

ACT AUDITOR-GENERAL'S REPORT

**THE REHABILITATION OF MALE DETAINEES AT
THE ALEXANDER MACONOCHIE CENTRE**

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PA 13/16

Mrs Vicki Dunne MLA
Speaker
Legislative Assembly for the ACT
Civic Square, London Circuit
CANBERRA ACT 2601

Dear Madam Speaker

I am pleased to forward to you a Performance Audit Report titled 'The rehabilitation of male detainees at the Alexander Maconochie Centre' for tabling in the Legislative Assembly pursuant to Subsection 17(5) of the *Auditor-General Act 1996*.

Yours sincerely



Dr Maxine Cooper
Auditor-General
17 April 2015

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SUMMARY

The Alexander Maconochie Centre (AMC) provides the ACT with its own prison. It was to be the first human rights-compliant prison in Australia. It accepted its first detainees in March 2009, having officially opened in September 2008.

From 2004 to 2009, ACT Government statements and documents, which presented the philosophy for operating the AMC, consistently emphasised the importance of rehabilitation. A range of rehabilitation objectives were presented: reducing offending behaviour; and encouraging detainees to seek self-improvement, fulfil their potential and lead successful lives in the community.

In *The road to the ACT's first prison was paved with rehabilitative intentions*, Canberra Law Review (2012) MacKay stated:

... despite the debates which considered arguments in favour of and against the building of a prison, what was consistent was the ACT's commitment to the rehabilitation of offenders The ACT is thereby revealed as exceptional as this ideological commitment to rehabilitation as a goal of imprisonment does not exist in other Australian jurisdictions.

In the quarter to September 2014 there was a daily average of 334 detainees in the AMC. This is about one per cent of the 34 000 detainees in Australian prisons and just under 0.1 per cent of the ACT population. Of the 334 detainees, 316 (95 per cent) were male.

Male detainees are the focus of this performance audit as female detainees were the subject of an independent review in 2014 by the ACT Human Rights Commission.

The AMC has a range of facilities on the one site including: residential cottages; a management unit for behaviour management; a crisis support unit for detainees experiencing mental illness; a transitional release centre for detainees who are shortly to leave the AMC; and the Hume Health Centre, operated by ACT Health in conjunction with ACT Corrective Services.

Overall conclusion

The Alexander Maconochie Centre (AMC) is a relatively new prison. It incorporates innovative, human rights planning and design, expected to provide an environment to support and foster detainee rehabilitation. This has been compromised due to its relatively small size, multiple classifications, detainee association issues, mixed genders and the unexpected adverse affects of the interaction of these factors with the AMC's design. Lack of continuity in senior management in the first few years of operation contributed to the difficulties.

More recently management practices have been effective in fostering improvements including a 'culture change', which emphasises respect in detainee and staff relationships, and have resulted in reductions in the use of force and lockdown hours. These improvements contribute to a healthier context for rehabilitating detainees.

AMC planning for rehabilitation is ineffective as there is no rehabilitation planning framework, no evaluation framework and no finalised case management policy framework. With respect to management practices, while there have been improvements, there are inadequacies that need to be addressed including improving business planning, internal performance measures and routine quality assurance and evaluation of programs.

As the prison population has increased, the ACT's detainee costs per day and utilisation rates have trended towards the Australian average. However, determining the effectiveness or efficiency of rehabilitation is problematic as there are no generally accepted comprehensive performance measures that can be used for this purpose and there is limited information on rehabilitation costs. Developing these measures will require a national approach and it would be unreasonable to expect the ACT to invest heavily in this given that it is a small jurisdiction with only one prison.

Due to the lack of comprehensive performance measures and cost information an overall assessment of effectiveness or efficiency of AMC operations with respect to rehabilitation was not able to be made. However, the proposed levels of rehabilitation activities and services, as anticipated in planning (prior to the opening of the AMC), were assessed and found to be inadequate. Importantly this means a 'structured day' with 'purposeful activity' is not being achieved for many detainees. It is therefore likely that some detainees are bored and this can compromise their rehabilitation.

The information management systems used at the AMC are inadequate. While action is underway to make improvements, it is important that priority be given to making the necessary changes as quickly as possible.

Chapter conclusions

REHABILITATION PLANNING

The ACT Government has emphasised the importance of rehabilitating sentenced detainees in the AMC operating philosophy and in legislation. Planning and managing rehabilitation in the AMC is particularly complex and challenging due to the AMC being relatively small and an all-purpose prison. Furthermore, the profile of detainees is very different to that anticipated in the *Vocational Education and Training and Rehabilitative Programs at the Alexander Maconochie Centre* (2007) (the 2007 delivery strategy) and this has significantly affected activities and services in the AMC.

ACTCS officers advised that, with respect to rehabilitation, their planning priority has been on activities and services for detainees with substance abuse and mental health issues, and vocational education and training. While these are important areas, there is a need for rehabilitation planning to be better integrated and guidance material provided to direct activities and services. The out-dated 2007 delivery strategy needs to be replaced with a rehabilitation

planning framework that reflects the reality of the AMC operating environment, has forecasts of the detainee population profile, and provides guidance on how to achieve a 'structured day' with sufficient 'purposeful activity' for detainees.

Additionally, there is a need for a rehabilitation planning framework to articulate why, what and how programs should be delivered. This includes employment programs, for which it is important to clarify the role of commercial or business enterprises ('prison industries') in providing employment for detainees.

IMPROVEMENT PLANNING AND REPORTING ON PERFORMANCE

Developing comprehensive performance measures for determining the success or otherwise of rehabilitative activities and services provided in prisons is problematic as a wide range of factors, including those outside the control of the prison, influence a detainee's rehabilitation. There are no nationally agreed, comprehensive rehabilitation performance measures available to facilitate the ACT Government determining whether its strong emphasis on the rehabilitation of detainees is being achieved and if efforts to rehabilitate detainees are reducing reoffending rates or improving ex-detainees' prospects after release.

ACTCS does not have an established business planning discipline for its AMC rehabilitative activities and services although it has recently commenced undertaking business planning. It is important that this continues so all improvement priorities can be consistently translated into action. ACTCS internally reported performance measures need to be developed and integrated into the business planning process so that progress can be evaluated and improvements made when necessary.

The efficiency measures that are available which allow comparisons between jurisdictions show that the ACT's detainee costs per day, and utilisation rates have all trended towards the Australian average over the last five years, from having been the least 'efficient' of all jurisdictions in 2009-10. However, the change may primarily relate to the increase in the ACT detainee population. Although some information is available on the costs associated with the delivery of rehabilitation, without measures of effectiveness it is not possible to determine whether rehabilitation is being achieved efficiently.

Given that comprehensive performance measures are not yet available, undertaking evaluations is particularly important. However, there is no evaluation framework for AMC rehabilitative activities and services. Although some evaluations are undertaken, this is not done routinely. Auditing and quality assurance need to be increased to allow program-specific deficiencies to be identified and addressed systematically.

There is a need to segregate different cohorts of detainees and specific individuals in prisons. This, combined with the physical design of the AMC, an all-purpose mixed gender prison, with a detainee profile that is significantly different from that envisaged prior to opening, have resulted in access to some rehabilitative activities and services being constrained. The major changes to

be made to the design, through the addition of new buildings, are likely to improve access. It is important that the effectiveness of the changes on the rehabilitation of detainees be evaluated.

INDIVIDUALISED REHABILITATION

Case management plans have an important role in the rehabilitation of detainees. While the need for a case management policy framework, to guide case managers' practices in the AMC was first identified in 2007, five years after the AMC received its first detainees there is no finalised case management policy framework. A draft *Case Management Policy Framework* (July 2014) has been prepared. It needs to be updated and finalised to guide desired, and prevent unwanted, practices.

There have been improvements in case management administration including increased contact between detainees and their case managers, improved timeliness of assessments and improved quality of case notes. However, inadequacies in case management supervision and the coordination of, and communication between, those who contribute to case management needs to be addressed. Guidance on how this is achieved could be given in the finalised case management policy framework.

While the individual needs of male detainees in the AMC are met to varying degrees and Aboriginal and Torres Strait Islander detainees have additional support, there is a need to give specific consideration to detainees with physical or intellectual disabilities and those from culturally and linguistically diverse backgrounds. Accordingly, data needs to be collected on these detainees to determine their support needs and inform their case management plans. The finalised case management policy framework could provide guidance for the collection of this data.

There are inadequacies in the ACTCS information management system (JOIST). These need to be addressed quickly as this system is restricting the ability of ACTCS to better manage the AMC and make timely improvements.

EFFECTIVENESS OF REHABILITATION PROGRAMS

Improvements have been made in AMC operations in the last two years; there has been a reduction in staff overtime, an improved ratio of planned to unplanned leave, reductions in the use of force and lockdown hours, and a decline in detainees' length of stay in the Management Unit (facility for specialist supervision of detainees). This, coupled with a 'cultural change' that is underway provides an improved rehabilitation environment. However, despite these improvements, it is not possible to determine if rehabilitation planning and delivery is becoming more effective as the necessary information to determine this is not available.

The Level of Service Inventory-Revised (LSI-R) assessment, already used in the AMC, could be used more effectively in case management. While LSI-R reliability historically (pre-2012) has been questionable, it can be managed through ensuring assessors are trained and quality assurance

measures are implemented. Furthermore, improving ACTCS information management systems will assist in LSI-R assessments being better used.

Although management information on detainee activities and services is limited, that which is available indicates that detainee participation in some purposeful activities gradually increased from 2012 to 2014. This occurred as the detainee population increased. However, programmed activity and participation levels are substantially lower than that planned in the 2007 delivery strategy. ACTCS officers recognise that the 'structured day' is not being achieved for many detainees. The 'structured day' and sufficient 'purposeful activity' need to be defined in ACTCS policy. Without a 'structured day' with 'purposeful activity' there is a risk that detainees will be bored and this can undermine rehabilitative effort.

Key findings

REHABILITATION PLANNING

Paragraph

Prior to the opening of the AMC successive ACT Ministers had affirmed the Government's commitment to the rehabilitation of detainees as a primary, although not the paramount, purpose of the AMC. Uniquely in Australia at the time this commitment was expressed in legislation. 2.22

Although the ACT Government's operating philosophy for the AMC has a strong emphasis on detainee rehabilitation, and this is reflected in legislation, there is no overarching rehabilitation framework to guide the overall coordination of rehabilitative activities and services. Some other jurisdictions have clearly articulated rehabilitation frameworks. Furthermore, plans used by ACTCS that could be part of a rehabilitation framework are taking a considerable time to be developed. 2.53

The *Vocational Education and Training and Rehabilitative Programs at the Alexander Maconochie Centre* (the 2007 delivery strategy) presents the theoretical basis for rehabilitation programs and for the planning of criminogenic programs for detainees in the AMC. However, the independent *Review of Program Delivery in ACT Corrective Services* (2013) identified that: there is no criminogenic program delivery framework within which individual programs sit; and the design of the three main criminogenic programs (the Family Violence Self-Change, Cognitive Self-Change, and the Adult Sex Offender) being implemented at the time did not meet independent standards for the design of those programs. In particular, there were significant shortcomings with respect to the Family Violence Self-Change program. This program is no longer run. The Domestic Abuse Program superseded it in November 2013. 2.67

ACTCS advised that services and programs that support detainees with substance abuse and mental health challenges have been an improvement focus following reviews by Hamburger (March 2011) and the Burnet Institute (April 2011). 2.90

From the early planning for the AMC, through to its opening in 2008 and its subsequent operation in 2009, the opportunity for employment for detainees at the AMC has been identified as an important component of their rehabilitation and integration into the community. 2.94

The ACT Government has identified a range of benefits to be realised through detainee employment, such as the development of detainees' skills, work ethic, motivation and rehabilitation, reparation to the community, and a reduction in AMC running costs. While there have been service developments such as the New Employment Opportunities Program in 2010, there is no up-to-date employment framework. The last such framework was the *Industries Plan* (2008) which has not been implemented. Without an up-to-date framework there is a significant risk that appropriate work opportunities for detainees will not be developed or offered to realise the benefits identified by the ACT Government. 2.103

The role of commercial or business enterprises ('prison industries') in providing employment for detainees in the AMC needs to be defined so that employment efforts can be maximised. 2.108

Vocational education and training has been provided for AMC detainees since the AMC received its first detainees in 2009. It is provided under a contract which has been modified to maximise participation by detainees through offering a variety of vocationally relevant learning opportunities and catering for different interests. 2.118

While AMC detainees are not required to participate in many daily activities, AMC-wide rehabilitation plans clearly identify the expectation that sufficiently relevant, attractive and incentivised activities and services would be offered in order to achieve a 'structured day' of 'purposeful activities' for those detainees that wished to participate. 2.141

Prior to the opening of the AMC various plans had been prepared regarding activities that would contribute to a detainee's 'structured day', and the provision of 'purposeful activity'. The plans that were prepared, however, do not adequately coordinate a sufficient quantity of activity or establish how activities proposed will be integrated to provide a 'structured day' with 'purposeful activity'. 2.145

The profile of ACT detainee population in the first five years of the AMC's operation has been substantially different to that which was used in the 2007 planning assumptions. This has resulted in: 2.149

- a larger number of higher security risk detainees than initially assumed (55 per cent of the detainee population in June 2014 compared to 26 per cent initially planned);
- a larger number of detainees needing to be segregated under a protection category including separation due to association issues (49 per cent of detainees protected status in June 2014 compared to the figure of 25 per cent initially planned);
- a larger overall number of detainees than originally anticipated (a

detainee population of 339 in September 2014 compared to 239 initially planned);

- fewer remandees as a proportion of the overall detainee population (a 28 per cent remandee population in June 2014, compared to the 37 per cent initially planned); and
- fewer low risk sentenced detainees and fewer opportunities to progress through the Transitional Release Centre (15 bed instead of 60).

All these factors undermine the continuing value of the 2007 delivery strategy since there is a very large gap between what was anticipated and what has occurred since the opening of the AMC. 2.150

The ACT has a small detainee population which is growing. Prior to the AMC commencing operations in March 2009, the ACT placed fewer adults in custody than other jurisdictions. The Australian average in 2008 was 125 per 100 000 population for sentenced offenders: the ACT's was 31 per 100 000 population. The ACT's sentenced offenders were usually placed in New South Wales prisons. In the quarter to September 2014 the ACT's sentenced offender rate had increased to 81, compared to an Australian average of 140 per 100 000. 2.152

In the first five years of AMC operation annual mean and median lengths of sentences served have generally been shorter than those originally anticipated in the 2007 delivery strategy. Between a third and two thirds of detainees released in most months over the last four years had served fewer than 30 days. It is likely that 'churn' has significantly reduced the target detainee population for rehabilitative effort. It was not evident how these changes have influenced the strategic planning of rehabilitation. 2.161

Total capacity, that is, all AMC accommodation available at a point in time, has been increased six times in the last five years through reconfiguring some areas of accommodation to ensure sufficient space for the growing detainee population. Detainee numbers first exceeded design capacity (270) in January 2012 and have been between 88 and 96 per cent of total capacity (370 in September 2014) for the past 12 months. 2.167

Using the initially 'planned for' and current 'desirable' levels of contingency in relation to the 270-bed design capacity as built, and the actual detainee numbers on-hand, it is evident that AMC utilisation levels have exceeded planned capacity, which takes account of a contingency for efficient operation, for most of the operational life of the AMC. Utilisation has been high but sub-optimal: 2.172

- since June 2009, using the 2014 contingency; and
- since November 2009, using the 2003 contingency allowances.

The AMC's high utilisation levels (in terms of planned, design and total capacity) over much of its operation have provided ACTCS officers with very limited operational flexibility to accommodate new detainees. These levels have also presented challenges in maintaining good order for existing detainees. While it is 2.175

respected that ACTCS officers have needed to give priority to maintaining a safe, secure and humane custodial environment, this has limited their ability to plan and deliver rehabilitative activities. Consequently progressing the strategic priority of encouraging change in offender behaviour has been compromised. There is a pressing need for the development of a rehabilitation framework that reflects the reality of the AMC operating environment.

Due to the lack of up-to-date planning documents there is no realistic basis to assess rehabilitative activities and services, or to determine how the senior management of the AMC confirms that the rehabilitation of detainees is taking place in a manner which meets the Government's intention. The lack of up-to-date planning documents presents a risk to the effective delivery of rehabilitative activities.

2.176

IMPROVEMENT PLANNING AND REPORTING ON PERFORMANCE

Paragraph

At the Australian Government level, progress has been limited in developing comprehensive rehabilitation performance measures that are capable of being efficiently monitored and reported. Accordingly such measures are not available for use by ACTCS.

3.24

Publically reported detainee time out-of-cells, employment and education performance indicators identify that during the period of the AMC's operation the ACT's performance has generally exceeded the Australian average, but has been decreasing year on year. However, high education and employment rates may not be a good indicator of detainee participation, or the quality or outcome of these programs.

3.33

The use of recidivism measures is a very obvious means of monitoring a key effect of rehabilitation. A two-year recidivism measure is a relatively longstanding and standardised measure. While it has limitations, it is a useful performance indicator if used consistently, and with caution, year on year or for specific cohorts.

3.36

ACTCS strategic plans focus on rehabilitation for the purpose of reducing the risk of reoffending, reducing recidivism, and achieving reparation, although these are not accompanied by performance measures. Other key purposes of encouraging detainees to self-improve and lead successful lives in the community are not stated as priorities or goals. Having these as goals would better facilitate the ACT Government's stated purposes for rehabilitation.

3.40

Given that there are no performance measures for rehabilitation in ACTCS strategic plans there is no way the ACT Government is able to directly determine whether its:

3.43

- strong emphasis on the rehabilitation of detainees is being achieved; or
- efforts to rehabilitate detainees are reducing reoffending rates or improving ex-detainees' prospects after release.

The *Report on Government Services* efficiency measures of costs per detainee per

3.53

day (operating costs and total cost including capital cost) and utilisation rates (prisoners on-hand versus prison design capacity) show that, in the period 2009-10 to 2013-14, the ACT has trended towards the Australian average. It was the least 'efficient' of all jurisdictions in 2009-10.

