, and yet it is very poorly addressed at the AMC. The Education contractors are not required to address it seriously, focusing on vocational and higher level education because, I think, that looks better in the media. Even if detainees get work skills they won’t help them gain employment without literacy skills.”

Submission from staff member

Detainee participation in education and training

The ACT has consistently recorded the highest proportion of eligible prisoners¹⁰² engaged in training and education in Australia.¹⁰³ For example, in 2017/18 the ACT recorded 77.3% compared to the national average of 34.0%.

Also, in 2017/18 the ACT recorded the highest proportion (all jurisdictions) of participation in the ROGS education categories:

¹⁰¹ Since 1998, LLN content has been ‘built-in’ to all Training Packages and accredited course content and has become an integral part of all vocational qualifications within the Australian Qualifications Framework (AQF) – Department of Education and Training, Queensland, 2011.

¹⁰² ROGS 2019, Table 8A.10. See also explanatory note (a) to Table 8A.10.

¹⁰³ 2009/10 to 2017/18 with the exception of 2017/18 when it came in second after SA.

Table 5.5: Percentage of eligible prisoners in education & training by category

Category	ACT	Aust
Pre-certificate Level 1 Courses	38.9	8.0
Secondary school education	26.5	2.7
VET	50.9	23.6
Higher education	4.3	1.8

Source: ROGS 2019, Table 8A.10

While the data is impressive it should be noted that ROGS reports on *enrolments* rather than successful *completions* (see below).

Education and training outcomes at the AMC

In 2018/19, 108 detainees received 129 education awards.¹⁰⁴ Of these 129 awards only six were for the successful completion of a certificate-level course, and all six were in Certificate 1 in Skills for Vocational Pathways. The remaining 123 awards were statements of attainment for completing some subjects in a certificate course and awards for undertaking non-accredited short courses such as handling agricultural chemicals.¹⁰⁵ Seventy-four of the statements of attainment were in a Certificate I course.

On its face this data looks dreadful, but this is not the fault of the (Forsite) Education Manager at the AMC who is a former high school teacher and business owner with years of experience working with prisoners, and who is passionate about his role at the AMC. Rather, there are systemic factors that impact on the delivery of education at the AMC, including:

- The high turnover of detainees (“churn”) which saw 834 admitted to the AMC in 2018/19 and 837 discharged. On average, remandees accounted for 40% of the AMC daily population in 2018/19, some of whom were in custody for very short periods of time e.g. days. In 2018, ACT remandees spent a *mean* of 3.5 months in prison (*median* 2.7 months). 26.3% of ACT remandees spent less than one month in prison. A further 33.3% spent between one month and less than three months in prison.¹⁰⁶
- Detainees “cherry-picking” bits of courses (e.g. barista training) and then dropping out.
- Unscheduled lock-ins that can result in non-attendance at classes or access to the library.
- Detainees’ difficulties in attending classes on time due to the requirement to move under staff escorts. This also impacts on access to the library.
- Detainees’ difficulties completing “take home” work books as a result of being in a doubled-up cell for at least 16 hours per day.
- Female detainees being restricted from attending the education centre or library at the same time as males.
- Various “cohorts” of detainees (e.g. protection and non-protection) being restricted from attending the education centre or library at the same time.

104 A detainee may have received more than one award.

105 Data provided by Forsite Pty Ltd, July 2019.

106 ABS Prisoners in Australia 2018, Table 32.

Detainees' views on education and training

Detainee survey

- 57% (n=174) were aware of education programs available to them at the AMC
- 77% (n=171) felt that education programs did not meet their needs

In a submission to the review¹⁰⁷ a group of female detainees expressed strong concerns about education opportunities, particularly with regard to their desire to obtain qualifications that are recognised in the community. Women also had concerns around the lack of time they can spend up at education, and (presumably because of this restriction) the reliance on them doing self-paced work via workbooks. They generally found it to be an unsatisfactory way to complete education and many were frustrated with administrative issues with this system such as the frequency with which workbooks got lost.

"Most detainees are so disheartened by the [education] offerings that in our area less than a dozen [of around 35] attend Education each week. Of those, half go to Art class to paint. This is not accredited, and none of the current group are Indigenous or selling any art works. A few are attending the FSK modules, or Barista, or IT class...We will continue to be told that what is on offer is wide-ranging and adequate. But not only is it discouraging to the detainees while they are in prison ("there's nothing to do!") and fails to provide them a sense of self-worth or progress – it is my firm opinion that on the whole prisoners are walking out the gate with the same lack of employable skills as they had when they came in."

Submission from male detainee

"They should do one on one education, everyone has different literacy levels and it's all self-directed which doesn't work for a lot of the women

Nothing we learn in here can give us accreditation or recommendations for when we are in the community

We are just given booklets to fill out and left to it

Women who work can't do education because it's at the same time

What's the good in doing education one day a week or a fortnight? "

Submission from female detainees

Finding 39:

That completion rates for educational courses are extremely low due to the effect of a number of impediments that are beyond the control of the AMC Education Manager.

¹⁰⁷ This submission was based on focus group discussions facilitated by Women's Centre for Health Matters (WCHM) 2019, Canberra.

Finding 40:

That a significant proportion of detainees are concerned about training opportunities at the AMC, including that courses are not relevant to employment needs and those courses that are available to them do not provide recognised qualifications that could assist them in finding employment.

Recommendation 63:

That ACTCS commission an independent education and training needs survey of detainees and draw on the results of that survey to better inform the structure, content and resourcing of the education and training program at the AMC, including ensuring it meets the needs of female detainees. The review should also engage with the ACT business community to identify education and training pathways relevant to employment in Canberra.

4.2.2 Library**STANDARD 91**

Sufficient and appropriate resources are available for detainee education and training at suitable times for them to be used, including access to a library of recreational, educational, cultural and information resources.

The AMC library is small but sufficient for demand. The librarian is passionate and has ensured that there are a wide variety of resources available, including Aboriginal and Torres Strait Islander cultural resources. Detainees supported this view with 75% of those surveyed expressing that they were satisfied with resources at the AMC library. Positive feedback was also received from detainees about the librarian's responsiveness, for example 'if you miss the library you can email the librarian and they will bring them up for you'.

In our view, the PrisonPC system could be better utilised for library resources. In their submission to the review, Justice Action highlighted that access to computers in cells can benefit education in prisons. For example, if connected to education providers, the PrisonPC system could be used to administer quizzes and multiple-choice exams to properly assess the progress made by detainees. We were informed that there is a basic literacy software on the PrisonPC.

Expanding the available resources on the PrisonPC provides detainees with an opportunity to develop information communication technology (ICT) skills that will assist them with reintegration upon release. The PrisonPC system could also be used to provide health related resources such as mental health self-care. The Community Justice Coalition provided a list of free health-related services that they believed could be whitelisted in their [ACT Computer in Cells Report](#). While there are risks involved with increasing the resources detainees can access on the PrisonPC, these can be mitigated through selection of appropriate resources and monitoring of its use.

As with other activities run at the AMC, the management of an excessive number of cohorts means that rovers are required to escort detainees to the Education block where the library is located. If COs are not available to do roving duties or to staff the block, detainees either cannot be brought to the library or arrive late. We were told and observed that this regularly occurs. Maximising use of the PrisonPC system will assist with this because detainees will still be able to access resources when they cannot attend the library.

Finding 41:

The AMC library is well-managed and reasonably well resourced, but the PrisonPC system could be better utilised to facilitate detainees' access to recreational, educational and informational resources.

4.2.3 Meaningful activities

STANDARD 88

Detainees have reasonable access to a range of sports, recreation and cultural activities suited to their interests, preferences, and special needs and conducive to the full development of their human personality.

Detainee survey

- 64% (n=174) reported being bored 'most of the time' due to lack of productive things to do
- 74% (n=167) reported not being able to exercise for any reason

Sport and recreation

The recreation centre is modern and relatively well equipped but has design flaws that restrict full utilisation without a significant increase in staffing levels. For example, external doors must be used to travel between the small and large gym rooms. There is currently one full-time recreation officer. While he is very dedicated and motivated, this limited staffing compromises supervision at the gym and limits capacity to proactively monitor the maintenance of the gym equipment in both the recreation centre and the accommodation units. Further pressure is placed on supervision by having the hairdressing salon used at the same time as the gym facilities.

Furthermore, some female detainees complain that the gym is male-focussed with not enough activities for women to engage in. There are no female recreation officers. The review team found that the previous arrangement of having a female recreation officer in addition to the male made the recreation centre more manageable and that the balance of gender had a positive influence on detainees. We understand that ACTCS is currently in the process of tendering for provision of recreation services in the AMC but did not respond to requests for detail on the specific terms of reference for procurement. Thus we are unable to comment on whether new recreation programs and services will be responsive to particular needs e.g. gender, aging detainees, disability etc.

Facilitating attendance at the recreation centre is also difficult. Detainees can access the gymnasium on a rostered basis but, as with other activities at the AMC, when and for how long they can attend is affected by the management of cohorts, lock-ins and the need for staff escorts. A good practice is the inter-cottage OzTag tournament. Detainee engagement could be strengthened through detainee sport representative groups or committees. However, this would require additional staff to facilitate planning and ongoing programming.

Aside from the gym, male detainees in high security units can access fixed exercise equipment in fenced yards but time is often restricted due to lock-ins and overcrowding of units. These areas resemble outdoor cages and are not conducive to healthy activity. Some units have ping-pong tables. Male detainees in the cottage accommodation areas have (various) access to outside gym stations and tennis courts.

Female detainees have very limited exercise opportunities due to their accommodation in a former male, high security unit. They seldom use the outdoor weight lifting stations and are limited to a couple of cardio exercise machines inside the unit. Women have restricted access to a small “green space” behind the unit but this area not suitable for walking (see photo 4 in Part 4.5).

There are two fenced ovals that are suitable for ball games, running and walking but it unusual to see any detainees using them. Women can access the ovals, but a significant proportion choose not to, as to do so exposes them to the view of male detainees and there have been instances of verbal abuse (including from perpetrators of offences against them) and other comments directed at them while using the ovals.

Finding 42:

That the recreation program has the potential to contribute significantly to a structured day, but it is currently an undercapitalised resource.

Finding 43:

That for those detainees not interested in weights exercise, there is little opportunity for walking or running exercise. Female detainees are particularly disadvantaged due to their accommodation arrangement and lack of access to the ovals.

Finding 44:

That the ovals at the AMC are under-utilised to the detriment of detainees’ health and fitness.

Recommendation 64:

That ACTCS engage both female and male recreation officers.

4.2.4 Gainful employment

STANDARD 95

To the maximum extent possible, detainees can access a range of productive employment including in the day-to-day operations of the centre, which provides them with the opportunity to acquire skills that will be useful upon release and are in demand in the employment market.

The Report on Government Services (ROGS) publishes data on 'Prisoner employment (per cent of eligible prisoners)'. This data:

Excludes prisoners in full-time education or other full-time programs as well as those whose situation may make them ineligible to participate in employment, such as prisoners whose protection status precludes their access to employment, fine defaulters who are in prison custody for only a few days, hospital patients or aged prisoners who are unable to work, prisoners at centres where the jurisdiction's policy is not to provide work or where work is not available (for example 24-hour court cells), and remandees who choose not to work. Periodic detainees are not included in the years that periodic detention operated in the relevant jurisdictions.¹⁰⁸

For 2017/18 ROGS reported¹⁰⁹ that 75.3% of ACT detainees were employed in 'service industries' (cleaners, sweepers, cooks, food handlers etc.) and none in 'commercial industries' (revenue earning activities). The ACT was the only jurisdiction to report zero in this category. Nationally, 32% of prisoners were employed in commercial industries and 47.8% in service industries.

The "shorthand" explanation for the absence of commercial industries at the AMC is that the **concept** for the centre was entirely focussed on education and programs for detainees (rehabilitation). As a result, there was no provision made on the relatively small site for commercial prison industries that are common in other jurisdictions. Other than services jobs, the only other work available to detainees are a limited number of jobs in the centre bakery, metal shop, recycling and the horticulture area or making coffee for visits. This may explain why 52% ($n=169$) of detainees reported a lack of meaningful paid work in the detainee survey.

While the AMC's 75.3% employment rate looks quite impressive, it is based on a count of how many detainees had a job not how many had a fulltime job. For example, a unit cleaner working for two hours per day would be counted as 'one'. This counting ambiguity is not limited to the ACT. It was clear from the survey we conducted that there is a high level of boredom amongst detainees and a strong desire to engage in meaningful work rather than the menial services jobs.

"The bakery is good, it gives my day some meaning."

Submission from female detainee

Meaningful work does not necessarily translate to revenue earning industries, it could include work directed at community reparation. For example, in other jurisdictions prisoners are employed to make or repair school furniture and playground equipment, make wooden toys, raise assistance puppies and so on.

¹⁰⁸ Productivity Commission, Report on Government Services 2018, Part C Chapter 8 Corrective Services, notes to Table 8A.11

¹⁰⁹ Ibid.

“There has been an ongoing issue with inmates getting employment. Remand inmates usually don't see work at all. There is very limited employment opportunities here at the AMC. There is no industries like any other prison I have been at. Essentially you have a lot of inmates in the prison with no programs they can attend, no work, and very limited education I think is 2 days a week for most/all areas. Prisoners are sitting around with nothing to do except for what they make for themselves. This is why there is a high drug use issue here and the cause of most disciplines stem from boredom.”