The level of, and change in, resources specifically for the rehabilitation of detainees at the AMC are not possible to establish as they are not discretely reported. Furthermore, inter-jurisdictional efficiency comparisons are based on all operational resources not just those relating to rehabilitation. 3.69

Efficiency relates to a combination of unit cost analysis and effectiveness. The ACT Government does not have adequate mechanisms for monitoring or reporting on the effectiveness of its rehabilitative activities and services. It is, therefore, not possible to establish whether rehabilitation is efficient. 3.70

With respect to the ACTCS response (Sept 2014) to the Hamburger Review (2011) regarding a 'structured day', ACTCS advised that it did not operate with a strict 'structured day' but 'instead applies a loose routine to ensure detainees are productively occupied'. No evidence was found that it was stated policy to provide a 'loose routine to ensure detainees are productively occupied' rather than a 'structured day' of purposeful activity. 3.77

Records of regular management meetings at the AMC were examined. These provide a qualitative account of the priorities of each business unit in the AMC. However, there is no evidence of the regular reporting of quantitative measures relating to AMC Offender Services activities, other than those required by the *Report on Government Services* and those that are reported as part of the Directorate's Statement of Performance. ACTCS senior officers advised that a new, AMC-specific monthly reporting and accountability template was being developed and that this would include 'service delivery outputs' for each business area, including AMC Offender Services. 3.88

ACTCS strategic plans highlight improvement priorities. Task-and-finish oversight arrangements have been established, for example, in relation to ACTCS's response to internal and external reviews such as the Hamburger Review (2011). However arrangements are not in place to report or achieve continuous improvement in the AMC Offender Services or more widely across ACTCS in relation to the rehabilitation of AMC detainees. 3.89

At the level of the business unit ACTCS officers confirmed that business and improvement planning in the AMC Offender Services team was to commence in 2014. However it had not been in place in recent years in this business unit. ACTCS officers provided Audit Office with a 2013 draft operational plan template but indicated it was not yet in widespread use. 3.90

Improvement planning for rehabilitation is constrained. Accordingly, it is difficult to demonstrate that all improvement priorities identified at the Executive level are being consistently translated into action in AMC operations. 3.91

Data on detainees' access to rehabilitation programs, prior to and post the new AMC buildings, needs to be collected and evaluated to inform changes to future developments at the AMC. 3.102

The meaning of the 'throughcare' of detainees in the AMC needs to be defined as the only current expression of 'throughcare' is in the draft *Case Management Policy Framework* (July 2014). Furthermore, in this framework the term is not described consistently and does not distinguish between 'throughcare' and the pilot Extended Throughcare initiative. Without clarity, there is a risk that 'throughcare' as intended in the AMC operating philosophy, is not being achieved. 3.111

The operating philosophy of the AMC stresses the importance of evaluating programs. Some are evaluated, such as programs relating to substance abuse (not considered in this audit). However, ACTCS has not routinely evaluated, audited or undertaken quality assurance procedures for many of its therapeutic, including criminogenic, programs. This and the lack of evaluation, auditing and quality assurance, present the risk that improvements are not being made which could benefit the rehabilitation of detainees and improve the delivery of programs. 3.124

Summary management reporting on the quality of the provision of vocational education and training activity in the AMC and on maintaining or improving detainee participation rates has been limited. Furthermore, there has been no discrete independent evaluation of the effectiveness of vocational education and training provision in the AMC. This presents the risk that needed improvements in the vocational education and training activity in the AMC are not identified and implemented. 3.131

An evaluation of the AMC's employment program has not occurred. Therefore it is not possible to determine the extent to which detainee employment contributes towards the objectives of the ACT Government. 3.134

There is currently no evaluation framework despite the priority in the operating philosophy for the AMC on evaluating programs related to rehabilitation. 3.137

INDIVIDUALISED REHABILITATION

Paragraph

A formal case management policy framework has been a stated priority since April 2007. However, a draft *Case Management Policy Framework* (July 2014) was only recently developed. In the absence of a finalised framework, AMC case managers have no common reference to guide their activities. 4.14

ACTCS documentation from 2007 to 2014 shows that the 'centrality of the detainee' within case planning has been evolving in terms of what this means and how it is to be achieved. The lack of a finalised case management policy framework presents a risk that inconsistent practice will occur. 4.32

Comments made by case managers and detainees indicate that there is variable 4.51

ownership by detainees of their case plans. Encouraging ownership may enhance detainees' motivation and therefore their prospects for a successful outcome from rehabilitation.

A review undertaken by the Australian Institute of Criminology of the case files of 50 detainees showed that detainees' personal goals were only noted in 14 per cent of the 50 cases. However, with respect to identifying and recording information relating to detainees' risks of reoffending, the percentages were significantly higher, for example, offending history, and alcohol and drug use were noted in over 80 per cent of cases. As there is no finalised case management policy framework to provide guidance, it is not clear if this practice is appropriate. 4.53

The case file review found that the targets in the draft *Case Manager's Guidelines* (June 2014) for the: 4.56

- completion of induction for new arrivals met the seven day target for around 90 per cent of detainees in 2011-12 and just over 80 per cent in 2013-14;
- classification of detainees met the three-week target for around 80 per cent of detainees in 2011-12 and 100 per cent in 2013-14; and
- production of a case plan met the target of completion by six weeks for just under 80 per cent in 2011-12 and around 70 per cent in 2013-14.

Given the importance of case plans priority needs to be given to improving their completion for all detainees within the target six weeks. 4.57

Completeness of records improved for information on induction and case plans: from around 45 per cent in 2011-12 to just over 80 per cent in 2013-14. While this is a significant improvement, achieving 100 per cent completeness needs to be pursued. 4.58

The review of 50 detainee case files showed that case managers' contact levels with detainees have improved from 80 per cent in 2011-12 to 92 per cent in 2013-14. 4.61

The adequacy of case notes was assessed in the review as 44 per cent in 2011-12 and 84 per cent in 2013-14. Despite this significant improvement, the scope of coverage of case notes of the detainee risks and needs did not significantly improve: it was 56 per cent in 2011-12 and 59 per cent in 2013-14. 4.64

The review of case notes by the Australian Institute of Criminology reviewer found that case managers prepare their case notes in different ways. Some are prepared as basic chronologies of events, while others provide details which facilitate a fuller understanding of the detainees' needs, aspirations and progress. It was not possible to confirm whether the different approaches to the preparation of case notes reflects different levels of interaction with detainees, different insights or different case manager approaches to writing notes. 4.65

<p>The completion of timely initial and follow up LSI-R assessments according to proposed standards in the draft <i>Case Manager's Guidelines</i> (June 2014) showed that there has been:</p> <ul style="list-style-type: none"> • a very significant increase in the number of LSI-R reassessments undertaken within 12 months; from 31 per cent in 2011-12 to 100 per cent in 2013-14; • an increase in the number of detainees with current LSI-R assessments on entry to the AMC or assessments that have been undertaken within six weeks of entry; from 70 per cent in 2011-12 to 86 per cent in 2013-14; and • a decrease in the number of LSI-R assessments undertaken within six weeks for detainees without current LSI-Rs when they enter the AMC; from 80 per cent to 67 per cent. 	4.67
<p>The timelines of the LSI-R assessments has generally improved between 2011-12 and 2013-14. Timely LSI-R assessments maximise their value in informing case management planning and review.</p>	4.68
<p>Although ACTCS case management officers described their supervisory activities, the documented evidence of these is inadequate, and does not facilitate:</p> <ul style="list-style-type: none"> • identifying individual learning and development needs or systemic issues relating to the case managers or case management; • building assurance as to the reliability of the LSI-R assessment; or • an assessment of caseload performance of a case manager or the case management team as a whole in relation to meeting minimum standards, quantitative or qualitative measures. 	4.71
<p>Communication and coordination between the programs team, the case management team and custodial officers need to be improved. This is acknowledged as an issue by ACTCS officers. Improved communication and coordination would enhance the ability of ACTCS to support detainees.</p>	4.79
<p>Information on detainee access to programs is inadequate. While this is the case, that which exists indicates that access for some detainees is problematic. However, access to programs is not solely determined by the capacity of AMC Offender Services to provide a program as detainee readiness is equally important.</p>	4.82
<p>While the draft <i>Case Management Policy Framework</i> (July 2014) facilitates the capturing of data on Aboriginal and Torres Strait Islander peoples, it does not facilitate the capturing of data on detainees with physical or intellectual disabilities or those from culturally and linguistically diverse backgrounds.</p>	4.99
<p>Considerable support is provided for Aboriginal and Torres Strait Islander detainees, ranging from specific programs for indigenous people to having access to an Indigenous Liaison Officer, an Indigenous Case Manager and an Indigenous Official Visitor. Additionally, AMC Offender Services officers meet with the ACT</p>	4.108

Aboriginal and Torres Strait Islander Elected Body and Relationships Australia and Winnunga Nimmityjah Aboriginal Health Services provide specific services at the AMC.

Data collection on detainees from culturally and linguistically diverse backgrounds is inadequate. Given that about 16 per cent of the AMC population were born overseas (June 2014) it is important that data on this cohort be collected and used to assist in their case management and to identify gaps in service provision. 4.113

ACTCS does not collect data on detainees with physical disabilities and therefore it is not possible to determine how well this cohort is supported. 4.116

There is a risk that only screening those detainees with an apparent intellectual disability may miss detainees with less obvious intellectual disabilities. If a detainee has an apparent intellectual disability a formal assessment would be more appropriate than a screening tool. 4.128

Individualised services for detainees with a mental illness have increased since the introduction of the Corrections Psychological and Support Services unit, including the High Risk Assessment Team and the Schema Therapy Group. However, there is a need to examine whether detainees from a culturally or linguistically diverse background or those with an intellectual or physical disability could be better supported. Furthermore, it will be important for evaluations of any interventions to be undertaken so that resources are effectively targeted. 4.151

The JOIST computer system has been inadequate as it has been unable to produce the type of management information that could assist in better managing AMC rehabilitative activities and services. The initial 2012 preparatory work to improve or replace JOIST has taken time to progress. There is a pressing need to progress improvements quickly. 4.159

EFFECTIVENESS OF REHABILITATION PROGRAMS

Paragraph

The independent advice provided by the Australian Institute of Criminology for this audit supported the advice in the *Community Corrections Review for ACT Corrective Services* (Birgden) that timely follow-up LSI-R assessments may serve several purposes, including monitoring aspects of case management including changes in the risk profile of detainees. While this is the case, ACTCS advised that assessment scores should be used with caution as changes in scores can result from a range of circumstances, relating to the detainee, the environment of the detainee and the assessor. 5.16

LSI-R assessment scores are used in case management planning. However assessment scores have not been used systematically by ACT Offender Services to review the implementation of case management. For this to happen in the future, ACTCS will need to reliably administer the assessment, and there are doubts that this occurred prior to 2012. Recording data electronically will ensure LSI-R assessments, if reliable, have greater utility. 5.22

External stakeholders advised that they had observed a changing culture in ACTCS. ACTCS officers acknowledged that this is the beginning of a long journey that may take ten years. The 'culture change' is likely to have contributed to the improved operating environment at the AMC achieved by a reduction of staff overtime, an improved ratio of planned leave to unplanned leave, reduced use of force to restrain detainees, fewer lockdown hours, and shorter lengths of stay by detainees in the Management Unit. 5.42

An analysis of program timetables for the years 2012 to 2014 indicates that, in terms of timetabled program time, the three criminogenic programs (Family Violence Self-Change/Domestic Abuse Program; Cognitive Self-Change; and Adult Sex Offender) account for 44 per cent of all the timetabled therapeutic programs available each week. In 2012, 22.4 per cent of the sentenced detainee population participated in at least one of these three criminogenic programs; in 2013, it was 22.1 per cent and in 2014 it was 21.0 per cent. This means about one in five sentenced detainees is in one of the three main criminogenic programs at any one time and this is for between 2 and 2.7 hours per week. 5.58

The number of detainees in criminogenic programs significantly increased from 2012 to 2014 from 33 detainees to 44 at any one time. The number of hours per sentenced detainee per year in programs (excluding detainees in specialised accommodation units) has also increased from a total of 21 hours in 2012 to 27 hours in 2014. However, this is significantly less time than the planned time of 52 hours per detainee per year assumed in the 2007 delivery strategy. 5.59

Based on participation rates in the three criminogenic programs for each sentenced detainee (excluding detainees in the Transitional Release Centre, the Crisis Support Unit the Therapeutic Community and the Management Unit, as their custodial setting precludes their participation in these criminogenic programs), the average number of hours per detainee in all timetabled therapeutic programs for 2014 was about one hour a week. 5.60

Participation in the Adult Sex Offender Program is around the level originally envisaged (9 versus 10 per cent of all sentenced detainees). However there are far fewer participants in the Cognitive Self-Change Program than was originally envisaged (26 versus 90 per cent). Also, while the Cognitive Self-Change program has been validated as suitable for violent offenders, there has not been any delivery of programs specifically designed for violent offenders in the period 2012 to 2014, with the exception of domestic abuse offenders. Violent offenders were identified as a priority group for a specialised program in the 2007 delivery strategy. 5.64

The *Industries Plan* (2008) estimated that sentenced detainees would be available for purposeful activity for 40 hours a week (30 hours during the week and 10 hours at weekends) comprising 44 per cent AMC-based service employment, 8 per cent education and 7 per cent criminogenic program participation. A further 43 per cent of time was identified in the plan as being potentially available for employment in prison industries. These prison industries have not been developed in the AMC. 5.73

The Justice and Community Safety Directorate budget proposals and management reports indicate that the budget for detainee employment gratuities has been a limitation on the number of employment positions for detainees. Other factors include the capacity of the AMC to accommodate meaningful employment positions and the suitability of a detainee for a position.	5.81
Detainees who are available and waiting for work have been recorded as unavailable for work in data used for the <i>Report on Government Services</i> . Accordingly AMC detainee participation in employment is likely to be overstated in the <i>Report on Government Services</i> .	5.85
Information was not available to discern which factors are the most significant in affecting the reduction in the percentage of detainees in employment in the AMC. Fewer than one in two (41 per cent) participated in work in the quarter to June 2014. It is probable that the unavailability of work was a significant contributing factor.	5.90
There is no comprehensive record system to collect data (in hours) on the work undertaken by a detainee. It is therefore not possible to determine the contribution employment makes to 'purposeful activity' in a detainee's 'structured day'. However, it is very likely to be significantly fewer hours than the hours assigned to employment for detainees.	5.95
The range of employment opportunities at the AMC is limited, and has mainly been in work that contributes to the running of the prison. Employment as a means of developing detainees' skills ready for employment post-release has been very limited. Although ACTCS officers are considering how to diversify employment opportunities, this needs to be progressed quickly and reflected in an employment plan. Without such a plan there is a risk that needed employment opportunities to assist detainees' rehabilitation will not be realised.	5.98
ACTCS officers acknowledge that the allocation of employment and the progress detainees make within positions need to be more efficient and fairer. They have identified current shortcomings and are developing a new employment policy and procedures.	5.100
Enrolments in vocational education and training declined relative to the detainee population from 94 per cent in the quarter ending September 2011 to 74 per cent in the quarter ending June 2014. Furthermore, participation rates were significantly lower than enrolments. In the quarter ending September 2011 participation was 62 per cent of those enrolled and in the quarter ending June 2014 it was 72 per cent. Over the three-year period, participation rates varied between 62 and 83 per cent of those enrolled. This is an improvement on the finding in the Hamburger Review (2011) that there was an estimated 50 percent reduction between enrolment and attendance (i.e. participation).	5.108
Estimates derived from using education reports (July 2011 to June 2014) indicate that the numbers of detainees participating in one or more vocational education	5.111

and training session per month were higher, sometimes substantially higher (up to 57 per cent), than the level anticipated in the 2007 delivery strategy.

Original planning estimates in the 2007 delivery strategy anticipated that detainees would participate in education for between three and five hours a day (or 15 to 25 hours per week). Actual participation rates for the period July 2011 to June 2014, at an average of two hours a week, were significantly below the original planning estimates of 15 to 25 hours per week. 5.114

There is a lack of management information on the participation of detainees in recreation and leisure activities in the AMC. This means that it is not possible to determine whether expectations, as set out in AMC plans, or whether detainees' needs and interests, are being met. The views of detainees, officers and other stakeholders indicate that while access to recreation activities can be limited, library services were well used and highly regarded. 5.127

Family and friends' visits facilitated by the AMC visitors' centre account for an average of six hours in visiting slots per detainee per month (one-and-a-half hours per week). Separately, visiting service providers account for less than one visit per month per detainee. Coordinated by the AMC Offender Services, the complex task of managing large numbers of service provider requests for visits is now being more actively managed. The level of visits overall, from family and friends and service providers, does not account for a substantial amount of time in the 'structured day' of a detainee. 5.139

The 2007 delivery strategy proposed a daily routine with approximately six hours of scheduled activities per day, five days a week for each detainee. However, fewer than one in two male detainees is in employment and for those who are, the time spent in work is indeterminate. Regardless of whether or not a detainee is working, their 'structured day' generally comprises no more than one hour a week on average in therapeutic programs and only approximately two hours a week is spent with family and other visitors; and an average of two hours a week is spent in education. Accordingly, detainees who do not work, on average only spend five hours per week involved in the three main activities of education, therapeutic programs and visits per week. This is significantly less time than the 30 hours envisaged in the 2007 delivery strategy. There is a risk that detainees become bored in the absence of sufficient 'purposeful activity', and that this undermines rehabilitative efforts. 5.145

ACTCS officers stated that the implementation of the structured day as outlined in the 2007 delivery strategy has not proved practicable since compelling detainee participation is inconsistent with the AMC operating philosophy. In addition, the design of the AMC requires a large number of daily movements to maintain detainee separation and segregation and this affects the efficient running of programs. While the new buildings under construction may alleviate this to some degree, there is a need to consider what can be achieved with respect to a 'structured day' and 'purposeful activity' in the light of the broad operational experience gained in running formal and informal programs over the first five years of the AMC. This needs to be articulated in written policy. 5.147

Twenty five per cent (15) of the places originally planned (60) have been provided in the Transitional Release Centre. However, a larger proportion of detainees have eventuated that are classified as a higher security risk. They are not suitable for an open prison. For detainees in the Transitional Release Centre opportunities are more limited than inside the fence regarding education, and in part depending on labour market conditions, for employment too. However, therapeutic program opportunities are greater and participation rates are higher.	5.166
It is probable that remanded detainees have fewer opportunities available to them than sentenced detainees for being purposefully occupied in therapeutic and employment programs.	5.183

Recommendations

RECOMMENDATION 1 REHABILITATIVE FRAMEWORK (CHAPTER 2)

A rehabilitation framework for the Alexander Maconochie Centre (AMC) should be developed by ACT Corrective Services (ACTCS) which, among other things:

- a) reflects the profile of the detainee population;
- b) is flexible to respond to changes while providing guidance;
- c) guides the integration of rehabilitative activities and services to achieve a 'structured day' that incorporates sufficient 'purposeful activity' for detainees;
- d) provides the rationale and outlines the therapeutic programs that will be provided; and
- e) guides the provision of employment.