Submission from male detainee

“We need to be able to do some charity work – the judge recognises charity work and giving – it's heartfelt and community minded. It's good for your conscience too.”

Submission from female detainees

As noted earlier, one of the challenges for industries at the AMC is the absence of suitable infrastructure. For example, even though high-quality machinery has been provided in the metal shop it is in a space so small that our industry expert was of the view that no more than two detainees could work in the room at the same time without creating significant safety risks.

The review team believes that there is a strong case for the AMC to have a modest multi-purpose industries' building. This could accommodate the metal shop but be of a flexible design to allow for other transient projects. We would not envisage a need for high value capital equipment, but rather the sort of basic tools and equipment that might be found in a simple workshop. While we would not see the workshop being for men-only, there is an argument¹¹⁰ for female detainees to have productive work they can do inside their unit. This would have to be in light industries that do not require large or noisy tools/machinery. For example, women in a Queensland prison have been making cloth **shopping bags** for a local community group.

Other industries that may involve limited capital costs worth exploring, include road traffic controller courses, forklift tickets (if an appropriate flat area could be used), pallet assembly, and so on.

Recommendation 65:

That ACTCS explore the feasibility and costs of providing a modest multi-purpose industries building at the AMC and look for opportunities for female detainees to engage in work within their unit.

¹¹⁰ To avoid having to negotiate their way past male detainees.

CHAPTER 5: PILLAR 4 REHABILITATION AND PREPARATION FOR RELEASE



CHAPTER 5: PILLAR 4 – REHABILITATION AND PREPARATION FOR RELEASE

5.1 Rehabilitation

5.1.1 Assessment and case management

STANDARD 92

Case management plans are prepared for sentenced detainees soon after admission to a correctional centre.

Detainee survey

- 67% ($n=123$) of sentenced detainees reported that they had a case manager
- 66% ($n=107$) knew the name of their case manager
- 65% ($n=106$) reported that they can access their case manager when needed

In July 2019 ACTCS moved to a new staffing framework for case management. This has involved the recruitment and training of new staff to fill permanent roles of Sentence Management Officers (SMOs), previously called Case Managers. We were informed that there are policies and procedures in draft to reflect these changes.

The role of SMOs during induction is outlined in the Induction Policy¹¹¹. Each detainee is to be allocated a SMO within their first week of induction and the SMO must meet with that detainee during the induction process to discuss their sentence management plan. All remandees are also to have a SMO, making the terminology somewhat inappropriate considering they are not sentenced. Each SMO will be managing a case load of about 50 detainees.

Many of the previous issues with the case management system appeared to stem from a large area of responsibility from case management and administration/welfare functions, combined with high turnover in temporary contract roles. The case managers were taking on a large amount of the welfare-related work and in some cases were not adequately facilitating key roles around preparing detainees for release. The welfare needs of detainees were supposed to have been met by Case Officers (all CO1s) to whom each detainee was allocated. We were informed that a detainee only learnt who their Case Officer was if that CO1 was particularly proactive and that this system was difficult on the current rosters. Our understanding is that the new framework intends for the manager of each unit to undertake this welfare role.

111 Corrections Management (Induction Policy) 2019 NI2019-387.

The introduction of the sentence management system and training of the new team coincided with our onsite week, and it is difficult to evaluate the efficacy of this new approach given its early stage. However, anecdotal evidence from stakeholders since July suggests that there are some adjustment issues to the new framework. For example, we heard anecdotal reports of lawyers and external service providers experiencing difficulty connecting with clients whereas previously they had no trouble with Case Managers facilitating the contact. We do note that the ability of external service providers to contact clients via email is a positive that does not exist in many other jurisdictions, however, email takes time to set up and does not meet all needs in all cases. The 'human' link provided by a Case Manager/Sentence Management Officer remains crucial. It is imperative that detainees know who their sentence managers are, and sentence managers are accessible to both detainees and service providers.

Recommendation 66:

That ACTCS review the efficacy of the sentence management system after six months of its implementation, including seeking feedback from key stakeholders. This review should reference performance data such as matters raised by detainees, number of meetings held with detainees, wait times to see a Sentence Manager, etc.

5.1.2 Interventions/ Programs

STANDARD 93

Based on an individual risk and needs assessment, detainees are provided access to a range of evidence-based programs (for sentenced detainees) and transitional/pre-release programs that match detainee needs.

Detainee survey

- 57% ($n=177$) were not aware of the range of programs available to them at AMC
- 76% ($n=174$) believed that available programs did not meet their needs
- 66% ($n=151$) did not believe that programs help them to address their offending behaviour
- 71% ($n=170$) did not believe that programs help them to prepare for release
- 58% ($n=169$) did not feel a sense of achievement by participating in programs

The programs team functions with a total of four staff but is designed to have eight fulltime staff to operate efficiently. Staff levels are insufficient to cater for the number of programs required to meet detainee's needs. February 2019 statistics indicate the number of programs sessions (50) was significantly lower than January 2019 (99) and December 2018 (89).

Program staff seem dedicated and experienced and try to accommodate detainee needs. Detainees generally spoke highly of program facilitators. However, detainees told us that there does not seem to be a centre-wide schedule of activities which can result in clashes between work, education and programs, forcing them to choose one or the other.

The programs team has a six months projection schedule which they try to work to. An array of programs are offered which include preparation programs, offence specific programs, offence related programs, well-being programs and mandatory programs. According to ACTCS key programs currently operating include the adult sex offender program, cognitive self-change, domestic violence abuse program and violence intervention, alcohol and drug programs, Solaris therapeutic community, anger management and stress less program, as well as individual counselling. However, we understand that the lack of psychologists has severely limited the ability of the AMC to provide individual (as opposed to group) counselling sessions. ACTCS is currently purchasing the Queensland Corrective Services sex offender programs which have stood the test of time and evaluation.

The Solaris program is both a community and custodial based drug and alcohol program that can last between 4 and 12 months and transitional release support is provided. Since its inception in 2009, 270 detainees have completed the program with about six groups held per year comprised of between 6 and 12 detainees in a group program. The program seems well organised, based on best practice and the detainees we spoke to had enjoyed the program. Unfortunately, Solaris is not open to female detainees.

The Culture and Land Management Program (CALM) program is very well managed and enjoyed by detainees who learn about aquaculture, herbs, native fruits and Indigenous plants. The learning style is ideal, particularly for Indigenous detainees. CALM functions four days a week. It is the only area where mixed classification detainees can work together in a self-directed learning manner with guidance by a trade officer. Detainees we spoke to said they loved working in CALM and claimed they learnt a lot, felt the program improved their confidence and provided an opportunity to obtain a certificate. Unfortunately, CALM is not open to female detainees.

The review team was told that it can take 4–5 months for a program to roll around. This creates a problem for remandees who are eventually sentenced as they cannot start programs prior to sentencing and they often do not have enough time left on their sentence to be waitlisted or complete a program. Other issues include:

- Difficulties between program staff and Corrections Officers concerning access to programs rooms in units.
- Lack of objective evaluation of programs.
- Poor air conditioning in the central programs area.
- Programs not consistently run.
- No facilitator for Out of the Dark program.
- Clash between education, rehabilitation programs and work times – not well coordinated.
- Qualitative and process data is collected but no pre and post outcomes data is collected.

Some women complained that when walking down the pathways to access programs and work, sexist comments are made by male detainees and some male corrections staff. They said that some male detainees have been former partners in domestic abuse situations and they have to walk past them to access programs or employment so they will not attend centralised programs or employment. Concerns were expressed that many sentenced women do not have a case plan and no support on release and they want more access to programs. They talked about limited support for through-care and case management. The women enjoy the Shine for Kids program but complained that there is no parenting program for them. These issues are also discussed in section 3.5.1.

Finding 45:

That the suite of programs available to male detainees is satisfactory but there are insufficient staff available to deliver the required program sessions.

Finding 46:

That the decision to acquire Queensland Corrective Service's well-proven sex offender programs was sound and should deliver good outcomes for detainees.

Finding 47:

That female detainees are excluded from the Solaris and CALM programs. Women have limited opportunities to engage in programs generally.

Finding 48:

That there is a lack of objective evaluation of programs.

5.2 Preparation for release**5.2.1 Contact with the outside world****STANDARD 97**

Detainees are encouraged, and as far as practicable, adequate opportunities must be provided, for detainees to be able to remain in contact with family members, friends, associates, community leaders and others by telephone calls, mail, email and visits.

Access to telephones and establishing telephone accounts**Detainee survey**

- 89% (*n*=174) reported telephone calls as 'very important' to maintain relationships with family and friends

Detainees may make calls from unit telephones but cannot receive calls, unless facilitated in exceptional circumstances by staff. Each detainee may have up to 10 approved numbers they can call at their expense with a limit of 10 minutes per call. They may also request free "welfare calls" if there is an urgent matter to attend to and they have no funds to pay for a call. There are also free-call numbers for some external agencies which provide assistance to detainees.

Personal phone contacts must be approved by an AMC Administration Officer (AO) to ensure that the person nominated is happy to receive calls from the detainee and is a suitable person (e.g. not a criminal associate). The AO advised that this can be a time-consuming process given the need to call each nominated person and often experiencing problems with incorrect phone numbers or people not answering calls, particularly during business hours when people may be at work. Voice messages left by the AO are often not responded to by the recipients.

The scale of this task should not be taken for granted given that in 2018/19 AMC received 804 detainees, which could translate to 8040 phone numbers to be entered on the system and checked if all availed themselves of the maximum of 10 numbers. Returning detainees (re-offenders) still have to have their old phone lists checked in case circumstances have changed (e.g. family member now a victim). In addition to this new-arrival's workload, detainees frequently request numbers to be added or deleted from their approved list.

The at times lengthy, but necessary, vetting process is often a source of frustration and annoyance for detainees when they are admitted to the AMC. Desirably new-arrivals should have their telephone accounts set-up and activated during their five-day induction program but for the reasons noted above this does not always occur.

The AO keeps very detailed records of when telephone account requests are received from detainees and when they are actioned and the review team is satisfied that every effort is made by the AO to action requests as soon as possible.

Concerning the cost of phone calls, the [Remand Review](#) noted:

Many (detainees) said that they simply could not make calls or make as many calls as they would like to, due to their limited financial resources and the high cost of calling mobile phones.

The cost of phone calls was again highlighted by detainees in this review with 64% ($n=163$) of survey respondents reporting that the cost of telephone calls inhibits the number of calls they can make. The weekday rate is \$5 for 10 minutes and the unemployment payment is \$15 per week with around \$25 per week for a level 1 job (this must cover all expenses including buy-ups) hence the cost of calls can be highly prohibitive. A detainee who received no visitors told us that calls were his only contact with the outside and he could only afford very few.

The OICS notes, as it did in 2018 (Remand Review), that there are insufficient telephones to cater for the current detainee population, which makes telephone access difficult and creates a potential source of conflict among detainees.

Finding 49:

That the high cost of telephone calls is a major source of concern for detainees, many of whom have limited financial resources.

Recommendation 67:

That ACTCS review the current telephone call service provider arrangement with a view to obtaining a better cost-per-call rate for detainees.

Access to email and establishing email accounts**STANDARD 101**

Detainees have reasonable access to email and other technology where possible.

Detainee survey

- 91% (*n*=171) reported emails as 'very important' to maintain relationships with family and friends

Detainees may send and receive emails from in-cell terminals free-of-charge and there is no limit on the number of emails they may send/receive. They are limited to six personal email addresses (friends, family, etc.) but may have an unlimited number of legal addresses (lawyers). As with telephone numbers, each email address requested by a detainee must be checked by the AMC Administration Officer.

In addition, detainees may send/receive emails to/from the AMC administration units and specified external oversight bodies (e.g. ACT Human Rights Commission, ACT Ombudsman, OICS and AMC Official Visitors).¹¹²

Emails, other than those to/from oversight bodies, can be read by specified staff to check for content of a criminal nature such as threats of violence, intimidation, harassment or other security-related matters. At the time of the review emails to/from lawyers (subject to legal privilege) were not exempt from reading but ACTCS advised that this issue was being addressed by changes to the email system software.

Emails, other than those to/from oversight bodies, are automatically vetted by the system which will quarantine¹¹³ emails that have attachments and those containing "key words". Typical attachments are photographs and documents which need to be checked to ensure that the content is acceptable. The "key words" filter is intended to alert staff to possible illegal activity (e.g. arranging a drug delivery). The quarantine process delays emails and has been a frequent source of complaints by detainees.

While it is not appropriate to disclose the "key words" list currently in use, it contains some innocuous words that were or are sometimes used as detainee code-words for various things that are of concern to the AMC. Problems arise when a key word is used in an innocent, ordinary way as this will trigger the quarantine process and thereby delay the email until it is checked by staff. The AMC advised the "key words" list is currently under review with the aim of removing some of the words that frequently trigger quarantine.

The review team is not convinced of the value of the key words filter given that, in our collective experience, detainees are adept at devising their own, personal code-words with family and other associates (e.g. during visits) which they can use during phone calls, in emails and letters.

¹¹² The review was advised that these emails cannot be read by staff.

¹¹³ Place on-hold.