RECOMMENDATION 2 ROLE OF COMMERCIAL OR BUSINESS ENTERPRISES ('PRISON INDUSTRIES') (CHAPTER 2)

The role of commercial or business enterprises ('prison industries') in providing employment for detainees in the AMC should be clarified by the ACT Government. A paper for the Government's consideration, which outlines options and recommends the role of commercial or business enterprises ('prison industries') should be developed in consultation with stakeholders.

RECOMMENDATION 3 ACCOUNTABILITY AND REPORTING (CHAPTER 3)

Internal performance measures for rehabilitative activities and services should be developed by ACTCS. These measures should:

- a) reflect work already underway in response to the 2014 Review of Corrective Services Strategic and Accountability Indicators;
- b) complement those measures reported by the Justice and Community Safety Directorate (in its annual reports);

- c) be supported by the collection of data which is stored in ACTCS information management systems; and
- d) be included in business planning, be routinely monitored and guide improvements.

RECOMMENDATION 4 EVALUATION FRAMEWORK (CHAPTER 3)

An evaluation framework for rehabilitative activities and services should be developed by ACTCS which, among other things:

- a) integrates data collection, monitoring and evaluation;
- b) specifies priorities, frequency and timeframes for evaluation;
- c) guides routine programming of auditing and quality assurance work; and
- d) establishes the basis for evaluating the changes in detainees' access and completion of rehabilitation programs prior to, and post, the completion of the new AMC buildings.

RECOMMENDATION 5 THROUGH CARE (CHAPTER 3)

'Throughcare' and Extended Throughcare should be defined and incorporated into ACTCS policy.

RECOMMENDATION 6 CASE MANAGEMENT POLICY FRAMEWORK (CHAPTER 4)

The draft *Case Management Policy Framework* (July 2014) should be updated and finalised by ACTCS in a timely manner. It should, among other things, provide guidance on how to:

- a) maintain detainee autonomy while increasing the priority given to detainees' rehabilitation goals, balancing these against the community's need for protection;
- b) improve communication and coordination between those involved in supporting detainees; and
- c) collect data on all detainees.

RECOMMENDATION 7 ADDRESSING INDIVIDUAL DETAINEE NEEDS (CHAPTER 4)

Data on detainees with physical disabilities, intellectual disabilities and those from culturally and linguistically diverse backgrounds should be collected by ACTCS. This should be used to improve services for detainees in these cohorts and evaluate the effectiveness of activities and services.

RECOMMENDATION 8 ACTCS INFORMATION MANAGEMENT SYSTEM (CHAPTER 4)

The implementation of improvements to ACTCS information management systems should be accelerated to correct inadequacies as soon as possible.

RECOMMENDATION 9 IMPROVING LEVEL OF SERVICE INVENTORY-REVISED (LSI-R) EFFECTIVENESS (CHAPTER 5)

Improvements should be made by ACTCS in its use of LSI-R assessments in the AMC. These should include:

- a) improving the reliability of LSI-R assessments through training and development of assessors, and supervisory quality assurance measures;
- b) using LSI-R assessment information effectively in case management planning and implementation; and
- c) recording LSI-R assessment scores in ACTCS information management systems.

RECOMMENDATION 10 THE 'STRUCTURED DAY' AND SUFFICIENT 'PURPOSEFUL ACTIVITY' (CHAPTER 5)

What constitutes a 'structured day' and sufficient 'purposeful activity' should be defined and articulated in ACTCS policy, based on:

- a) the operational experience of the first five years of providing rehabilitative activities and services at the AMC;
- b) the desirable scale and scope of formal and informal activities; and
- c) equity of access and opportunity, taking into account the specific requirements of cohorts within the AMC including remandees, those progressing through the Transitional Release Centre, and those accommodated in separate communities or units.

Agencies' response

The Justice and Community Safety Directorate, the ACT Health Directorate, and the Chief Minister, Treasury and Economic Development Directorate were provided with:

- a draft proposed report for comment. All comments were considered and required changes were reflected in the final proposed report; and
- a final proposed report for further comment. As part of this process the Justice and Community Safety Directorate, and the Chief Minister, Treasury and Economic Development Directorate were also asked to provide comments for inclusion in the final report in the first summary chapter.

The Chief Minister, Treasury and Economic Development Directorate did not provide comments for inclusion.

Justice and Community Safety Directorate comments

ACT Corrective Services is an open and accountable organisation which works closely with a range of oversight bodies such as the Human Rights Commission and Ombudsman and which has consistently co-operated with oversight organisations as part of a series of external reviews of the prison conducted since it commenced operations just six years ago.

The Audit Office in examining rehabilitation programs focused on what it saw as three primary criminogenic programs to the exclusion of other programs such as alcohol and drug (AOD) treatment (although it did examine employment access in some detail). Designing the scope of the audit in this way has not allowed for a coherent examination of all rehabilitation service delivery. It is acknowledged, however, that the Audit Office did include information on other programs such as AOD in the audit report (although it did not analyse the effectiveness of these programs).

There are a number of issues impacting upon the operation of the AMC which have affected the capacity of ACT Corrective Services to fully achieve on the service delivery goals of the Government. Two of the more significant issues are:

- **a complex caseload.** As noted in the Auditor-General's report, the nature of the client group as foreseen in 2007 when much of the service delivery planning was conducted did not marry with the actual live-experience once the AMC began accommodating detainees from 2009 (and certainly as numbers grew rapidly from early 2013). A significantly more complex operational environment and caseload than expected has developed. Separation rates in the AMC are very high, consistently reaching 45% of all detainees. This reflects the fact that many detainees are known to each other in the community. This has meant that the aspirations of the 2007 planning in such things as program and education participation (including the structured day) have not been achievable; and
- **high detainee numbers.** The growth in detainee numbers since early 2013 (with some growth pressure evident prior to that time) has placed notable operational pressure upon the AMC and required the agency to focus on responding to this pressure. Both in terms of day-to-day operations and in planning, energy has been spent on managing numbers and identifying accommodation and management solutions - which has included both short-term (double-bunking) and long-term (new accommodation units currently under construction) solutions. While ACT Corrective Services has continued to deliver across its range of service obligations, dealing with accommodation pressures has created additional challenges for a small agency.

ACT Corrective Services acknowledges that the audit raises issues for consideration (to be addressed in a future Government response), and the Audit Office has identified 10 recommendations which it considers necessary to improve the delivery of rehabilitation to detainees in the AMC. As noted by the Audit Office, in regard to some recommendations, work is already underway. An examination of industries options (Recommendation 2) has commenced which has included a visit in November 2014 by the Minister and Corrections officials to prison

industries facilities in NSW. A long-term project to improve ACT Corrective Services information management systems (Recommendation 8 and relevant to Recommendations 3(c), 4(a), 6(c) and 9(c)) is underway.

1 CONTEXTUAL INFORMATION

- 1.1 This chapter provides contextual information on the Alexander Maconochie Centre (AMC), outlines the role of rehabilitation in a prison, and presents the objective and scope of this performance audit.
- 1.2 Prison fulfils a range of complementary and sometimes competing purposes. These include the protection of the community; the punishment of an offender including addressing society's need for retribution and reparation; and the prevention of further crime by the detention, deterrence and rehabilitation of offenders. This performance audit focuses on aspects of rehabilitation of male offenders that take place within the AMC.
- 1.3 For the purpose of this performance audit rehabilitation means achieving a change in offender behaviour that reduces reoffending and provides benefits for detainees and the community.

A prison for the ACT

- 1.4 The Justice and Community Safety Directorate's *AMC Communications Plan* (2007) explained:

A prison is needed in the ACT to:

 - replace the Belconnen Remand Centre and Symonston Temporary Remand Centre which routinely operate beyond their design capacity and which are unfit-for-purpose; and
 - bring to an end the system of transporting ACT sentenced prisoners to NSW prisons to serve their sentences, a system that is costly and provides little scope for the ACT influencing the management of those prisoners and their rehabilitation through proper case management, 'throughcare' and family contact.
- 1.5 Since 30 March 2009 remandees and sentenced offenders have been detained at the AMC. The AMC is the ACT Government's sole full-time prison and has been in operation for more than five years.
- 1.6 ACT Corrective Services (ACTCS) in the Justice and Community Safety Directorate is responsible for operating the AMC. The Minister responsible for the prison is the Minister for Corrective Services. Portfolio responsibility for the AMC transferred to the Minister for Corrective Services from the Attorney-General in 2011.

The role of rehabilitation in prison

- 1.7 According to the Productivity Commission's annual *Report on Government Services* Corrective Services in Australian jurisdictions fulfil three core purposes. Common to all jurisdictions is the provision of:

- a safe, secure and humane custodial environment;
 - an effective community-based corrections environment; and
 - a program of interventions to reduce the risk of reoffending.
- 1.8 It is widely accepted in all Australian jurisdictions that custody alone, with no emphasis on rehabilitation or reintegration into the community, does not reduce the risk of reoffending. Maintaining good order in a prison is, in all jurisdictions, of paramount importance. However there is variability as to the priority placed on rehabilitation and its purpose.
- 1.9 Corrective services offender management practice in Australia is extensively researched and informed by international research. All Australian jurisdictions are signatories to sets of routinely reviewed, standard guidelines that emphasise the need to develop services according to evidence-based practice. Evidence-based practice includes work of Andrews and Bonta who synthesised a large body of literature to create the highly influential 'Risk Needs Responsivity' model (1990). McGuire's meta-analysis resulted in 'Work works in reducing criminality' (2000). The Good Lives Model (Ward, 2004) addresses the balance between the rights of the individual detainee and those of the community with respect to protection.
- 1.10 While rehabilitation can be defined in various ways, there is an orthodox view, based on the widespread influence of Andrews and Bonta, and the 'what works' principle, that specific rehabilitative activities can achieve positive, measurable outcomes if they are well designed, targeted and implemented in accordance with their design principles.
- 1.11 Prison-based rehabilitative programs and services can be described under the following six broad program headings:
- **Criminogenic therapeutic programs.** These are targeted therapeutic programs that aim to address the criminogenic needs of the detainee, such as those arising from sexual or violent offences;
 - **Non-criminogenic therapeutic programs.** These are supportive of an offender's rehabilitation and reintegration but do not address an identified criminogenic need. The distinction between criminogenic and non-criminogenic need may be drawn differently by different practitioners and organisations;
 - **Employment.** This includes work release outside the prison, and commercial industry or employment in services within the prison;
 - **Education.** This includes literacy and numeracy, vocational education and training, and life skills;
 - **Social and recreation.** This includes planned activities, hobbies, and spiritual welfare; and
 - **Administration.** This includes daily living tasks such as attending court or doctors' appointments, visits and leave programs.

The ACT detainee population

1.12 There are differences in the ACT detainee population profile¹ compared to that of the Australian average for all jurisdictions. These include:

- **Sentence length.** For the ACT the median sentence length² has increased from around two to three years since the AMC opened. The median sentence length for all Australian jurisdictions has remained at around three years over that time³;
- **Aboriginal and Torres Strait Islander peoples.** Over the last five years the proportion of detainees in the AMC identifying as Aboriginal and Torres Strait Islander peoples has remained around two-thirds of the Australian average which is 27 per cent of the detainee population;
- **Age.** With an average (median) age below 32 years. ACT detainees are two years younger than the average (median) age for all Australian jurisdictions;
- **Gender.** Fewer women have been incarcerated in the ACT in the last five years than most other Australian jurisdictions (excepting Tasmania and Victoria for some years); and
- **Prior episodes in prison.** Between 62 per cent and 76 per cent of ACT detainees have been in prison before. For all Australian jurisdictions this is, on average, around 54 to 58 per cent.

1.13 Information available as to the nature of an offence for which an offender is sentenced is based on an offender's most serious offence. This information identifies that, of the offenders serving sentences at the AMC between 2009 and 2014:

- around 9 per cent have been sentenced for sexual offences;
- at least 26 per cent have been sentenced for acts of violence intending injury;
- around 20 per cent have been sentenced for traffic, justice procedure and security offences; and
- around 27 per cent have been sentenced in relation to acquisitive crime or drugs.

Detainee health

1.14 The Ministerial announcement in the Legislative Assembly in August 2004 identified:

... poor health, including a high incidence of mental health and substance abuse problems is prevalent among prisoners ...

¹ Comparisons are taken from ABS Prisoners in Australia census data for the years 2010 to 2014

² Sentence length here relates to maximum possible time in custody under the current sentence. This in many instances will be longer than the actual length of time served in custody.

³ ABS Prisoners in Australia 2014 Table 25 aggregate sentence length, 11 December 2014

- 1.15 The *ACT Corrective Services Drug, Alcohol and Tobacco Strategy 2006-2008* stated (page 8) that the low percentage of ACT prisoners sentenced for a drug offence as the most serious offence (9.1 per cent in 2001):

... is not indicative of the prevalence of drug use among prisoners. Some prisoners are convicted of more serious offences, with drug offences attached to their sentencing, and some prisoners' primary offence was committed while under the influence of drugs or to support their drug use.

And,

... NSW data indicates that 71.3 per cent of male prisoners and 66.7 per cent of female prisoners reported that their offences were related to their use of alcohol and other drugs [and] 66 per cent of females and around 50 per cent of males with a substance use disorder also have a mental disorder.

- 1.16 The first *ACT Inmate Health Survey* was conducted in May 2010 by ACT Health. This identified that there were high levels of use of illicit drugs and alcohol, and detainees who had had mental health assessments prior to custody.

The challenges of establishing and running the AMC

Moving from 'warehousing' to long term detention and rehabilitation

- 1.17 Prior to the opening of the AMC many ACTCS officers' experience with detainees was through the running of the Belconnen Remand Centre and Symonston Temporary Remand Centre. Detainees were held in these two centres awaiting bail, trial or sentencing until they were released or transferred to a New South Wales prison. During this performance audit stakeholders often referred to Belconnen Remand Centre as only providing 'warehousing', that is, a custodial setting where detainees are held for the duration of their period in custody and there is no attempt to rehabilitate them. It was a facility designed to move detainees through the system.
- 1.18 ACTCS officers, however, already had 18 years' experience of implementing therapeutic programs for offenders serving community orders. By definition offenders serving community-based sentences have in general committed less serious offences than those incarcerated.
- 1.19 The commencement of operations at the AMC in March 2009 brought together officers with experience of the ACT's two remand centres and community-based corrections. Custodial officers were also recruited from within the ACT and other jurisdictions. Having so many staff with different backgrounds presented challenges in the early days of the AMC as did establishing continuity in leadership in the first three years of its operation.

Prison design and planning assumptions

- 1.20 The design concept for the AMC influenced its operation and the physical layout of the site. Plans were developed for:

- accommodating in one setting all security classifications, remanded and sentenced, male and female detainees;
- 374 beds (total capacity) initially with space within the fenced area for expansion of a further 120 beds to accommodate projected needs for the next forty years;
- a ‘campus-style’ facility with a central ‘town square’, and program, education and industries blocks;
- enhanced efficiency and capability, compared to the Belconnen Remand Centre, in maintaining a safe and secure environment by incorporating into the design improved lines of sight and up-to-date security systems;
- single and double cells and group accommodation blocks (called ‘cottages’);
- a 60 bed Transitional Release Centre outside the perimeter fence; and
- no bars on windows with buildings in a landscaped setting, making for a less austere environment.

1.21 The *Vocational Education and Training and Rehabilitative Programs at the Alexander Maconochie Centre* (2007) *discussion paper and delivery strategy* (the ‘2007 delivery strategy’) detailed the planning assumptions that informed the AMC’s operating model on opening. These were:

- a mix of security classifications of six per cent Maximum, 20 per cent Medium, and 74 per cent Minimum security;
- 25 per cent of detainees to be protection status, requiring segregation beyond that needed to meet other requirements (gender, remand/sentenced, security classification);
- a ‘detainee on-hand’ figure of 239 versus a total prison capacity of between 300 and 374 at opening, providing a utilisation ratio of between 80 and 64 per cent;
- a remand population of 89 detainees (37 per cent) out of a total population of 239 at opening; and
- the Transitional Release Centre to house up to 60 low security risk detainees at a time.

1.22 The 2007 delivery strategy did not anticipate a changing detainee population or profile over time, nor did it anticipate the impact such changes might have on the delivery of activities and services.

Other Challenges

1.23 An operational review of the AMC, called for by the ACT Government in October 2009, was undertaken by a team led by Keith Hamburger during 2010 and finalised in March 2011. The ‘Hamburger Review’ (refer to paragraph 3.73), presented a large number of findings and recommendations. These provided an improvement focus for ACTCS in the first five years of the AMC.

1.24 ACTCS officers identified further issues relating to leadership and culture that ACTCS had to address once the AMC began accommodating detainees in March 2009. This included the need to develop:

- stability in the AMC and ACTCS leadership teams following a number of changes in 2009 to 2012. For example, the Hamburger Review refers to a lack of 'continuity in leadership in the key role of Superintendent' in the first year of operation;
- staff skills and experience to work in an open-campus facility while managing a range of detainee classifications. The Hamburger Review refers to 'inexperience at the middle management level in the AMC staffing structure'; and
- a specialist case management team within the AMC rather than a team of probation and parole officers initially rotated between Community Corrections and the AMC.

Audit objective and scope

1.25 The objective of this performance audit is to provide an independent opinion to the Legislative Assembly on the efficiency and effectiveness of the planning, management and delivery of rehabilitative activities and services provided in the AMC for male detainees.

1.26 Within scope for this audit are activities and services provided to detainees while they are in custody that are designed to achieve a rehabilitative effect for them. The focus of the audit is on activities and services provided, managed or co-ordinated by ACT Corrective Services, an agency of the Justice and Community Safety Directorate.

1.27 This performance audit was focused on a selection of discrete rehabilitative activities and services:

- therapeutic programs, particularly criminogenic programs;
- employment opportunities;
- education opportunities;
- recreation and leisure; and
- administrative activities, including daily living tasks such as receiving visitors.

Audit criteria

1.28 To consider the efficiency and effectiveness of the planning, management and delivery of rehabilitative activities and services provided in the AMC for male detainees the following criteria were considered:

- ACTCS rehabilitation planning. This was examined through considering if ACTCS activities and services were planned in accordance with a rehabilitative framework that is guided by a coherent strategy e.g. based on evidence-based practice; is

underpinned by lessons from what works in the AMC; and priorities are identified and implemented. Whether the planning guided activities and services to reduced the likelihood of detainees reoffending is also considered in this criteria (chapter 2);

- Management of AMC activities and services. This was examined by considering if these were targeted to have the greatest impact through individual detainees being assessed, their case management being tailored to their circumstances, and activities and services being provided to meet special needs (chapter 4); and
- Delivery of rehabilitative activities and services. This was examined by considering if intended results were achieved and whether there are performance measures (chapters 3 and 5).