There is a process problem with establishing email *and* telephone accounts that needs to be addressed by the AMC as a matter of urgency. At present there is no effective system in place to advise detainees when their accounts have been approved and set-up and to provide them with their email login details. The AMC AO relies on unit staff to check the intranet status report and advise detainees directly as the AO cannot email detainees or telephone them and cannot, for practical reasons, advise them in person. This communication problem can result in detainees being unaware that they are “connected” and may lead to unnecessary complaints to Official Visitors, the Ombudsman (etc.).

There is also a problem for the AO in prioritising telephone/email requests for new arrivals as opposed to making changes to established accounts (e.g. adding or deleting numbers/addresses). Both new and existing account requests are forwarded to a single email account in-box making it difficult to identify the new reception detainees.

Recommendation 68:

That changes to the email software system to prevent the reading by staff of legal-in-confidence emails be completed as a matter of urgency.

Recommendation 69:

That a system be put in place at unit level which ensures that detainees are notified promptly when their email and telephone accounts are set-up and ready for use.

Recommendation 70:

That requests for establishing telephone and email accounts for new reception detainees be given priority over non-urgent amendments to existing accounts.

Ordinary mail

STANDARD 100

As far as practicable, detainees are able to send and receive as much mail as they wish.

Detainee survey

- 65% (n=171) reported postal mail as ‘very important’ to maintain relationships with family and friends

As with telephone and email accounts, requested mail recipients must be approved to, for example, prevent mail being sent to a victim or criminal associate. Incoming mail is checked for contraband (e.g. drugs). Detainees raised concerns about cases of ‘protected mail’ from lawyers being opened and read, which we passed on to management and other oversight bodies.

5.2.2 AMC visits centre and visits program

STANDARD 103

Detainees receive the maximum opportunity for visits as is operationally viable, and access to visits is afforded on a non-discriminatory basis.

STANDARD 104

Conditions for visits are the least restrictive possible in the circumstances.

STANDARD 105

The visits area is clean, safe and comfortable, meets diverse needs, provides appropriate facilities (including for children of various ages), and is as far as possible pleasant for visits to take place i.e. the visits area should not resemble a prison environment.

STANDARD 106

Visitors are always treated with respect and dignity, and are never subjected to humiliating or degrading treatment.

The visits centre and program continue to reflect the findings in the [Remand Review](#).¹¹⁴ The pressure on the visits centre and program caused by the increased population at the AMC has not decreased. The government response to these findings was that a review of visits processes and arrangements would be completed by 30 June 2019, but we have not been informed of any outcome. Our opinion is that the visits centre is the face of the prison and relieving pressure on this shared facility should be a priority. Furthermore, 91% ($n=172$) of detainees surveyed reported visits as 'very important' to maintain relationships with family and friends. The detainee survey responses also included 80 handwritten comments about visits.

In regards to the visits centre, the surroundings are pleasant and well-maintained. However, the children's play area contained several unhygienic toys and broken plastic with sharp edges. Furthermore, a frequent comment on the detainee surveys was that visit sessions are crowded and lack privacy. Seventy-one percent ($n=170$) of detainees surveyed felt that the visits area was not well set-up for family visits. We observed that two family visits rooms are currently being used for storage and as a quasi-programs room. These rooms are an underutilised resource, especially as they could be part of an incentive-based regime.

¹¹⁴ See pages 57–65.

Staff working in the visits and reception area were observed as being respectful and patient with both detainees and visitors.¹¹⁵ The majority of visitors surveyed felt that the staff at the AMC treated them respectfully and gave them enough privacy during the visit. In contrast, 76% ($n=169$) of detainees surveyed felt that staff did not treat their visitors well, with many commenting that staff are rude to their visitors. However, it is unclear as to whether the staff in question were those at the front reception where visitors are processed and searched or those who actually work in the visits centre, or both (the searching of visitors is discussed in section 2.3.2 of this report).

The Gatehouse (where visitors enter the AMC) has not been expanded since the AMC opened and is now dealing with about twice the number of visitors than was originally envisaged. This can result in frustration and delays for visitors as they undergo the identification and security procedures. This also puts staff under pressure, noting the uniformed staff involved are not trained in customer relations or dealing with children or “civilians” that may find prisons stressful and a cause for anxiety. In these circumstances it would not be surprising if there were occasional heated moments between visitors and staff.

The review team believes that there is strong argument for regular Gatehouse staff to be provided with professional customer relations training to reduce stress on them and visitors to the AMC.

Regarding the visits timetable, visits are scheduled for Wednesday to Sunday with each accommodation area allocated a one-hour slot twice a week. Fifty-five percent ($n=163$) of detainees surveyed were unhappy with this visits program. They commented that this number of sessions is not enough and that often their visit sessions are being shortened to 45 minutes.¹¹⁶ Eighty-two percent ($n=45$) of visitors surveyed reported that they would visit more often if the weekly visits schedule allowed it. This reflects the findings in the [Remand Review](#).

The visits timetable and information about visiting the AMC is provided on the ACTCS website. Seventy-eight percent ($n=45$) of visitors felt that that information is clear and 77% ($n=44$) reported that it was up to date. Generally, visitors surveyed were pleased about the booking system though it was commented that an automated system is not helpful when they have questions to ask.

Finding 50:

That the detainee visits system operates generally satisfactorily given the demands of an expanding prison population. However, there are opportunities to improve this “public face” service.

Recommendation 71:

That regular Gatehouse staff be provided with professional customer relations training.

¹¹⁵ Also noted by OICS staff on previous occasions.

¹¹⁶ This assertion was strongly denied by visits staff.

5.2.3 Parole hearings

The ACT Sentence Administration Board (SAB) is established under section 171 of the *Crimes (Sentence Administration) Act 2005* which provides the framework for board operations and the legislative power for the board to make decisions. One of the SAB's responsibilities is to consider detainee parole applications and decide whether or not to grant parole.

As part of the Board's deliberative process ACTCS Community Corrections provides a Pre-Release Report (PRR) on each parole applicant. The PRR covers a range of matters including:

- Current offence history and personal details;
- Sentencing comments (if any);
- Previous community supervision;
- Attitude to offences and sentence;
- Relevant family/social issues;
- Employment (past and future plans);
- Alcohol and other drug use;
- Physical and mental health;
- Financial situation;
- Custodial attitude and behaviour;
- Custodial treatment programs, education, training and prison employment;
- Proposed post-release plans, including accommodation;
- Recommendation to the SAB (release or not release to parole).

The PRR is an important source of information for the SAB, and in that regard, it is critical that PRRs contain no factual errors and the content provides a balanced assessment of the applicant's suitability for release to parole.

Community Corrections *Parole Unit – Policy and Procedures*¹¹⁷ requires that a completed PRR be 'discussed with detainee prior to transmission to SAB', 'During second week prior to the SAB meeting date' (Section 5). This requirement is important from a procedural fairness perspective: detainees must be aware of information contained in a report that may be adverse to their interests and have an opportunity to comment or highlight any perceived factual inaccuracies before it is put before the board.