1.29 The above was considered relative to the discrete rehabilitative activities and services mentioned in paragraph 1.27.

Audit approach and method

1.30 The *Corrections Management Act 2007* (Sections 56 to 62) provides for the independent inspection of an ACT correctional centre. The ACT Ombudsman, the Human Rights Commissioner and other 'entitled people' who may inspect the AMC or visit detainees were consulted to assist in focusing this audit.

1.31 Fieldwork conducted between June and October 2014, included interviews of ACTCS officers, contracted service providers, and other service providers and partners. Detainees were interviewed and surveyed and program records reviewed covering much of the operational timeframe of the AMC.

1.32 To develop an understanding of how rehabilitation was planned prior to the opening of the AMC and then implemented archived documentation dating back to 1999 was examined.

1.33 A number of established, publically available frameworks were used to guide audit fieldwork. These include, but are not limited to:

- A Human Rights approach to prison management (Coyle⁴, 2009);
- Healthy Prisons Handbook (Queensland Corrective Services, Queensland Government, November, 2007);
- Standard Guidelines for Corrections Australia (2012); and
- International standards promulgated by the international community through the United Nations, such as *Basic Principles* and *Standard Minimum Rules* for the treatment of prisoners.

⁴ Coyle A. A Human Rights approach to prison management: Handbook for Prison staff. International Centre for Prison Studies, Kings College London, 2009

- 1.34 Where possible, data referenced in the audit is based on male detainees. However, at times general data, such as that from the Australian Bureau of Statistics on detainees from culturally and linguistically diverse backgrounds, includes female data. Where this occurs it is indicated in the report.
- 1.35 This performance audit adopted the Audit Office's Performance Audit Methods and Practices (PAMPr) and related Policies, Practice Statements and Guidance Papers. These policies and practices have been designed to comply with the requirements of the *Auditor-General Act 1996* and relevant professional standards (including *ASAE 3500 – Performance Engagements*).
- 1.36 The Australian Institute of Criminology provided expertise in this audit to complement in-house auditing resources. It provided advice, undertook research to assist audit fieldwork and considered drafts of the report.

Limitations

- 1.37 The performance audit does not consider in detail:
- activities and services that focus on ex-detainees post-release, nor the pilot Extended Throughcare initiative;
 - community-based corrections;
 - the influence of sentencing, parole or reparation on rehabilitation;
 - rehabilitation of detainees in the Symonston Periodic Detention Centre;
 - health-related rehabilitation including the delivery of drug and alcohol or mental health strategies in the custodial setting. The AMC has been the subject of several reviews in these areas (Solaris Therapeutic Community reviews in 2009-11 and 2012, the Hamburger and Burnet reviews in 2011, the Birgden follow up in 2013); or
 - women detainees, given that the ACT Human Rights Commissioner published her report on the *Treatment of Women in the AMC* in April 2014.

2 REHABILITATION PLANNING

- 2.1 This chapter examines the ACT Government's focus on the rehabilitation of detainees and how this is guided through planning for the Alexander Maconochie Centre (AMC). Changes to the detainee population over the first five years of the AMC's operation are also identified in relation to the planning assumptions made prior to its opening.

Conclusions

The ACT Government has emphasised the importance of rehabilitating sentenced detainees in the AMC operating philosophy and in legislation. Planning and managing rehabilitation in the AMC is particularly complex and challenging due to the AMC being relatively small and an all-purpose prison. Furthermore, the profile of detainees is very different to that anticipated in the *Vocational Education and Training and Rehabilitative Programs at the Alexander Maconochie Centre* (2007) (the 2007 delivery strategy) and this has significantly affected activities and services in the AMC.

ACTCS officers advised that, with respect to rehabilitation, their planning priority has been on activities and services for detainees with substance abuse and mental health issues, and vocational education and training. While these are important areas, there is a need for rehabilitation planning to be better integrated and guidance material provided to direct activities and services. The out-dated 2007 delivery strategy needs to be replaced with a rehabilitation planning framework that reflects the reality of the AMC operating environment, has forecasts of the detainee population profile, and provides guidance on how to achieve a 'structured day' with sufficient 'purposeful activity' for detainees.

Additionally, there is a need for a rehabilitation planning framework to articulate why, what and how programs should be delivered. This includes employment programs, for which it is important to clarify the role of commercial or business enterprises ('prison industries') in providing employment for detainees.

Key findings

	Paragraph
Prior to the opening of the AMC successive ACT Ministers had affirmed the Government's commitment to the rehabilitation of detainees as a primary, although not the paramount, purpose of the AMC. Uniquely in Australia at the time this commitment was expressed in legislation.	2.22
Although the ACT Government's operating philosophy for the AMC has a strong emphasis on detainee rehabilitation, and this is reflected in legislation, there is no overarching rehabilitation framework to guide the overall coordination of rehabilitative activities and services. Some other jurisdictions have clearly	2.53

articulated rehabilitation frameworks. Furthermore, plans used by ACTCS that could be part of a rehabilitation framework are taking a considerable time to be developed.

The *Vocational Education and Training and Rehabilitative Programs at the Alexander Maconochie Centre* (the 2007 delivery strategy) presents the theoretical basis for rehabilitation programs and for the planning of criminogenic programs for detainees in the AMC. However, the independent *Review of Program Delivery in ACT Corrective Services* (2013) identified that: there is no criminogenic program delivery framework within which individual programs sit; and the design of the three main criminogenic programs (the Family Violence Self-Change, Cognitive Self-Change, and the Adult Sex Offender) being implemented at the time did not meet independent standards for the design of those programs. In particular, there were significant shortcomings with respect to the Family Violence Self-Change program. This program is no longer run. The Domestic Abuse Program superseded it in November 2013.

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ACTCS advised that services and programs that support detainees with substance abuse and mental health challenges have been an improvement focus following reviews by Hamburger (March 2011) and the Burnet Institute (April 2011).

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From the early planning for the AMC, through to its opening in 2008 and its subsequent operation in 2009, the opportunity for employment for detainees at the AMC has been identified as an important component of their rehabilitation and integration into the community.

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The ACT Government has identified a range of benefits to be realised through detainee employment, such as the development of detainees' skills, work ethic, motivation and rehabilitation, reparation to the community, and a reduction in AMC running costs. While there have been service developments such as the New Employment Opportunities Program in 2010, there is no up-to-date employment framework. The last such framework was the *Industries Plan* (2008) which has not been implemented. Without an up-to-date framework there is a significant risk that appropriate work opportunities for detainees will not be developed or offered to realise the benefits identified by the ACT Government.

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The role of commercial or business enterprises ('prison industries') in providing employment for detainees in the AMC needs to be defined so that employment efforts can be maximised.

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Vocational education and training has been provided for AMC detainees since the AMC received its first detainees in 2009. It is provided under a contract which has been modified to maximise participation by detainees through offering a variety of

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vocationally relevant learning opportunities and catering for different interests.

While AMC detainees are not required to participate in many daily activities, AMC-wide rehabilitation plans clearly identify the expectation that sufficiently relevant, attractive and incentivised activities and services would be offered in order to achieve a 'structured day' of 'purposeful activities' for those detainees that wished to participate. 2.141

Prior to the opening of the AMC various plans had been prepared regarding activities that would contribute to a detainee's 'structured day', and the provision of 'purposeful activity'. The plans that were prepared, however, do not adequately coordinate a sufficient quantity of activity or establish how activities proposed will be integrated to provide a 'structured day' with 'purposeful activity'. 2.145

The profile of ACT detainee population in the first five years of the AMC's operation has been substantially different to that which was used in the 2007 planning assumptions. This has resulted in: 2.149

- a larger number of higher security risk detainees than initially assumed (55 per cent of the detainee population in June 2014 compared to 26 per cent initially planned);
- a larger number of detainees needing to be segregated under a protection category including separation due to association issues (49 per cent of detainees protected status in June 2014 compared to the figure of 25 per cent initially planned);
- a larger overall number of detainees than originally anticipated (a detainee population of 339 in September 2014 compared to 239 initially planned);
- fewer remandees as a proportion of the overall detainee population (a 28 per cent remandee population in June 2014, compared to the 37 per cent initially planned); and
- fewer low risk sentenced detainees and fewer opportunities to progress through the Transitional Release Centre (15 bed instead of 60).

All these factors undermine the continuing value of the 2007 delivery strategy since there is a very large gap between what was anticipated and what has occurred since the opening of the AMC. 2.150

The ACT has a small detainee population which is growing. Prior to the AMC commencing operations in March 2009, the ACT placed fewer adults in custody than other jurisdictions. The Australian average in 2008 was 125 per 100 000 population for sentenced offenders: the ACT's was 31 per 100 000 population. The ACT's sentenced offenders were usually placed in New South Wales prisons. In the quarter to September 2014 the ACT's sentenced offender rate had increased to 81, 2.152

compared to an Australian average of 140 per 100 000.

In the first five years of AMC operation annual mean and median lengths of sentences served have generally been shorter than those originally anticipated in the 2007 delivery strategy. Between a third and two thirds of detainees released in most months over the last four years had served fewer than 30 days. It is likely that 'churn' has significantly reduced the target detainee population for rehabilitative effort. It was not evident how these changes have influenced the strategic planning of rehabilitation. 2.161

Total capacity, that is, all AMC accommodation available at a point in time, has been increased six times in the last five years through reconfiguring some areas of accommodation to ensure sufficient space for the growing detainee population. Detainee numbers first exceeded design capacity (270) in January 2012 and have been between 88 and 96 per cent of total capacity (370 in September 2014) for the past 12 months. 2.167

Using the initially 'planned for' and current 'desirable' levels of contingency in relation to the 270-bed design capacity as built, and the actual detainee numbers on-hand, it is evident that AMC utilisation levels have exceeded planned capacity, which takes account of a contingency for efficient operation, for most of the operational life of the AMC. Utilisation has been high but sub-optimal: 2.172

- since June 2009, using the 2014 contingency; and
- since November 2009, using the 2003 contingency allowances.

The AMC's high utilisation levels (in terms of planned, design and total capacity) over much of its operation have provided ACTCS officers with very limited operational flexibility to accommodate new detainees. These levels have also presented challenges in maintaining good order for existing detainees. While it is respected that ACTCS officers have needed to give priority to maintaining a safe, secure and humane custodial environment, this has limited their ability to plan and deliver rehabilitative activities. Consequently progressing the strategic priority of encouraging change in offender behaviour has been compromised. There is a pressing need for the development of a rehabilitation framework that reflects the reality of the AMC operating environment. 2.175

Due to the lack of up-to-date planning documents there is no realistic basis to assess rehabilitative activities and services, or to determine how the senior management of the AMC confirms that the rehabilitation of detainees is taking place in a manner which meets the Government's intention. The lack of up-to-date planning documents presents a risk to the effective delivery of rehabilitative activities. 2.176

Reasons for rehabilitating offenders

- 2.2 Prison fulfils a number of purposes, one of which is to provide government and the community with an opportunity to encourage a change in an offender's behaviour.
- 2.3 At its simplest, this change in behaviour may focus on reducing the likelihood of reoffending. This is enlightened self-interest on behalf of the community since the high cost of incarcerating offenders, often on multiple occasions, is borne by government and therefore the community. At \$259 a day per detainee,⁵ current average (mean) length of stay of 334 days, and 76 per cent of AMC detainees having more than one period in prison (at the AMC or elsewhere), the direct cost of a failure to reduce reoffending is high.
- 2.4 There are also other costs to society of returning un-reformed ex-offenders to the community, regardless of whether reoffending takes place⁶:
- While rehabilitation involves the notion of not offending again, it should also involve improvements in matters such as: mental and physical health, family and other relationships, spiritual well being, employment status, housing, and education.
- Society has an interest in these issues relating to the individual. At the most general level is concern for the welfare of the citizen. More narrowly, society has a concern for these domains because of the cost that the community bears in, for example, providing expensive medical care ...
- 2.5 Another reason to rehabilitate a detainee is related to human rights. Human rights are the basic rights and freedoms that allow all people to live with dignity and participate fully in civil, political, economic, social and cultural life. It has been argued⁷ that a government has an obligation to encourage and to promote this full participation, by offenders no less than other citizens, through rehabilitative activity and services, regardless of any economic cost-benefit argument.

The ACT Government's purpose in rehabilitating detainees

- 2.6 In the period 1998 to 2001 the Legislative Assembly, through its Standing Committee on Justice and Community Safety, inquired into, and reported on, the establishment of a prison in the ACT including:
- the philosophical approach to be taken;
 - whether it should be publicly or privately run; and
 - Australian and international best practice models for prisoner rehabilitation and avoidance of deaths in custody.

⁵ \$259.33 per day is the net operating expenditure per prisoner per day for the ACT in 2013-14, including all detention settings (secure, open i.e. the transitional release centre, and the Symonston Periodic Detention Centre) as published in the Productivity Commission's *Report on Government Services*.

⁶ Community Coalition on Corrections submission to the ACT Government, Dec 2006

⁷ Rights and responsibilities in Australia, National Human Rights Consultation Report, Sept 2009 ch 4

- 2.7 The Standing Committee stated in its second interim report, *The proposed ACT prison facility: Philosophy and principles* (October 1999), that:

The building of an ACT prison provides an opportunity to build on human potential, not just to build buildings. It is therefore imperative that the philosophy and principles underpinning the prison are properly developed and understood before decisions are made about the building.

- 2.8 The ACT Government announced in a media release of 4 May 2004 that \$110 million in funding would be made available for the building of a prison at Hume over the next three years.

Rehabilitation and the ACT Human Rights Act 2004

- 2.9 The 2004 ACT *Human Rights Act* preceded the building and commissioning of the AMC. The Act is referred to as the foundation of the AMC's operating philosophy. Ministers have referred to the AMC as the first Australian prison designed and built to be human rights-compliant.
- 2.10 The focus on rehabilitation, as well as safety and security, for detainees at the AMC fits well with a human rights-compliant jurisdiction. Human rights in this context are discussed in more detail in paragraph 4.88.

ACT Government ambitions - 2004 to 2009

- 2.11 The following sources articulate the ACT Government's thinking on the operating philosophy for the prison, and on the strategy and delivery plans in relation to the rehabilitation of detainees in the AMC since the May 2004 announcement:
- Chief Minister Jon Stanhope's statement to the Legislative Assembly outlining the name, rationale and operating philosophy of the new prison (24 August 2004);
 - the *AMC Communications Plan* (April 2007);
 - *Vocational Education and Training and Rehabilitative Programs at the Alexander Maconochie Centre* (the '2007 delivery strategy') developed by the Case Management and Programs Working Group of the Justice and Community Safety Directorate (2004 to 2006); and
 - Minister for Corrective Services, John Hargreaves' article: *Beyond rehab: where does the prison fit?* (July 2009).⁸
- 2.12 These documents relating to the operating philosophy for the AMC are brought together in a *Commissioning Plan*, developed in May 2008. They emphasise the benefits of rehabilitation in terms of reducing reoffending behaviour and improving the prospects of detainees, since:
- prisoners are sent to prison 'for punishment not as punishment';

⁸ Published in Current issues in Criminal Justice Vol 21 No. 1 (July 2009)

- there will be a ‘strong focus on prisoner welfare and rehabilitation’ in the context provided by the Healthy Prison model;
- ‘everyone is encouraged to improve himself or herself and is given the opportunity to do so through the provision of ‘purposeful activity’;
- ‘detainees are [to be] equipped with the skills necessary to live successfully in the community after their release;
- ‘all people can reach their potential, make a contribution and share the benefits of our community’;
- ‘throughcare’ will be achieved through seamless case management, assessment, individual case plans and the involvement of the local community and families in prisoner rehabilitation; and
- the challenge of ‘boredom and inactivity’ will be addressed by seeking to achieve ‘a prisoner’s continuous engagement in ‘purposeful activity’’, including ‘formal and informal recreation activity’.

Rehabilitation in Legislation

2.13 The *Crimes (Sentence Administration) Act 2005* and the *Corrections Management Act 2007* both identify (Section 7) the rehabilitation of detainees, or sentenced detainees, in the case of *Crimes (Sentence Administration) Act 2005*, as an object of the Act.

The ... objects of this Act are to promote public safety and the maintenance of a just society, particularly by:

- (a) ensuring the secure detention of detainees at correctional centres; and
- (b) ensuring justice, security and good order at correctional centres; and
- (c) ensuring that detainees are treated in a decent, humane and just way; and
- (d) promoting the rehabilitation of offenders and their reintegration into society.

2.14 Furthermore, Section 9(f) of the *Corrections Management Act 2007* states:

Functions under this Act in relation to a detainee must be exercised *inter alia*, as follows:

- (f) if the detainee is an offender—to promote, as far as practicable, the detainee’s rehabilitation and reintegration into society.

2.15 And Section 52(2) identifies that:

The director-general may, as part of a detainee’s case management plan, approve a detainee participating in academic, vocational or cultural education or training if satisfied it would benefit the detainee in any of the following ways: (a) by providing the detainee with suitable vocational skills; (b) by promoting the detainee’s rehabilitation or reintegration into society.

2.16 Both Acts differentiate the treatment of remandees and sentenced detainees. For example, for unconvicted remandees:

- there is a presumption of innocence;

- there is no provision in either Act that requires the Government to promote their rehabilitation and reintegration into society;
- detention is not imposed as a punishment; and
- case management plans may be prepared and maintained, but are not a requirement.

2.17 While the rehabilitation of sentenced detainees is an object of both Acts, the *Corrections Management Act 2007* also states (in Section 8):

Correctional services must be managed so as to achieve the main objects of this Act, particularly by:

(a) ensuring that public safety is the paramount consideration in decision-making about the management of detainees ...

Comparisons with other Australian jurisdictions

2.18 Inter-jurisdictional comparisons have been made regarding the ACT Government's focus on rehabilitation as expressed in legislation. There were two national reviews of Australian jurisdictions' prison-based rehabilitative programs, in 2004 and 2009. Both were funded by the Criminology Research Council and published by the Australian Institute of Criminology. The 2004 report⁹ stated that:

... affirmations of rehabilitative purposes in legislation are not only useful, but essential. These affirmations serve to place on record a government's commitment to rehabilitative ideals and also to make therapeutic purposes less vulnerable to political forces that might seek to undermine them.

2.19 The 2009 report¹⁰ identified that this had not happened in any jurisdiction with the exception of the ACT following the *Crimes (Sentence Administration) Act 2005* and the *Corrections Management Act 2007*.

2.20 *The road to the ACT's first prison was paved with rehabilitative intentions*, (MacKay, 2012)¹¹ stated that:

... despite the debates which considered arguments in favour of and against the building of a prison, what was consistent was the ACT's commitment to the rehabilitation of offenders The ACT is thereby revealed as exceptional as this ideological commitment to rehabilitation as a goal of imprisonment does not exist in other Australian jurisdictions.

2.21 The Hamburger Review (March 2011) reported 'that the operating philosophy set for the AMC represents best practice for modern correctional facilities'.

2.22 Prior to the opening of the AMC successive ACT Ministers had affirmed the Government's commitment to the rehabilitation of detainees as a primary, although not the paramount,

⁹ Howells H, Heseltine K, Sarre R, Davey L, Day A. *Correctional Offender Rehabilitation Programs: The National Picture in Australia*, University of South Australia, 2004

¹⁰ Heseltine K, Day A, Sarre R. *Prison-based correctional offender rehabilitation programs: The 2009 national picture in Australia*, Australian Institute of Criminology, 2011

¹¹ Canberra Law Review 2012 (11)1 p. 33 May 2012

purpose of the AMC. Uniquely in Australia at the time this commitment was expressed in legislation.

Subordinate legislation

- 2.23 Under sections 14 and 15 of the *Corrections Management Act 2007* the Director-General 'may make policies and operating procedures, consistent with this Act, to facilitate the effective and efficient management of correctional services'. These policies and procedures are required to be notified or available for inspection unless they are exempted on the basis they contain 'information that may endanger public safety or undermine justice, security or good order at a correctional centre'.
- 2.24 The following publically notified and exempted policies and procedures relate to rehabilitation:
- Transitional Release Centre (NI2010-576);
 - Induction policy (NI2009-130);
 - Work release (NI2012-279);
 - Prisoner library (NI2011-46);
 - Prisoner employment (NI2009-149); and
 - Prisoner remuneration (NI2009-153).
- 2.25 ACTCS officers identified other policies of relevance to rehabilitation including: General Operating (NI2010-398), Access to Health Care (NI2009-118), Aboriginal and Torres Strait Islander Detainees (NI2011-723), AMC Detainee Classification (NI2012-299), Communion Wine (NI2012-566), Detainee at Risk (NI2014-522), Management of Detainees in the Crisis Support Unit (NI2014-525), Prisoner Telephone (NI011-49), Reception and Management of Non-English Speaking Detainees (NI2014-541) and Visits (2013-468).
- 2.26 These policies relating to rehabilitation provide operational and administrative guidance.

Provision of rehabilitative activities and services in the AMC

- 2.27 Rehabilitative activities and services for AMC detainees are provided in a range of ways:
- ACTCS funded and delivered by internal staff (e.g. programs for adult sex offenders)
 - ACTCS funded and provided by external staff (e.g. education programs via a services agreement)
 - co-funded and co-facilitated (e.g. the Solaris Therapeutic Community, the SMART recovery program); and
 - funded by other ACT Government or Australian Government agencies and coordinated by ACTCS (e.g. Hepatitis ACT, Habitat Personnel).

- 2.28 Custodial officers, whose primary responsibility is the care and safety of detainees, also influence detainee rehabilitation through their interaction with the detainees for whom they are responsible. A detainee's friends and family are also potentially influential in a detainee's prospects for positive change, particularly when contact is maintained through visits, but can also have an adverse effect.
- 2.29 The community and Australian Government also fund, and in some cases provide, a range of specialised services. The ACT Government is able to influence, and to an extent coordinate, the provision of these services.
- 2.30 This audit does not explore all interactions, activities and services that could potentially lead to detainee rehabilitation. It is primarily focused on a range of specific, discrete activities and services provided directly by, or on behalf of, the ACT Government and the arrangements for influencing and coordinating the rehabilitative efforts of others.
- 2.31 The high incidence of detainees with a history of substance abuse and / or mental health issues in prison is given consideration in this audit (paragraphs 2.68 to 2.81) as improving the stability of these detainees is influential in their rehabilitation prospects. However this audit does not consider in detail the activity levels or outcomes of health-related rehabilitation, or the delivery of drug and alcohol and mental health strategies in the custodial setting.

The role of ACT Government

- 2.32 The ACT Government employs around 220 staff at the AMC. This is about 70 per cent of the ACTCS workforce (320 full time equivalent staff). There are many areas of activity elsewhere in ACTCS, such as the Courts Transport Unit, the Sentence Administration Board and community-based probation and parole officers, that provide essential services to the running of the AMC. Other Government agencies and directorates also provide essential services. These include ACT Health, which provides health services at the Hume Health Centre in the AMC, the Community Services Directorate, which provides services such as housing to facilitate effective reintegration of detainees into the community on release, and the Territory and Municipal Services Directorate assistance in the Culture and Land Management Program.

Staff working at the AMC

- 2.33 Within the AMC the largest cohort of staff is the uniformed custodial officer cohort whose primary function is maintaining detainees' safety and security. Custodial officers also carry a caseload, in the role of 'case officers', of 10 to 20 detainees. In their case officer role custodial officers have a particular interest in, and responsibility for, the detainees to whom they are appointed.
- 2.34 Detainees are allocated case managers. Upon the opening of the AMC case management was provided by probation and parole officers, initially rotated between Community Corrections and the AMC. In the last three years a team of specialist case managers has

been established within the AMC. Specific case management needs are supported through specialists, including an Indigenous Case Manager, an Indigenous Liaison Officer, a Women's Case Manager, and two pre-release Case Managers.

- 2.35 Each case manager has a caseload of approximately 30 to 40 detainees. The role of the case manager is 'to engage with the detainee at the commencement of their period of detention and to guide their progression and development within the AMC'. This may be achieved through liaising with other AMC staff and with outside agencies as well as through their regular contact with the detainee.
- 2.36 The level of contact or supervision by a case manager is determined by the detainee's willingness and response, sentence length and assessments relating to their risk of reoffending. Case managers refer detainees to programs as part of their rehabilitation although detainees have the opportunity to self-refer to some programs. Individual rehabilitation 'case plans' are developed with case managers. Case managers do not have custodial officer responsibilities.
- 2.37 Program facilitators in AMC Offender Services deliver rehabilitative programs to detainees and have specialist skills in the delivery of therapeutic programs. For example, officers specialise in particular programs, such as Adult Sex Offender program (up to 240 hours), Cognitive Self-Change program (averaging 100 hours), and Family Violence Self-Change program (100 hours in total) or its replacement in 2013, the Domestic Abuse Program (40 hours in total).
- 2.38 These are the three most extensive criminogenic programs (according to duration and hours per week) run in the first five years of the AMC operations. The Solaris Therapeutic Community, a four-month full-time residential program in the AMC, provides the most extensive non-criminogenic therapeutic program.
- 2.39 In addition to the three criminogenic programs there is a wide range of programs, generally less intensively delivered or shorter in duration. These include motivational programs, psycho educational programs (including those targeting alcohol and other drug issues), lifestyle programs and parenting programs. Many are designed and delivered in consultation and with the support of external service providers.
- 2.40 It is the responsibility of the program facilitator to assess a detainee for eligibility for the program. A program facilitator may also terminate a detainee's participation in a program for poor behaviour or non-attendance.
- 2.41 Case managers and program facilitators work in the AMC in the Offender Services and Corrections Programs Unit.
- 2.42 There are specialist staff in the Crisis Support Unit, Solaris Therapeutic Community program, and the Transitional Release Centre who provide specialist intervention. These specialist units and their programs are discussed in Chapters 4 and 5.

- 2.43 There are many other staff working at the AMC who provide specialist services or support functions that are capable of affecting the rehabilitative prospects of detainees, such as chaplains, librarians, education, health and employment staff.

The role of the community

- 2.44 The operating philosophy for the AMC emphasises the importance of detainees developing pro-social behaviour and of normalising and maintaining contact between the detainee, their family and the community. This is essential to the 'throughcare' principle (refer to paragraph 3.104) as it reduces the impact of a detainee's incarceration on the family and improves prospects of the detainee's reintegration into the community after release.
- 2.45 AMC Offender Services officers identified a wide range of organisations that interact with detainees. This is discussed in paragraphs 2.127 to 2.136.

Planning the delivery of rehabilitative activities and services

Turning rehabilitative philosophy into delivery

- 2.46 Rehabilitation plans and goals established prior to the opening of the AMC and those developed since the commencement of operations in 2009 were identified. The following information was sought: what medium term planning had occurred; was there a framework reflecting an 'integrated approach to offender management'; what was the rationale for the selection of rehabilitation programs and how did these collectively contribute towards ACTCS strategic goals and align with the operating philosophy for the AMC; and how was the delivery of activities and services monitored and evaluated.
- 2.47 AMC Corrective Services Agency officers provided examples of rehabilitation practices established in other jurisdictions. For example:
- Corrections Victoria *Reducing reoffending framework* (2004);
 - Tasmanian Corrective Services *Breaking the cycle: Best practice in offender rehabilitation 2010 to 2020*; and
 - Corrective Services New South Wales *Compendium of correctional programs* (Nov 2013) and *Compendium of assessments* (March 2013).
- 2.48 ACTCS confirmed a commissioning plan was prepared and finalised in 2008. The *Commissioning Plan* (2008) covers the physical commissioning of the AMC, that is, the assurance process for taking over the AMC buildings from contractors and the operational commissioning of services 'necessary for the effective function of the AMC'. The plan largely restates or summarises earlier documentation in its coverage of the operating philosophy and operating model and rehabilitative activities.

- 2.49 The *Delivery strategy for Vocational Education and Training and Rehabilitative Programs in the Alexander Maconochie Centre* (the '2007 delivery strategy') was reviewed in this audit. The 2007 delivery strategy is summarised in part in the *Commissioning Plan* (2008).
- 2.50 ACTCS officers referred to the 2007 delivery strategy as an 'early planning document' and identified that it is not widely recognised as a primary strategic planning document for rehabilitation but acknowledged that it had not been updated or replaced by another rehabilitation strategy or delivery plan. Instead, officers identified the following components of the current delivery arrangements for rehabilitative activities and services:
- **Manuals for criminogenic programs.** These are freestanding, practitioner manuals that define how specific programs, such as the Sex Offenders Program or Domestic Abuse Program, are to be run. One program manual is more than ten years old and was initially designed for a community setting;
 - **Service agreements** for the delivery of vocational education and training. These were initially informed by the 2007 delivery strategy. Later agreements have been informed by changes in the detainee profile and assessed need, but not by an up-to-date rehabilitation strategy;
 - **Employment policies** and procedures and an employment locations spreadsheet that enable detainees' work in AMC services (e.g. kitchen, laundry, cleaning) to be allocated, overviewed and remunerated;
 - **A case management policy framework.** It is referred to in the 2007 delivery strategy and was begun in 2011 and a draft (version 1) was developed in July 2014;
 - **National guidelines for Corrective Services.** These have been agreed and developed by all Australian jurisdictions through the Corrective Services Administrators' Council. The guidelines cover offender programs and facilitation standards (January 2013) and standards for corrections (2012); and
 - **Business planning** by the Justice and Community Safety Directorate, ACTCS and the Offender Services and Corrections Programs Unit ('AMC Offender Services').
- 2.51 During this audit these components were discussed with managers in AMC Offender Services, with officers in the corporate team of ACTCS and with other Justice and Community Safety Directorate staff. It was acknowledged that there has been no overarching strategic planning framework for rehabilitation either prior to or post the opening of the AMC. It was agreed that filling this gap is a priority. ACTCS and AMC Offender Services business and improvement planning is discussed further in paragraphs 3.84 to 3.89.
- 2.52 ACTCS officers identified work that was underway, or in an advanced stage of development, for:
- a case management policy framework that provides the operating model and key principles for the management of offenders in the AMC and in the community;

- a case manager's guide. This will be the first guide prepared and implemented specifically for the AMC;
- improvement planning and medium-term business planning. There are currently no AMC Offender Services business plans; and
- regular upwards reporting for each business unit operating within the AMC covering key performance measures and priority areas for compliance checking. Earlier versions have been piloted across most AMC business units over the past two years.

2.53 Although the ACT Government's operating philosophy for the AMC has a strong emphasis on detainee rehabilitation, and this is reflected in legislation, there is no overarching rehabilitation framework to guide the overall coordination of rehabilitative activities and services. Some other jurisdictions have clearly articulated rehabilitation frameworks. Furthermore, plans used by ACTCS that could be part of a rehabilitation framework are taking a considerable time to be developed.

Planning rehabilitative programs and services

2.54 In the absence of a rehabilitation framework (refer to paragraph 2.51) the *Vocational Education and Training and Rehabilitative Programs at the Alexander Maconochie Centre* (the '2007 delivery strategy') was used in this audit as the planning rationale guiding the establishment of rehabilitative programs since the opening of the AMC.

2.55 For example, the 2007 delivery strategy (pages 23 to 30) provides commentary on the 'What Works' evidence base for reducing offending behaviour, the objectives of proposed therapeutic programs and desired policy outcomes, and criminogenic assessment tools. Activities and services are outlined in the 2007 delivery strategy for:

- therapeutic programs, in particular three criminogenic programs (Cognitive Self-Change, Adult Sex Offender and Family Violence Self-Change programs), and other therapeutic programs including health and life-skills programs, alcohol and other drugs programs, and mental health support;
- employment opportunities, principally in services necessary for the running of the AMC;
- educational opportunities, particularly concentrating on literacy and numeracy, but also vocational education and training, and life skills, principally within the AMC;
- recreation, leisure, and spiritual support, including a gymnasium, use of the oval, the library and the arts and crafts studio, and chaplaincy and places of worship; and
- administrative activities, including daily living tasks such as attending court or doctors' appointments, and visits.

2.56 Of these activities and services, vocational education and training, and therapeutic programs are discussed in the 2007 delivery strategy in detail. There is limited information on employment or recreation and leisure, such as the rationale, delivery

arrangements and desirable activity levels. While the 2007 delivery strategy is out-dated as, for example, it is based on assumptions about the detainee population that have not eventuated, more recent documented plans that provide a framework for coordinating rehabilitative effort were not evidenced.

Therapeutic program planning

2.57 The 2007 delivery strategy outlines in broad terms the theoretical basis for the choice of programs in the section 'What works in reducing offending behaviour'. It also presents the assumptions about the detainee population that was predicted to be involved in therapeutic programs. For example, it identifies the likely sentenced detainee population appropriate for criminogenic programs, and the specific therapeutic programs that aim to address the criminogenic needs of the detainee, such as those arising from sexual or violent offences.

2.58 Change in a detainee from within, that is, self-change, is given as a key driver in undertaking rehabilitation. The operating philosophy posted on the ACTCS website in August 2010 states that:

Ensuring appropriate security is maintained, every aspect of the AMC will focus on facilitating offenders making decisions to change their chosen way of living. This will be achieved by implementing a suite of programs based on a cognitive change approach aimed at positive change in the offender's habits, beliefs, attitudes and expectations.

Criminogenic programs

2.59 Based on their offence type, it was assumed that 95 detainees at the opening of the AMC would have criminogenic needs, such that:

- 10 per cent would access the Adult Sex Offender Program;
- 90 per cent, the Cognitive Self-Change Program; and
- 50 per cent, either the Violent Offender or Family Violence Programs.

2.60 Planning assumptions anticipated that some sentenced offenders would undertake at least two of these higher intensity/longer duration programs during their period of custody. The strategy does not provide any further guidance as to the duration of programs other than to identify that sex offenders are likely to need to participate for two-and-a-half hours a week over two years.

2.61 The 2007 delivery strategy has an illustrative timetable with a total of 32 delivery hours of therapeutic programs a week, including 17 hours (53 per cent) for Cognitive Self-Change, Adult Sex Offender and Family Violence Self-Change programs. The timetable includes one Cognitive Self-Change program for a remandee group. No more than two-and-a-half hours per week are available for any one group. The remaining 15 hours of program activity in the weekly timetable relates to alcohol and other drug awareness, drug education and coping skills. Program facilitator manuals used during the first five years of

the operation of the AMC provide greater guidance on intensity and duration, participant assessment and eligibility criteria.

2.62 During 2012-13 ACTCS commissioned an independent review of its existing criminogenic programs, *The Review of Program Delivery in ACT Corrective Services*¹² (Birgden, 2013). This review assessed ACTCS therapeutic programs and was timed to take advantage of the publication of the *Australian Offender Program and Facilitation Standards* (January 2013). The review concluded that, for the longer duration programs (i.e. those over 50 hours in duration), many areas required improvement. It highlighted:

- the unsuitability of programs for their stated purpose;
- that program duration or intensity was inappropriate; and
- that there was a lack of targeting of programs at those detainees presenting the greatest risk of reoffending.

2.63 The review assessed the extent to which the design of programs, as set out in the programs manuals, met independent standards. It was found that:

- Family Violence Self-Change Program for family violence was assessed as 26 per cent compliant with standards (using NSW minimum standards for Men's Domestic Violence Behaviour Change Programs, December 2012);
- Cognitive Self-Change Program for general offenders was assessed as 86 per cent compliant with standards (using *Australian Offender Program and Facilitation Standards* of the Corrective Services Administrators' Council, January 2013); and
- Adult Sex Offenders program was assessed as 71 per cent compliant with standards (using *Australian Offender Program and Facilitation Standards* of the Corrective Services Administrators' Council, January 2013). The review identified that the 2005 scheduled review of the Adult Sex Offenders program manual (dated November 2003) was overdue.

2.64 A broader recommendation of *The Review of Program Delivery in ACT Corrective Services* (page 47) is that:

Program delivery needs to be placed within a context of an overarching program delivery framework (that explains why, what, and how programs should be delivered) with staff training and supervision to ensure a sound understanding of the rehabilitation theories being applied. The ACTCS Case Management Policy Framework will go some way in ensuring standards for case management but the ACTCS may wish to consider the development of a supplementary Program Delivery Framework for program staff that provides a logic model and is aligned with the Australian National Standards. A program logic model is based on rehabilitation theories, explains how and why certain outcomes will be achieved, and then specifies inputs, activities, outputs, and outcomes to assist in achieving agreed program delivery outcomes. A logic model ensures program integrity.