With this background in mind, the review team was concerned to hear from some detainees that they had attended SAB parole hearings without ever having seen their PRR, and of one detainee who said that the PRR shown to him at his hearing contained factual errors about his offences.¹¹⁸

¹¹⁷ Document dated 16 September 2015 which does not appear to be a Notifiable Instrument.

¹¹⁸ Not verified by the review team.

In discussion with the review team the SAB Deputy Chair advised that there had been occasions when applicants claimed to have not seen their PRR until presented to them at a hearing. In such situations the applicant is given the opportunity to read the PRR on-the-spot, or if that is not feasible, hearings have been adjourned to a later date to enable the applicant to properly consider their PRR and prepare any response they may wish to put to the Board.

Three members of the review team were present as observers at a SAB parole hearing on 9 July 2019¹¹⁹ when a detainee stated that while he had seen his *original* PRR, he had not seen a supplementary report which was also before the Board. Fortunately, he was able to read the supplementary report at the table and was happy for the hearing to proceed.

It is totally unacceptable for a PRR to be provided to the SAB if it has not been provided to, and understood by, the applicant.¹²⁰ If a hearing has to be adjourned as a result of such a failing it may delay a detainee's release to parole and potentially a detainee's right to liberty may be at stake. Delayed hearings will also result in an increased workload for the SAB.

Finding 51:

That, contrary to its own policy, there have been instances where ACTCS Community Corrections has not provided Pre-Release Reports to detainees in a timely manner thereby potentially delaying their release to parole and causing unnecessary work for the ACT Sentence Administration Board.

Recommendation 72:

That ACTCS review the Community Corrections *Parole Unit – Policy and Procedures* and promulgate it as an un-redacted Notifiable Instrument.

Recommendation 73:

That ACTCS put in place quality control mechanisms to ensure that Pre-Release Reports are provided, and explained to, parole applicants not later than one week prior to their scheduled hearing before the ACT Sentence Administration Board.

¹¹⁹ Attended at the invitation of the SAB Chair.

¹²⁰ 'Understood' is very important for detainees with intellectual disabilities, limited literacy skills, cognitive disabilities or with low English comprehension.

APPENDICES



APPENDICES

APPENDIX 1: REVIEW METHODOLOGY

The OICS Healthy Prison Review involved significant forward planning in order to learn from and understand good practices in prison oversight. Preparatory documents such as the Review Standards and Review Framework were completed at the end of 2018 drawing on work of other inspectorates around the world. The review process commenced formally in January 2019 with the gathering of information and data from a range of sources, in order to gain a better understanding of matters that the review team may need to address.

Consulting other inspection bodies

We drew on the expertise of inspection bodies in Australia and internationally. In particular, the Western Australia Office of the Inspector of Custodial Services (WAOICS) was a great source of guidance. Our Deputy Inspector, Rebecca Minty, accompanied the WAOICS on its inspection of Acacia Prison as a member of its review team. We also consulted publicly available material, such as publications on detention monitoring by Her Majesty's Inspectorate of Prisons in the United Kingdom. We developed the OICS Review Framework from this consultation.

Announcing the review

While OICS is able to conduct unannounced inspections, for practical reasons the Inspector chose to announce the review approximately four months in advance. This allowed time for ACTCS to provide requested data and for interested stakeholders to respond to OICS call for submissions. The Healthy Prison Review was formally announced via a letter to the Executive Director of ACTCS on 4 March 2019. Detainees and staff at the AMC were informed of the review by email, the placement of posters in various units of the AMC and verbally during our visits to the AMC.

Data collection

We requested a broad range of operational data from ACTCS under each of the four pillars of the 'healthy prison' themes when the review was announced. As discussed in section 1.11 of this report, it was difficult for ACTCS to provide all the data requested because of their recording systems.

Community consultation

We made a public call for submissions to the review on 6 February 2019. This was published on our website, circulated amongst relevant stakeholders and was [reported in the Canberra Times](#). We received a total of 32 submissions. These were as follows:

1. Family member of detainee (name withheld)
2. Detainee (name withheld)
3. Detainee (name withheld)
4. Detainee (name withheld)
5. Family member of detainee (name withheld)
6. Canberra Mental Health Forum
7. Prisoners' Aid
8. Family member of detainee (name withheld)
9. Detainee (name withheld)
10. ACT Ombudsman
11. Australian Injecting and Illicit Drug Users League (AIVL) and Canberra Alliance for Harm Minimisation and Advocacy (CAHMA)
12. ACT Disability, Aged and Carer Advocacy Service (ADACAS)
13. Community organisation (name withheld)
14. ACTCS staff member (name withheld)
15. Advocacy for Inclusion
16. Alcohol Tobacco and Other Drug Association ACT (ATODA)
17. Justice Action
18. ACT Council of Social Service (ACTCOSS)
19. Women's Centre for Health Matters (from a workshop with community services who work with and support women detainees)
20. Detainee (name withheld)
21. Worldview Foundation
22. Lorana Bartels and Associate Professor Jason Payne, the Australian National University
23. Detainee (name withheld)
24. Care Inc. Financial Counselling Service and the Consumer Law Centre of the ACT
25. Detainee (name withheld)
26. Volunteering and Contact ACT
27. Winnunga Nimmityjah Aboriginal Health and Community Services
28. Women's Centre for Health Matters (on behalf of women detainees)
29. Community and Public Sector Union
30. ACT Human Rights Commission
31. Women's Centre for Health Matters
32. Karen Toohey, ACT Discrimination, Disability and Health Services Commissioner

Submissions that were not marked confidential will be published on our website after the public release of this report.

Members of the review team also participated in community forums hosted by ACT Council of Social Service, Women's Centre for Health Matters and Tjillari Justice Aboriginal Corporation. Attendees represented a broad range of stakeholders, many of whom provide services for detainees both inside the AMC and upon release. We also had bilateral meetings with other key stakeholders in the legal, justice, academic, community and health sectors.

Surveys

We engaged Ibolya ("Ibi") Losoncz, ANU research academic, to develop surveys for AMC detainees, staff and visitors. This was an extensive exercise to ensure that the surveys would return quality data and so that the survey can be used for successive reviews with only minor modifications required. A summary of the results of the three surveys will be published on our website at a later date.

All surveys were administered as paper forms. The detainee surveys were distributed on Wednesday, 1 May 2019. OICS staff walked around to each accommodation unit and explained what the survey was for and how to complete it. Copies were provided to each detainee in the unit and a copy left for each detainee who was not present e.g. were at work or court. There was a secure collection box accessible only to OICS in each unit for detainees to place their completed survey form in. On Saturday 4 May, OICS staff walked around the units to assist any detainees who wanted help completing the form and the collection boxes were emptied. In the end, 181 detainees completed the survey, representing about 37% of the detainee population. Of all respondents, approximately 26% identified as Indigenous.