¹² *Review of Program Delivery in ACT Corrective Services*, A Birgden of Just Forensic, April 2013

- 2.65 ACTCS officers advised that an overarching program delivery framework could be part of the draft *Case Management Policy Framework* (July 2014, refer to paragraph 2.50). This draft framework, however, does not yet include the framework elements as described by Birgden.
- 2.66 While *The Review of Program Delivery in ACT Corrective Services* was concluded April 2013 ACTCS officers have advised that:
- an improvement plan relating to the many findings and recommendations arising from the review has not been developed;
 - work in developing a strategic framework for rehabilitation was currently focusing on the development of a case management policy framework; and
 - while no work had been commenced addressing the broader recommendation (refer to 2.64), progress has been made in addressing the more easily resolved issues. These are summarised in paragraph 5.65.
- 2.67 The *Vocational Education and Training and Rehabilitative Programs at the Alexander Maconochie Centre* (the 2007 delivery strategy) presents the theoretical basis for rehabilitation programs and for the planning of criminogenic programs for detainees in the AMC. However, the independent *Review of Program Delivery in ACT Corrective Services* (2013) identified that: there is no criminogenic program delivery framework within which individual programs sit; and the design of the three main criminogenic programs (the Family Violence Self-Change, Cognitive Self-Change, and the Adult Sex Offender) being implemented at the time did not meet independent standards for the design of those programs. In particular, there were significant shortcomings with respect to the Family Violence Self-Change program. This program is no longer run. The Domestic Abuse Program superseded it in November 2013.

Other therapeutic programs and services

- 2.68 The 2007 delivery strategy states (page 50) that in order for detainees to access, and benefit from, rehabilitation programs it is necessary to stabilise any mental health and/or substance issues. Participation in criminogenic programs was anticipated to be dependent on detainees being 'sufficiently stabilised' regarding their mental health and substance dependency. For example, program planners envisaged a high level of program provision focused on drug and alcohol abuse, primarily for sentenced detainees. ACTCS provides a variety of therapeutic programs to detainees to address a range of needs including substance abuse and mental health issues. These are discussed at paragraphs 2.77 to 2.90.
- 2.69 Initial program schedules proposed around half (47 per cent) of the 32 hours a week in the schedules of total program time be dedicated to addressing drug and alcohol abuse. The 2007 delivery strategy assumed that approximately 70 of the 239 prisoners on opening would require substance abuse intervention within the AMC.

Alcohol and drug use

- 2.70 The Australian Institute of Health and Welfare identifies¹³ that, on 30 June 2012, of the 30 000 people detained in Australia, 46 per cent 'reported consuming alcohol at high-risk levels'; and just over '12 per cent of prison dischargees accessed an alcohol treatment program while in prison'. These figures indicate that, although a large number of detainees consume alcohol at high-risk levels, only 26 per cent of those are accessing treatment in prison.
- 2.71 With respect to alcohol use the 2010 ACT Inmate Health Survey (the Survey) showed that:
- 33 per cent (41 of 124) of respondents consumed six or more drinks on one occasion daily or almost daily;
 - 47 per cent (56 of 124) reported having been injured as a result of drinking;
 - 16 per cent (20 of 124) reported having consumed alcohol while in prison; and
 - 24 per cent (26 of 94 who received psychiatric assessment) were dependent on alcohol.
- 2.72 The Survey showed that, with respect to illicit drug use:
- 91 per cent (122 of 124) had used at some time;
 - 67 per cent (81 of 122) had injected;
 - 74 per cent (60 of 80) had accessed community-based needle/syringe programs; and
 - 53 per cent (40 of 80) were currently on a methadone maintenance program.
- 2.73 The 2007 delivery strategy identified that, while perhaps 11 per cent of detainees would be serving custodial sentences for drug-defined offences, up to three quarters of all detainees are likely to have a history of some form of substance abuse.
- 2.74 The *ACT Drug Policies Framework for the Alexander Maconochie Centre 2013–2015*, (the Framework) notes (page 5) that, according to the Survey, '79 per cent of participants were under the influence of alcohol/other drugs at [the] time of committing the offence that led to their imprisonment'.
- 2.75 In 2010 the Burnet Institute undertook an evaluation of drug policy and services at the AMC, providing a final report in April 2011.¹⁴ The ACT Government supported (agreed,

¹³ <http://www.aihw.gov.au/prisoner-health/alcohol/> AIHW, accessed 10 February 2015

¹⁴ Stooze M, Kirwan A. *External component of the evaluation of drug policies and services and their subsequent effects on prisoners and staff within the Alexander Maconochie Centre*. Burnet Institute: Melbourne, Australia (2010)

agreed in principle or agreed in part) 47 of the 69 recommendations. As at October 2013 all but one of the 47 supported recommendations had been completed or partially completed. Of those recommendations that had been 'noted' a number had been progressed to completion.

- 2.76 The completed recommendations included a number that related to the rehabilitation of detainees: use of alcohol; access to counselling services; case management; educational and employment programs; therapeutic programs; literacy; and cultural and gender sensitivity.

Services that assist detainees with alcohol and drug dependency

- 2.77 The *ACT Drug Policies Framework for the Alexander Maconochie Centre 2013–2015* (the Framework, page 3) 'sits within the broader context of the ACT Alcohol, Tobacco and Other Drug (ATOD) Strategy 2010–2014'. The ATOD Strategy is underpinned by harm minimisation which has guided the National Drug Strategy since its implementation in 1985 (the Framework, page 3).

- 2.78 Drug treatment and support services in the AMC are delivered by Justice Health Primary Services, the Alcohol and Drug Service (part of ACT Health) and the non-government sector partnering with ACTCS. Partnering with non-government sector organisations assists in the provision of throughcare, enabling an easier transition into the community on release (the Framework, page 5).

- 2.79 Drug treatment and support services provided to AMC detainees include: assessment; information and education; counselling (refer to Table 5-3); support and case management; withdrawal management (detoxification); and rehabilitation.

- 2.80 Programs offered through AMC Offender Services include:

- the First Steps Relapse Prevention Program, facilitated by ACTCS officers;
- SMART (Self Management and Recovery Training), co-facilitated by ACTCS officers and Directions ACT;
- the Solaris Therapeutic Community Program, a full-time four-month program within AMC, co-facilitated by ACTCS officers and Karralika;
- Harm Minimisation, co-facilitated by ACTCS officers and Directions ACT;
- other Alcohol and Other Drug (AOD) programs including:
 - specialist counselling from Directions ACT AOD counselling (funded by ACTCS) and ACT Health Alcohol and Drug Service;
 - Social Emotional Wellbeing (Winnunga Nimmityjar Aboriginal Health Service); and

- Gugan Gulwan AOD support worker (Aboriginal and Torres Strait Islander detainees under 25 years).

2.81 Additionally detainees are able to access visits by Alcoholics Anonymous, ACT Hepatitis Resource Centre, Directions ACT and Karralika. Case managers also provide support to detainees addressing alcohol dependency.

Mental health

2.82 The Australian Institute of Health and Welfare identified¹⁵ that on 30 June 2012, of the 30 000 people detained in Australia, 19 per cent of 'prison discharges were offered treatment for mental health issues while in prison' while 38 per cent of prison entrants 'reported having been told that they have a mental health disorder'. In the ACT, the 2010 Inmate Health Survey shows that the majority of respondents (refer to Table 2-1) had mental health issues.¹⁶

Table 2-1 Detainee mental health

Mental health indicator	Number of respondents	Percentage
Formal psychiatric assessment at some time	94	70
Ever told they have Attention Deficit Hyperactivity Disorder	25	27
Ever had suicidal thoughts	54	40
Ever attempted suicide (of those who had ever had suicidal thoughts)	37	69
Ever had a head injury where you became unconscious	84	62
Dependant on alcohol	26	24
Dependant on drug other than alcohol	52	49

Source: ACT Inmate Health Survey 2010

2.83 The ACT Inmate Health Survey 2010 also stated:¹⁷

Prison inmates are characterised by disadvantage, with histories of disrupted family and social backgrounds; abuse, neglect and trauma; poor educational attainment and limited employment opportunities; unstable housing; parental incarceration; juvenile detention; dysfunctional relationships and domestic violence; and previous episodes of imprisonment it is hardly surprising that prison inmates are further characterised by physical and mental health far below that enjoyed by the general population'.

¹⁵ <http://www.aihw.gov.au/prisoner-health/alcohol/> AIHW, accessed 10 February 2015

¹⁶ Epidemiology Branch, ACT Government Health Directorate (2011), *ACT Inmate Health Survey 2010: Summary results*, ACT Government, Canberra, ACT, p 11.

¹⁷ Epidemiology Branch, ACT Government Health Directorate (2011), *ACT Inmate Health Survey 2010: Summary results*, ACT Government, Canberra, ACT, p 4

- 2.84 The 2007 delivery strategy identified (page 51) the need for Health and Life Skills Programs on the basis of the 2001 NSW Inmate Health Survey. These were to be developed in consultation with local providers.
- 2.85 There are currently a number of services available to detainees who require support for mental illness. These include the: Crisis Support Unit, Corrections Psychological and Support Services and a range of programs and visiting organisations and services.
- 2.86 The Crisis Support Unit (refer to paragraphs 4.134 to 4.140 and 5.31 for further detail) is designed as a short stay, low stimulus, secure environment where detainees at risk of self harm can be managed in such a way that they cannot continue to self harm (or harm others). This is to meet the very specific needs of a small number of detainees, those in acute (self-harming) crisis.
- 2.87 Corrections Psychological and Support Services (refer to paragraph 4.134) support detainees with mild to moderate mental illness or mental health issues, including those who are temporarily accommodated in the Crisis Support Unit.
- 2.88 The Hamburger Review (page 112) found that:
- ... insufficient general counselling services has impacted adversely on detainee behaviour outcomes, increased detainee tension in the AMC, increased the level of difficulty of the already challenging role of Correctional Officers and other professional staff with the AMC and contributed to detainee incidents. It has an overall adverse impact on the capacity to achieve a healthy living environment for detainees and a healthy work place for staff’.
- 2.89 In ACTCS’s Progress Report¹⁸ on the Knowledge Consulting Report (October 2011) insufficient counselling services for detainees was being addressed through a review of counselling processes and the trial of an intensive support Case Manager.
- 2.90 ACTCS advised that services and programs that support detainees with substance abuse and mental health challenges have been an improvement focus following reviews by Hamburger (March 2011) and the Burnet Institute (April 2011).

Motivational and other programs

- 2.91 In addition to activities and services focusing on mental health needs and substance dependencies, a broad program area referred to as ‘life skills’ was proposed in the 2007 delivery strategy and was to be provided with partner organisations. The programs proposed were:
- parenting;
 - healthy living;
 - culturally and spiritually appropriate activities and services;
 - managing the household budget; and

¹⁸ ACTCS Progress Report, The Knowledge Consulting Reports 1 and 2, October 2011, p 49, 58

- victim awareness.

2.92 There is limited guidance in planning documents on how ‘life skills’ provision was to be developed and how it would contribute to ‘purposeful activity’ levels and the ‘structured day’ of detainees. However ACTCS officers advised that in 2012-2014 a range of specific programs that align with the themes identified in the 2007 delivery strategy have been developed and implemented.

2.93 A review of program timetables from 2012 to 2014 identifies that the following programs have been run:

- Anger Management, facilitated by ACTCS officers;
- Positive Lifestyle Program co-facilitated by ACTCS officers and the Salvation Army;
- Yarning, facilitated by Relationships Australia;
- Seasons for Growth, facilitated by AMC Chaplaincy services;
- Legal literacy, co-facilitated with ANU College of Law and ACTCS officers; and
- Being a dad and being a man, and Dads and strong emotions, co-facilitated by ACTCS officers and Marymead staff; and
- SHINE for kids, supporting families of detainees.

Developing employment programs

2.94 From the early planning for the AMC, through to its opening in 2008 and its subsequent operation in 2009, the opportunity for employment for detainees at the AMC has been identified as an important component of their rehabilitation and integration into the community.

2.95 The Ministerial announcement on 24 August 2004 proposed that:

The new prison will provide vocational training and employment opportunities to aid rehabilitation and reduce prison costs. Initially work will primarily be domestic industries, such as grounds, facilities, maintenance, cooking and cleaning. Space within the prison has been identified to permit the possible development of limited horticultural activity, facilities maintenance, waste management and recycling and to provide other work opportunities for prisoners.

2.96 The *AMC Communications Plan* (2007) stated:

Vocational training, and employment opportunities will be provided to aid rehabilitation, develop prisoners’ work ethics and reduce prison costs. It will also provide a source of prisoner income, benefit the community and provide improved training and work skills that are appropriate and transferable to the workforce in the Canberra region.

2.97 The *Commissioning Plan* (2008) incorporated the *Industries Plan* (2008). The *Industries Plan* (2008) identifies probable service employment categories for activities in the AMC and identifies how much time may be available for employment in other AMC-based

industries unrelated to the running of the AMC. On the basis of projections for a sentenced detainee population of 152, the *Industries Plan* (2008) stated that:

- partnerships between Government agencies will be developed to promote reparation to the community through the deployment of prisoner labour;
- industries in the AMC should not provide unfair competition to the private sector. Prisoner labour will not be used to replace jobs occupied by others in the community;
- the impact of AMC-based service employment should not adversely affect the time available for detainees for other 'purposeful activity' in their 'structured day';
- a sentenced detainee would have 40 hours a week (30 hours during the week and 10 hours at the weekend) in which to pursue purposeful activity, of which AMC-based service employment would occupy 42 per cent of a detainee's time, education would occupy a further 8 per cent and criminogenic programs, 7 per cent. The remainder (43 per cent) of a sentenced detainee's time would be available for industry employment in such areas such as laundry services, a plant nursery, the manufacture of corporate gifts, and waste recycling systems.

2.98 The *Justice and Community Safety Directorate Annual Report 2009-10* (page 52) states:

The AMC has a flexible workshop area (Industry Skills Centre) that can be configured to provide realistic employment experiences and to carry out a range of manual, building and construction, textiles and mechanical process manufacturing or assembly activities according to enterprise business requirements. The Industry Skills Centre is also supported with a range of relevant Vocational Education and Training programs and courses.

2.99 It also identifies that, in May 2010, the New Employment Opportunities program was launched. This replaced the ACTCS Prisoner Employment Program that had been operating since 2009. The New Employment Opportunities program assists detainees gain employment on release by providing training while in custody and by making links with Canberra-based employers. A work release policy (NI2012-279) and paid work release program were launched in 2012 for Transitional Release Centre based detainees, superseding the New Employment Opportunities program. This affects five per cent of detainees accommodated in the Transitional Release Centre, who are able to seek leave for employment purposes (refer to paragraph 5.159).

2.100 ACTCS officers advised that virtually all sentenced detainees who can work do work with nearly all of these people appointed to duties relating to the running of the AMC, such as cleaning, laundry, maintenance and working in the kitchens. A very small number of detainees work in the community in regular jobs. Work release is discussed in paragraph 5.159.

2.101 AMC-based detainee work attracts a gratuity, based on three bands and according to the number of hours of duties allocated. An employment policy¹⁹ provides for:

¹⁹ Corrections Management (Prisoner Employment) Policy 2009 NI2009-149

... any combination of approved program activities [including employment] to be undertaken as having equal merit and rehabilitative value in relation to an approved Prisoner Rehabilitation Plan [i.e. case plan].

2.102 ACTCS officers identified a number of challenges, some unique to the AMC, that have influenced the planning and delivery of employment activities:

- nurturing or developing work ethic is an explicit objective but is a major challenge given the menial nature of many current employment duties and the varied backgrounds of detainees;
- gratuity levels are low in comparison to minimum wage levels in the labour market. However the maximum that can be deposited in detainees' trust accounts by friends and family is \$150 a week. This is very high compared to other jurisdictions, and may remove the motivation to work for some detainees. For others securing the maximum available level of gratuities is a strong motivation; and
- detainee success in securing employment in the labour market is difficult in the ACT even when economic conditions are buoyant. Difficulties are due to: the nature of the local jobs market, that is, the pre-dominance of 'public administration and safety', and 'professional, scientific and technical, health care and social assistance' employment sectors; perceived risks associated with employing detainees; and the need for an employer sponsor to vouch for a detainee at all times when on work release.

2.103 The ACT Government has identified a range of benefits to be realised through detainee employment, such as the development of detainees' skills, work ethic, motivation and rehabilitation, reparation to the community, and a reduction in AMC running costs. While there have been service developments such as the New Employment Opportunities Program in 2010, there is no up-to-date employment framework. The last such framework was the *Industries Plan* (2008) which has not been implemented. Without an up-to-date framework there is a significant risk that appropriate work opportunities for detainees will not be developed or offered to realise the benefits identified by the ACT Government.

Prison industries

2.104 Several ACTCS officers advised of their experience of prisons where commercial industries employment, otherwise known as 'business enterprise' employment, was undertaken. They reported that it made a significant contribution to maintaining good order and to the motivation and wellbeing of detainees. Such employment potentially provides a wide range of vocational skill development opportunities.

2.105 Officers considered the lack of business enterprise activity at the AMC as a major lost opportunity to provide 'purposeful activity' as part of a 'structured day'. This same point is made in several places in the ACT Human Rights Commissioner's report into the *Treatment of Women in the AMC* (April 2014). Detainees also made similar points (refer to Table 5-4).

- 2.106 The Productivity Commission's 2015 *Report on Government Services* identifies that just under a third (30 per cent) of all detainee employment nationally is in prison-based commercial or business enterprise activity (refer to paragraph 5.72).
- 2.107 ACTCS officers expressed concerns, including those expressed in the Hamburger Review (page 256), about any potential commercial industries operating in the AMC:
- a) that the community may see it as exploitative of vulnerable people;
 - b) the possible displacement of local business opportunities through the subsidisation of detainee business activity;
 - c) that it may distort therapeutic and other operational priorities; and
 - d) that ultimately, a business enterprise is a difficult undertaking, particularly in the AMC due to segregation challenges.
- 2.108 The role of commercial or business enterprises ('prison industries') in providing employment for detainees in the AMC needs to be defined so that employment efforts can be maximised.

Vocational education and training programming

- 2.109 The ACT Government's operating philosophy for the AMC emphasises the need to make good the deficit in vocational education and training, in relation to both detainees and the ACT's custodial facilities. For example in his 2009 article *Beyond Rehab – Where does the Prison Fit?*, the Minister for Corrective Services restated key arguments dating back ten years, originally reported by the Standing Committee on Justice and Community Safety, that a prison in the ACT will address:
- the need to facilitate rehabilitation and restoration by providing an opportunity to case manage prisoners' social, emotional and educational needs in order that they would be less likely to reoffend upon release; and
 - the inadequate facilities which existed in the ACT to provide training, education programs or purposeful activities for detainees on lengthy remands [then at the Belconnen or Symonston remand centres].
- 2.110 The Chief Minister's announcement concerning the prison on 24 August 2004 stated:
- Improvements in prisoner educational attainments will be targeted, in recognition that offenders are frequently long-term unemployed and have poor records of educational attainment. Without a minimum level of education, offenders will forever find it difficult to escape from the margins of our society.
- 2.111 The *Corrections Management Act 2007* requires the ACT Government to provide 'reasonable access to education' in the AMC. Education is identified as an entitlement, not a privilege, and so cannot be withheld as a punishment. Remandees and sentenced detainees are equally entitled to education. A detainee's case management plan may include the detainee participating in academic, vocational or cultural education or training, although this is not a requirement in a case management plan.