The staff survey forms were distributed at the same time as the detainee surveys. Forms were given to COs in each unit and stocks of forms were left in common staff areas next to the collection boxes, including at the Court Transport Unit at the ACT court complex. Emails were sent to all AMC staff encouraging them to complete the surveys. The forms were collected approximately 2 weeks later with 115 staff completing the survey, which represents about 43% of the AMC full time equivalent staff.

The survey completion rates for detainees (37%) and staff (43%) were significantly higher than we expected and were more than sufficient to provide valid samples.

Volunteers from Prisoners Aid ACT administered the visitor survey on behalf of OICS. This was done over a two-week period in May. Visitors to the AMC were informed of the survey when they arrived at reception and asked to complete it after their visit on their way out. Forty-six adult visitors completed the survey but we do not know how many visitors did not complete surveys as, for logistical reasons, it was not practicable to count all visitors some of whom may have made several visits over the period.

In essence, we don't know if the visitor's survey returned a valid sample and for that reason we did not rely heavily on the data.

When citing survey results in the report the frequency (*n*) refers to valid answers only and excludes missing data e.g. for the 181 detainees who completed the survey not all provided valid answers to all questions – this may mean that for a particular question *n* is less than 181.

Survey benchmarking

While this report often refers to survey data (staff, detainees and visitors), this was only a relatively small proportion of the data collected. One of the aims in conducting the surveys was to provide baseline data for subsequent Healthy Prison and thematic reviews of the AMC so that OICS can gain an understanding of changes over time. For example, we asked staff to respond to the statement:

I feel that working with detainees all day is really a strain for me

Most of the time	9.9%
Sometimes	41.4%
Rarely	39.6%
Never	9.0%

We don't know what the significance of this data is in 2019 (good, bad or indifferent) but results from future surveys may indicate that shifts in answers need to be addressed. For example, if the 'Most of the time' response went from 9.9% to 20% in 2021, there would be cause for concern.

The review team

Experts in various fields were brought together for the onsite component of the review. The full team comprised of:

- Neil McAllister, Inspector, OICS (ACT)
- Rebecca Minty, Deputy Inspector, OICS (ACT)
- Holly Fredericksen, Assistant Inspector, OICS (ACT)
- Russell Clayton, prison industry expert (Vic)
- Lee Downes, former Assistant Commissioner and prison General Manager (NSW)
- Russell Ford, former Deputy, Office of Correctional Services Review (Vic)
- Craig Gear, prison health expert (NSW)
- Lauren Netto, Office of the Inspector of Custodial Services (WA)
- Dr Gavan Palk, Forensic psychologist and Barrister-at-Law (Qld)
- Joseph Wallam, Office of the Inspector of Custodial Services (WA)
- Victoria Wilson, former Manager, Office of Correctional Services Review (Vic)

Addressing gaps in representation

Under section 18(2) of the ICS Act, the Inspector is required to 'consult with, or use staff, suitable to the cultural background or vulnerability' of detainees involved in the review. Joseph Wallam is an Aboriginal man and the Community Liaison Officer at WA Office of the Inspector of Custodial Services. Zouheir Dalati, Cultural Liaison Officer at Victims Support ACT, kindly assisted us in administering the detainee survey and attending the AMC with us on a separate occasion, including with a faith leader in the Muslim community. We also consulted the Cultural Liaison Officers at Legal Aid ACT about issues specific to CALD detainees.

Onsite week

The review team was onsite from 1–5 July 2019. Members met with key AMC staff in accordance with their assigned subject areas (e.g. education, security), observed practices (e.g. searches, lock-ins, visits) and made inspections of registers, units and other workplaces. They also spoke informally with staff and detainees. Meetings were also held with the AMC union (CPSU) delegates and detainee delegates. Some team members also met with external bodies relevant to the AMC e.g. ACT Health staff, Winnunga, an Adjudicator under the *Corrections Management Act 2007* (ACT), The Canberra Hospital, the Health Services Commissioner, an Official Visitor and key positions at ACT Corrective Services head office etc.

Triangulation of Evidence

Following the approach of the Western Australian Office of the Inspector of Custodial Services, team members were required to prepare *evidentiary* notes and *analytical* notes, the latter being conclusions and observations based on the evidence obtained. Wherever possible, analytical notes were to be substantiated by three sources (*triangulation*) of information such as staff/detainee surveys, ACTCS data, observations, interviews, registers etc.

Triangulation is not always possible when dealing with, for example, staff opinions about their work and workplace. In such cases the review team refrained from making any definitive judgements but rather noted those matters/issues.

APPENDIX 2: SOME HISTORY OF THE AMC

A succinct description of the origins of the AMC was provided by the ACT Legislative Assembly Standing Committee on Justice and Community Safety in its [Inquiry](#) into the delay in the commencement of operations at the Alexander Maconochie Centre (2009):

Prior to the AMC, the ACT had no facility for holding sentenced prisoners. While remandees could be detained awaiting trial, upon sentencing prisoners were transferred into the New South Wales prison system and the ACT reimbursed NSW for the cost of holding those prisoners. There has long been debate in the Territory about the construction of a prison in the ACT. One witness to this inquiry attended a meeting on the issue in the mid-1970s.

Various reports had recommended its construction, including a series of reports by this Committee's Fourth Assembly incarnation. It was argued that it would be appropriate for the ACT to take responsibility for its own prisoners and that a facility in the ACT would make it easier for prisoners to maintain contact with their families and reduce post-release re-offending.

On 30 May 2001 the government of the day announced that it would construct a prison in the ACT. The site for the prison was chosen in 2004, with planning activities continuing into 2005. At that time the government was aiming to have the prison finished in mid-2007.

The vision for the AMC was articulated in detail in the '[ACT Correctional Centre Alexander Maconochie Centre Functional Brief 2005](#)'. The report noted:

The Alexander Maconochie Centre (AMC) is to be a secure and safe place that will have a positive effect on the lives of prisoners held there and on staff who work there. Its management and operations will give substance to the dictum of Sir Alexander Paterson that offenders are sent to prison as punishment, not for punishment.

The AMC will reflect the "Healthy Prison" concept.

In that report, John Paget described the vision for the new prison:

With the establishment of a new AMC in the ACT an opportunity exists to implement and sustain a healthy, positive organisational culture within the Centre by ensuring staff are screened, recruited, trained and supported to meet the diverse demands required of them.

Rehabilitative efforts have a greater chance of changing an offender's behaviour and improving opportunities following release, if custodial and other professional staff work together in delivering effective treatment programs and are responsive to the needs of prisoners. A healthy Centre culture will lower the institutional "temperature", reduce prisoner stress, frustration, boredom, violence and minimise the risks of harm to prisoners and staff.