- 2.112 ACT Government working groups undertook planning of vocational education and training programs in 2004 to 2006. The *Vocational Education and Training and Rehabilitative Programs at the Alexander Maconochie Centre* (2007) sets out the planning assumptions that led to the provision of Vocational Education and Training services at the AMC from 2009 onwards.
- 2.113 The education service is provided under a service contract. The initial planning assumptions in the 2007 delivery strategy that informed the first contract:
- focus on a group of 150 sentenced detainees of the total detainee population of 239 discounting the participation of remandees;
 - indicate 55 detainees would be eligible for transitional release i.e. accommodated 'outside the fence' and will access education provision in the community; and
 - presume full participation by the 95 remaining detainees in education, at 20 hours x 48 weeks per detainees, that is 91 200 hours per year after an initial gearing up period.
- 2.114 The first contract for services, established 15 Jan 2008, was with Auswide Projects, part of Auswide Colleges, a community-owned registered training organisation. This contract funded the provider on the basis of unit pricing (a price per detainee hour). It identified different planning assumptions to those in the 2007 delivery strategy for the level of provision anticipated. It included participation rates of sentenced and remanded detainees using:
- average participation rates from other jurisdictions, of 50 to 60 per cent participation of an anticipated 152 sentenced detainees (up to 91 sentenced detainees) and 20 per cent participation by the 72 remanded detainees (14) after two years of operation, a total of up to 105 detainees participating in education; and
 - the likely participation hours of between three and five hours per detainee per day, resulting in an estimated 64 800 to 126 000 hours per year after two years of operation.
- 2.115 The revised delivery arrangement with Auswide Colleges from 2011 to 2014 was on the basis of block funding. The contract required 90 hours of scheduled 'classes' a week for 46 weeks year, regardless of the number of detainees participating with a separate business goal of ensuring 75 per cent of eligible detainees participate in at least some form of education during the year.
- 2.116 ACTCS prepared a 'statement of requirement' in September 2013 to guide service provision from July 2014 onwards. The contract was relet to Auswide Colleges on 28 July 2014 and services were transferred to Campbell Page on 7 November 2014.
- 2.117 Throughout the 2004 to 2014 period the emphasis in education planning and contracting was on maximising participation through offering a variety of vocationally relevant learning opportunities, on numeracy and literacy embedded in all vocational education and training, and on catering for different detainee interests, including:

- the preferred provider increasing or adjusting the available courses in accordance with trends in skill shortages to meet the needs of detainees and the ACT labour market;
- making available courses such as music, art and crafts that cater for personal interest and self-development; and
- providing related services such as detainee induction and assessment, individual learning plans, accreditation of learning (when possible), learning pathways, basic preparatory education and work readiness, and provision of a quality equal to a similar community setting.

2.118 Vocational education and training has been provided for AMC detainees since the AMC received its first detainees in 2009. It is provided under a contract which has been modified to maximise participation by detainees through offering a variety of vocationally relevant learning opportunities and catering for different interests.

Recreational and leisure activities, and spiritual support

2.119 The *Corrections Management Act 2007* sets out what is defined as AMC 'minimum living conditions'. These include reasonable access to the open air and exercise, access to news and education services, and facilities to maintain contact with society, and opportunities for religious, spiritual and cultural observances.

2.120 The 2007 delivery strategy identifies that:

In addition to VET, personal interest and self-development courses such as languages and crafts may be available, particularly during the evenings, to further model pro-social use of leisure time and develop skills ...

And,

... recreation in the AMC is to be both formal, as a planned activity, integrated into the prisoner's Rehabilitation Plan [i.e. case plan], and informal, giving the prisoner the opportunity to make decisions and assume responsibility for the use of his or her time. The emphasis on physical recreation is to be on aerobic activity, rather than anaerobic activity. This activity will be facilitated by a recreation officer to improve prisoner general well-being.

2.121 The restatement of the operating model in the *2008 Commissioning Plan* (2008) proposes:

- an activity officer be rostered on duty seven days a week;
- access to the oval on a timetabled basis; and
- arts and crafts activities to take place in the education building.

2.122 In the Hamburger Review, the provision of leisure and recreation activities was considered. The review reported (page 236) that:

- there was no gymnasium and this was considered to be essential;
- there was limited detainee access to recreation activities and times; and

- ACTCS stated its intention to expand the activities program.
- 2.123 In its *Report on annual and financial reports* no. 6 (Tabled 20 September 2011) the Standing Committee on Justice and Community Safety considered it important to reinstate a gym and chapel. These facilities had been planned but not provided when the AMC opened.
- 2.124 A large gym area has since been provided in the AMC in an area originally intended for industries, and exercise equipment also provided in distributed locations around the AMC (in the Sentenced Unit, Remand Unit, Sentenced Cottages, Remand Cottage, and Women's Precinct). Access to the main gym and a haircutting area is scheduled in two one-and-a-quarter-hour blocks per detainee group per week.
- 2.125 The *Detainees' handbook* outlines the availability of library services and of religious and spiritual activity through chaplaincy services. The 2007 delivery strategy sets out the obligations, guidelines and the rationale for providing such services and support. The staff providing this support described a range of services that had been planned and developed over time in accordance with legislation and Australian Government and international obligations. Despite the absence of a dedicated chapel religious services are conducted at the AMC and detainees have ready access to religious support through chaplains from a range of faiths.
- 2.126 Plans set out intentions to provide facilities and staff to support, coordinate and encourage recreation and leisure participation and respond to individual spiritual needs. However, they do not indicate the extent to which this should complement or displace other activities as part of the 'structured day' of detainees.

Maintaining community links

- 2.127 The ACT Prison Project Office prepared a report *From Exclusion to Inclusion – a report on the role of the local community in the rehabilitation and reintegration of prisoners* (November 2002). It outlines the therapeutic value of the interaction between detainees and their family, friends and the local community. This has the potential to reduce the effect of a custodial sentence on a detainee's family, improve the rehabilitative value of programs, and increase the prospects of successful integration into the community on the detainee on release. These principles are reiterated in the operating philosophy during the period 2004 to 2007.
- 2.128 The 2007 delivery strategy confirms:
- Visits will be considered to be part of a formal program and will be available six days a week with specific periods being set aside for family visits and for professional visits. The feasibility of evening visits will be examined. The importance accorded to visits reflects their acknowledged value in the rehabilitative endeavour.
- 2.129 A draft *ACTCS Throughcare Framework* for the AMC (28 August 2007) identifies that AMC throughcare:

... embraces all the assistance offered to offenders and their families by the ACT Corrective Services staff and other agencies

... aims to establish post-release community support networks for offenders and their families, prior to cessation of the involvement by ACTCS, through a comprehensive reintegration plan

... means pro-social links with the community will be maintained ... and where supports are not in place, ... links will be established.

- 2.130 ACTCS officers also advised of the potential for detainees' rehabilitative prospects to be adversely affected by the continued association of friends and family in some circumstances.
- 2.131 The *Corrections Management (Visits) Policy* 2013 (NI2013-468) outlines arrangements for visits. Family and friends' visiting hours were revised on 1 July 2014, with a reduction in the number of visiting days from six to five, fewer slots in total for specific detainee classifications, from 30 to 20. However, the length of some visits slots was extended, and the number of detainees able to receive visitors per contact visit slot was also increased from 16 to 18 detainees. ACTCS officers advised that the new arrangements are intended to be a more efficient use of resources, as prior to 1 July 2014 some visitor slots were underused.
- 2.132 The number of family and friends' visits is recorded and reported regularly in monthly management reports (refer to Figure 5-11).
- 2.133 Other than visits from family and friends, detainees receive visits from a wide range of service providers, community organisations and people providing professional services such as legal or welfare. Services are coordinated by AMC Offender Services. Community services are available to detainees for health, education and employment, finance, family and marital support, accommodation, alcohol and other drugs, and emotional and wellbeing needs. Services are coordinated by AMC Offender Services.
- 2.134 These services are mostly independently funded and provided. The ACT Government coordinates services to meet detainee needs through the case management process, and facilitates access to detainees. However ACTCS does not directly manage the delivery of these services. Officers advised that there are very few service level agreements or contracts in place with partner organisations for these services and that they are planned and arranged by the ACT Government through Government and non-Government partner organisations.
- 2.135 A number of working groups were established prior to the opening of the AMC to enable partner organisations to inform the direction of rehabilitation. According to the ACTCS webpages, the Justice and Community Safety Directorate established a Community Reference Group to:
- receive regular briefings from the General Manager and senior staff of the AMC on the operations of the AMC;
 - provide comment and advice to the General Manager as requested;

- identify gaps in the provision of services from the community sector;
- provide advice, practical input and support in relation to detainee programs, rehabilitation, and the re-integration of detainees into the community; and in relation to partners and families of detainees; and
- disseminate relevant information about the prison and its operation to community groups.

2.136 The Community Reference Group met until 2010. Since then liaison and coordination between partners and ACTCS has been achieved through a number of program-specific arrangements. The arrangements for liaising with community organisations are discussed in paragraphs 5.133 and 5.134.

Planning for a 'structured day'

2.137 The *Vocational Education and Training and Rehabilitative Programs at the Alexander Maconochie Centre* (the '2007 delivery strategy', page 41), identifies a risk of detainee boredom and its consequences, and proposes a 'structured day' of purposeful work, programs and recreation:

Boredom and inactivity in the correctional setting encourages drug use, undermines rehabilitation objectives and threatens security and safety. It is therefore important that the prisoner's day be marked by the prisoner's continuous engagement in 'purposeful activity'. Over time, the prisoner will, through incentive-based regimes, exercise increasing levels of decision-making, assume greater levels of responsibility and will be placed in accommodation which reflects this. The means to achieve the integration of the prisoner's Rehabilitation Plans [i.e. case plan] will be a 'structured day' of meaningful work, programs (including visits) and recreation.

2.138 The 2007 delivery strategy identifies (page 66) that 'the daily routine provides for approximately six hours of scheduled activities per day. Planning for a five-day week provides for 30 hours of scheduled activities per week'. A typical daily routine is also set out for remanded detainees, Minimum security, and Medium and Maximum security detainees. Each routine identifies three program or activity slots per day.

2.139 Figure 2-1 provides a timetable of activity illustrating the 'structured day' for minimum security detainees. In the 2007 delivery strategy this cohort was identified as making up 74 per cent of all detainees. In June 2014, 45 per cent of AMC detainees were classified minimum security.

2.140 Indicative hours for activities, set out in the contract with Auswide Colleges for educational services (2008), proposed eight hours of activities per day in five activity slots: 8.30am to 10am, 10.30am to noon, 1.30pm to 3pm, 3.30pm to 5pm, and 6pm to 8pm. These are set within a 'structured day' beginning with roll check (muster) at 6.45am and ending at 8.30pm for the minimum security detainees in cottage accommodation and the Transitional Release Centre.

Figure 2-1 Illustrative daily routine showing three activity slots

Typical minimum-security daily routine
<i>Activities</i>
rise, ablutions & breakfast
medication distributed
report to program or Activity 1 ¹
visits commence
morning tea in common area
report to program or Activity 2, visits cease
lunch in common area
report to program or Activity 3, visits commence
afternoon tea in common area, visits cease
medication distributed, free time, ablutions
evening meal in common area
evening activities / performing arts, craft
prisoners in wings ²

Source: ACT Department of Justice and Community Safety, Vocational Educational and Training and Rehabilitative Programs in the Alexander Maconochie Centre, May 2007, page 65

- 2.141 While AMC detainees are not required to participate in many daily activities, AMC-wide rehabilitation plans clearly identify the expectation that sufficiently relevant, attractive and incentivised activities and services would be offered in order to achieve a 'structured day' of 'purposeful activities' for those detainees that wished to participate.
- 2.142 The Australian Institute of Criminology advised that in some other jurisdictions there is a requirement to work or participate in programs, due to prison-specific conditions. However, ACTCS officers highlighted that compelling AMC detainees is inconsistent with the need to encourage detainee self determination and self-change (refer to paragraph 4.28), and is incompatible with the principles of the operating philosophy relating to dignity and self respect.
- 2.143 The 2007 delivery strategy outlines a three-hour block of therapeutic (criminogenic) programs per week for each category of detainee. In addition, the initial Auswide Colleges contract accounts for a further three to five hours of education per day for participating detainees. The 2007 delivery strategy does not provide any estimate of the impact of other activities than education and therapeutic programs on addressing the goal of 'purposeful activity' over the course of a 'structured day'.
- 2.144 However, the *Industries Plan* (2008) considers education, programs and employment together as providing 'purposeful activity' in a prisoner's 'structured day'. Specifically, it

indicates²⁰ that AMC service employment would occupy 42 per cent of the available time of eligible sentenced detainees while education would occupy a further 8 per cent and criminogenic programs, 7 per cent. The *Industries Plan* (2008) proposes the remaining 43 per cent of the detainees' time be spent in prison industries employment. Industries being explored at the time were: laundry services, plant nursery, worm farming, textiles, corporate gifts production and water recycling systems production.

- 2.145 Prior to the opening of the AMC various plans had been prepared regarding activities that would contribute to a detainee's 'structured day', and the provision of 'purposeful activity'. The plans that were prepared, however, do not adequately coordinate a sufficient quantity of activity or establish how activities proposed will be integrated to provide a 'structured day' with 'purposeful activity'.

The need for updated planning based on the changed detainee population

- 2.146 By May 2007 it was anticipated that the AMC would open in late 2007. It opened in September 2008 and received its first detainees on 30 March 2009. All ACT sentenced detainees had been transferred from New South Wales prisons by the end of May 2009.
- 2.147 The ACT's Justice and Community Safety Standing Committee resolved, in January 2009, to inquire into the delay in the commencement of operations at the AMC and brought down its report in November 2009. The ACT Government gave a commitment (October 2009) to commission an independent review after 12 months' operation of the AMC.
- 2.148 ACTCS senior officers advised of the 'considerable complexity of detainee management experienced in the ACT'. This was attributed to the wide range of operational challenges that occurred in the first five years in relation to the assumptions stated in paragraphs 1.20 and 1.21 as:
- The security classification mix of detainees is very different to that anticipated. On 30 June 2014, of 330 detainees, there were 12 Maximum, 168 Medium and 150 Minimum security classified. This means that the higher risk groups (Medium and Maximum security) make up 55 per cent of the detainee population rather than the 26 per cent initially planned;
 - There is a significantly smaller percentage of low security risk detainees. On 30 June 2014 this was 45 per cent compared to the 74 per cent in planning assumptions. Detainees assessed as a low risk of reoffending are a lower priority for case management supervision and for some rehabilitative activities. Conversely, there are larger numbers of higher risk detainees that are likely to require higher levels of supervision and rehabilitation program participation;

²⁰ ACT Department of Justice and Community Safety Industries Plan within the 2008 *Commissioning Plan* pages 6-7

- There is a significantly larger cohort of protected (and strict protection) status detainees. This has occurred in part arising from association issues with other detainees given the relatively small population centre that the AMC serves. On 30 June 2014 there were 163 of 330 detainees (49 per cent) of this cohort compared to the figure of 25 per cent initially planned;
- There has been a significant increase in detainee numbers. This is well beyond the number of detainees used for planning purposes. In September, 2014 there was an average daily population of 339 detainees compared to the planned 239, an increase of 42 per cent;
- The proportion of remanded detainees has declined as a percentage of the total detainee population at the AMC. On 30 June 2014 of the 330 detainees in the AMC there were 92 remandees, 28 per cent, compared to the 37 per cent initially planned. The combination of more detainees and relatively fewer remanded detainees results in a much larger cohort of sentenced detainees, the principal cohort for rehabilitation; and
- The Transitional Release Centre is substantially smaller than originally envisaged. Only 15 beds have been provided rather than the initially planned 60. This means there is a smaller number of detainees able to access community-based rehabilitation opportunities instead of prison-based services

2.149 The profile of ACT detainee population in the first five years of the AMC's operation has been substantially different to that which was used in the 2007 planning assumptions. This has resulted in:

- a larger number of higher security risk detainees than initially assumed (55 per cent of the detainee population in June 2014 compared to 26 per cent initially planned);
- a larger number of detainees needing to be segregated under a protection category including separation due to association issues (49 per cent of detainees protected status in June 2014 compared to the figure of 25 per cent initially planned);
- a larger overall number of detainees than originally anticipated (a detainee population of 339 in September 2014 compared to 239 initially planned);
- fewer remandees as a proportion of the overall detainee population (a 28 per cent remandee population in June 2014, compared to the 37 per cent initially planned); and
- fewer low risk sentenced detainees and fewer opportunities to progress through the Transitional Release Centre (15 bed instead of 60).

2.150 All these factors undermine the continuing value of the 2007 delivery strategy since there is a very large gap between what was anticipated and what has occurred since the opening of the AMC.

- 2.151 Sentencing rates, anticipated versus actual sentence length, and detainee numbers in relation to prison capacity are discussed in the following paragraphs as these affect the planning of rehabilitative activities.

Sentencing rates

- 2.152 The ACT has a small detainee population which is growing. Prior to the AMC commencing operations in March 2009, the ACT placed fewer adults in custody than other jurisdictions. The Australian average in 2008 was 125 per 100 000 population for sentenced offenders: the ACT's was 31 per 100 000 population. The ACT's sentenced offenders were usually placed in New South Wales prisons. In the quarter to September 2014 the ACT's sentenced offender rate had increased to 81, compared to an Australian average of 140 per 100 000.
- 2.153 However, the ACT rate of remanded detainees has decreased. In 2008 the ACT remand rate was 35 per 100 000 while the Australian average was 39. In the quarter to September 2014 the ACT rate was 29 with the Australian average increasing to 46 per 100 000.
- 2.154 In the quarter to September 2014 the ACT still incarcerated fewer people per head of population than nearly all other Australian jurisdictions except Tasmania but the gap is closing. According to annual census²¹ data across all jurisdictions the detainee population has been rising at an average rate of 3.2 per cent per year since 2000. The detainee population for prisoners from the ACT has increased at an average of 4.6 per cent per year over the same period.