The Centre environment which will be established will reflect the integration of design solutions with operational policies. Particular attention will be paid to the needs of Indigenous and female prisoners, which must be met objectively and not simply by striving for parity with male, non-Indigenous prisoners. The latter approach would be inadequate to address the disparity in circumstances.

The design of the AMC will avoid that design harshness which encourages aggressive behaviour, but rather will seek a softer institutional presentation which will foster socially acceptable behaviour. It will avoid dowdy colours, dim lighting and the use of excessively harsh materials.

Prisoner accommodation will provide extensive vista to open areas to provide physical and psychological orientation.

Landscaping will be designed to contribute to a mood of calm and repose in a setting not usually associated with either.

A sacred space, embracing Indigenous and non-Indigenous elements, will be an important feature of the Centre setting.

The Functional Brief noted:

The AMC will comprise the following:

Inside the 'Secure Perimeter':

- 175 beds for sentenced prisoners;
- 139 beds for remandees in separate remand facilities; and

In separate facilities outside the 'Secure Perimeter':

- Up to 60 low-security prisoners in a Transitional Release Centre.

As to how the AMC bed capacity was derived, the Brief states:

The capacity of 374 provided will meet the projected requirements of the ACT for the next 40 years, based on ACT prisoner projections by the Department of Treasury.

The Brief also detailed the 139 bed remand accommodation that was to be provided:

Table A2.1: Original AMC remand bed specification (374 total bed design)

Type	Males	Females	Other	Total
Single cell	10			10
Double cell	39 (78 beds)			78
Cottage	24	15		39
Medical/Crisis Support Unit			12	12
Total	112	15	12	139

The original 374 bed design was subsequently reduced (date unknown) as a cost cutting measure to 300 beds but it is unclear as to whether the remand beds were affected by this downsizing.¹²¹

Following the opening of new accommodation units in 2015/16 AMC achieved a design capacity of 467 beds.¹²²

121 Standing Committee on Justice and Community Safety (2009), *Inquiry into the delay in the commencement of operations at the Alexander Maconochie Centre*

122 AMC Monthly occupancy report as provided to OICS

APPENDIX 3: DETAINEE DEMOGRAPHICS

All data was supplied by ACT Corrective Services.

Table A3.1: Detainee conviction status as at 1 July 2019

	Remand	Convicted	Total	% Remand
FEMALES				
Indigenous	7	2	9	78
Non-Indigenous	9	9	18	50
Total	16	11	27	59
MALES				
Indigenous	38	54	92	41
Non-Indigenous	131	212	343	38
Total	169	266	435	39
ALL DETAINEES				
Indigenous	45	56	101	45
Non-Indigenous	140	221	361	39
Total	185	277	462	40

NB: Remand means remand-only. Convicted includes sentenced and un-sentenced persons.

Table A3.2: Detainee protection status as at 1 July 2019

	Number
FEMALES	
Indigenous	0
Non-Indigenous	0
Total	0
MALES	
Indigenous	44
Non-Indigenous	170
Total	214
ALL DETAINEES	
Indigenous	44
Non-Indigenous	170
Total	214
% All detainees	46

Table A3.3: Detainee security ratings as at 1 July 2019

	MIN	MED	MAX	UNCLASS	Total
FEMALES					
Indigenous	1	8	0	0	9
Non-Indigenous	6	12	0	0	18
Total	7	20	0	0	27
MALES					
Indigenous	4	84	4	0	92
Non-Indigenous	53	277	13	0	343
Total	57	361	17	0	435
ALL DETAINEES					
Indigenous	5	92	4	0	101
Non-Indigenous	59	289	13	0	361
Total	64	381	17	0	462

Table A3.4: Receptions and discharges 01/07/18–30/06/19

	Received	Discharged
FEMALES		
Indigenous	49	57
Non-Indigenous	98	98
Total	147	155
MALES		
Indigenous	144	152
Non-Indigenous	512	529
Total	656	681
ALL DETAINEES		
Indigenous	194	210
Non-Indigenous	610	627
Total	804	837

Received includes remand and convicted. Discharged means ended at AMC for any reason (bail, full sentence, parole, not guilty, mental health, etc.)

APPENDIX 4: INTELLIGENCE & SECURITY

[This appendix has been fully redacted in the tabled version of this report pursuant to s 28 of the *Inspector of Correctional Services Act 2017*. It has been provided to the ACT Minister for Corrections and Justice Health and the Director-General, ACT Justice and Community Safety Directorate]

APPENDIX 5: DETAINEE TRAINING AND EDUCATION

The following courses are available to detainees at the AMC:

FSK10213 – Certificate I in Access to Vocational Pathways in Kitchen & Cleaning or Barista & Bakery or Manual Handling, Barista & Bakery. The course commitment is 'approximately 1 day per week over 48 weeks'.

FSK10113 – Certificate I in Access to Vocational Pathways in Kitchen & Cleaning or Barista & Bakery or Manual Handling, Barista & Bakery. The course commitment is 'approximately 1 day per week over 50 weeks'.

FSK20113 – Certificate II in Skills for Work and Vocational Pathways in Kitchen & Cleaning, or Barista, Bakery & Business Technology or Landscape. The course commitment is 'approximately 1 day per week over 50 weeks'.

AHC21216 – Certificate II in Rural Operations. The course commitment is 'approximately 1–2 days per week over 1–2 years'.

CPCCWHS1001 – Prepare to Work Safely in the Construction Industry (White Card)
– one day short course.

Civil Construction Training – seven unit course (length not specified)

Chemical Users (Prepare & apply chemicals, Transport & store chemicals)
– three day short course

Manual Handling – one day short course

Business Technology – two day short course

First Aid – two day short course (Statement of Attainment)

Art and music classes – non accredited

APPENDIX 6: ASSAULT DEFINITIONS

The following ROGS definitions were provided by ACTCS:

Serious assaults – victim subjected to physical violence that resulted in physical injuries requiring medical treatment involving overnight hospitalisation in a medical facility (e.g. prison clinic, infirmary, hospital or a public hospital) or on-going medical treatment related to injuries sustained during the assault. Serious assaults include all sexual assaults.

Serious assaults include the following specific injuries:

- Fractures.
- Cuts requiring stitches.
- Teeth broken or knocked out.

Assaults – victim subjected to physical violence that resulted in physical injuries but did not require overnight hospitalisation or on-going medical treatment.

Assaults include the following specific injuries:

- Victim taken to an internal or external hospital, infirmary, out-patients centre or medical centre to have injuries checked or for observation, but not admitted as in-patient for treatment. Exclude attendance at medical facility for mandatory medical assessment of prisoners or staff involved in incidents even if no injury received.
- Blood nose.
- Extensive bruising.
- X-ray required.
- Gouging, bites.