Detainees' sentence length

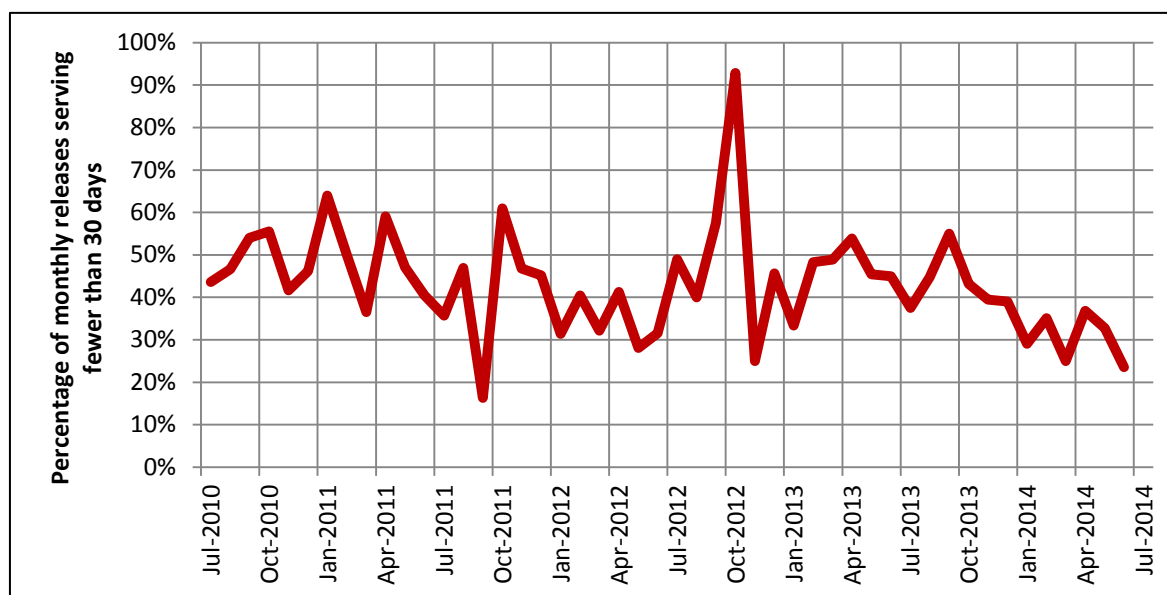
- 2.155 The 2007 delivery strategy states that the 'length of stay in custody will be a useful indicator of what interventions are achievable with the majority of prisoners and remandees'. In the 2007 delivery strategy it was anticipated that the length of time served for sentenced detainees would align with historical trends²², that is, this would be somewhere between 269 to 520 days (mean) and 60 to 274 days (median).
- 2.156 In the period 2009-10 to 2013-14 the time served by sentenced detainees in custody increased from 111 to 334 (mean) days, and from 88 to 219 (median) days which is at the lower end of the ranges of the 2007 delivery strategy assumptions. This means ACTCS had fewer days with detainees overall in which to achieve rehabilitative objectives. Therefore it is likely that more detainees in any given year have been entering and leaving the AMC than was originally envisaged. This is known as 'flow' or 'churn'. The 2007 delivery strategy does not identify a level of churn in planning assumptions, for example, the

²¹ Australian Bureau of Statistics (ABS) Prisoners in Australia 30 June census data for 2000 to 2014

²² This is based on historic data (1996-97 to 2001-02, source: ACT Corrective Services) published in the Vocational Education and Training and Rehabilitative Programs at the AMC (2007) page 18

proportion of detainees at release who have served short periods in custody that may have precluded them from participating in certain rehabilitative activities.

Figure 2-2 Detainees serving fewer than 30 days in detention (July 2010 to June 2014)



Source: ACTCS JOIST data extract February 2015

- 2.157 ACTCS data (Figure 2-2) identifies that, over the last four years, in most months, between a third and two thirds of detainees released each month had served fewer than 30 days in detention. There was an average of 44 releases per month in 2013-14. This means that during the first five years of operations, although ACTCS officers have had higher numbers of detainees on-hand in the AMC than anticipated, it is likely that ‘churn’ has significantly reduced the target detainee population for rehabilitative effort.
- 2.158 However the situation is changing. Average lengths of stay have been shorter than anticipated in the 2007 delivery strategy for most of the operational life of the AMC but the average length of stay for sentenced detainees has been gradually increasing since 2009. This is consistent with lengthening maximum sentences (in days) as determined by the courts. These have increased in the period 2010 to 2014, and are close to the Australian long-term average (around three years).
- 2.159 ACTCS data indicates that the number of sentenced detainees in the AMC, with maximum sentences of at least two years, has increased from 71 to 156 detainees between 30 June 2010 and 30 June 2014. On 30 June 2014, 47 per cent of the AMC’s 330 detainees had sentences of at least two years. This markedly different detainee profile provides different opportunities and challenges in planning and managing rehabilitation.
- 2.160 ACTCS officers identified examples of where programs have been redesigned in response the changing detainee profile, such as the shortening of the Solaris Therapeutic

Community program. However there has not been a recent²³ review of the totality of rehabilitative activity, across all main program areas, in relation to the detainee population that has eventuated.

- 2.161 In the first five years of AMC operation annual mean and median lengths of sentences served have generally been shorter than those originally anticipated in the 2007 delivery strategy. Between a third and two thirds of detainees released in most months over the last four years had served fewer than 30 days. It is likely that 'churn' has significantly reduced the target detainee population for rehabilitative effort. It was not evident how these changes have influenced the strategic planning of rehabilitation.

Detainee numbers and prison capacity in the AMC

- 2.162 Prior to March 2009 detainees generally served their sentences in prisons in New South Wales while unsentenced detainees, including those who had not been convicted²⁴, were remanded to Belconnen Remand Centre or Symonston Temporary Remand Centre.

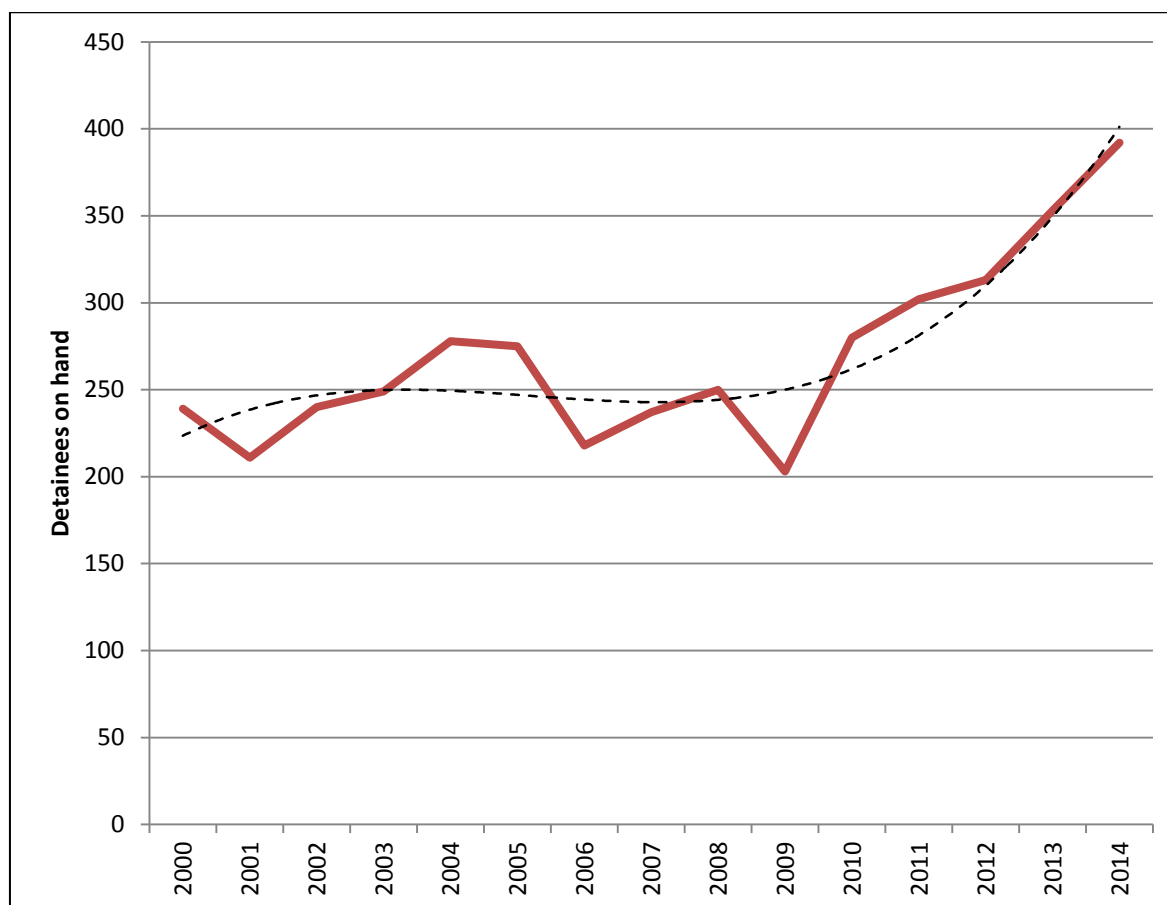
Detainee numbers

- 2.163 The Australian Bureau of Statistics prisoners in Australia population census data (30 June each year) is based on a census at one point in the year for all the ACT's custodial detainees, including those in detention centres. Figure 2-3 identifies that the ACT detainee population (sentenced and remand) declined in the five years between the ACT Government's announcement in 2004 (278 detainees) of the building of the prison and the year of commencement of operations at the AMC in 2009 (203 detainees).
- 2.164 Figure 2-3 also shows that detainee numbers in the ACT (at the AMC and other ACT detention centres) have increased each year since 2009. The ACT increase between 30 June 2009, just after the AMC received its first detainees, and 30 June 2014 has been at a rate of 15 per cent per year on average, compared to an increase of three per cent per year for Australia over the same period.

²³ Not since the working group of the 2004-2006 period prepared the 2007 delivery strategy

²⁴ And those who had been convicted but were awaiting appeals

Figure 2-3 ACT detainees on-hand (in prison, and in remand and periodic detention centres)



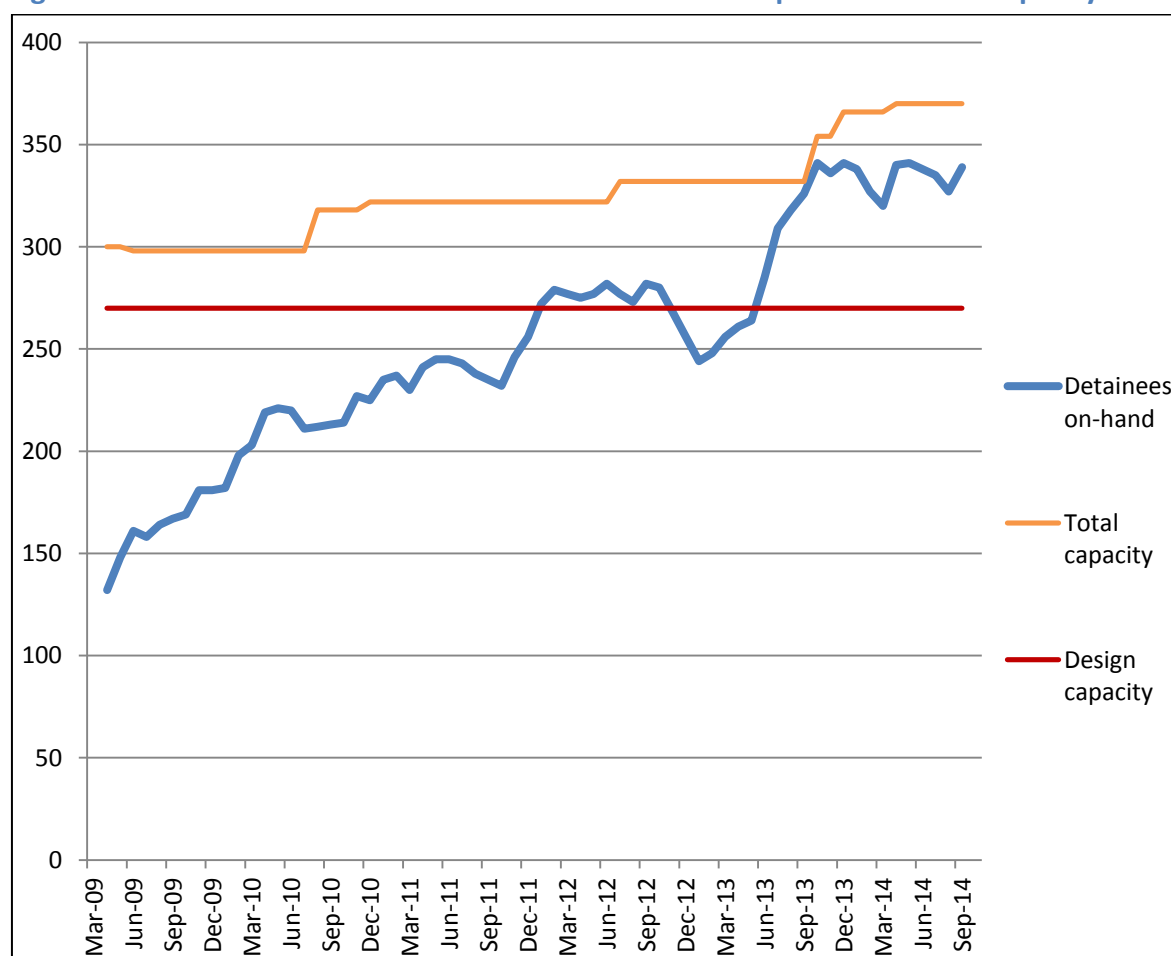
Source: Australian Bureau of Statistics (4517) Table 9 for 2000 to 2010 and Table 14 for 2011 to 2014, all using 30 June census data

2.165 In contrast Figure 2-4 uses monthly figures for detainees on-hand at the AMC, based on daily averages per month, as published quarterly by the Australian Bureau of Statistics. This shows that the number of detainees in the AMC first exceeded the figure of 239, used in the 2007 delivery strategy assumptions, in April 2011, 24 months after the AMC received its first detainees.

Design and total capacity of the AMC

2.166 Using definitions agreed by all jurisdictions²⁵, the design capacity of the AMC began, and has remained, at 270 detainees. Design capacity is the total intended bed capacity of the prison according to its design as initially constructed for each cell or accommodation block but excludes specialist accommodation such as management, health and crisis support units. The first departure from design capacity to create greater overall capacity occurred in August 2010 with the addition of 20 beds through double bunking.

²⁵ National Corrections Advisory Group *Data Collection Manual 2013-14*, and reported in the Productivity Commission's *Report of Government Services annual reports*

Figure 2-4 Detainees on-hand at AMC March 2009 to Sept 2014 vs AMC capacity

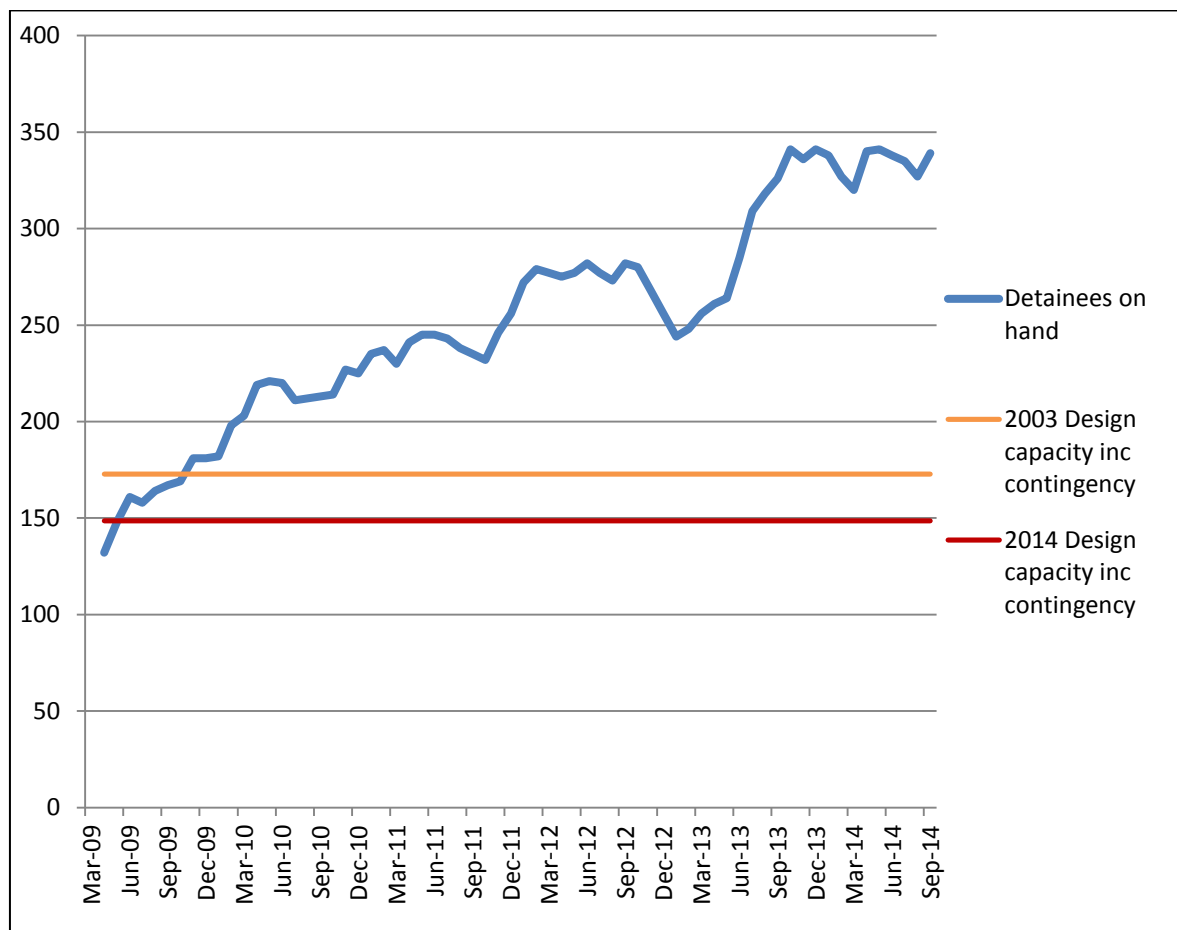
Source: Australian Bureau of Statistics (quarterly profile), including monthly data on *persons in full time custody* (2009 to 2014)

- 2.167 Total capacity, that is, all AMC accommodation available at a point in time, has been increased six times in the last five years through reconfiguring some areas of accommodation to ensure sufficient space for the growing detainee population. Detainee numbers first exceeded design capacity (270) in January 2012 and have been between 88 and 96 per cent of total capacity (370 in September 2014) for the past 12 months.
- 2.168 The number of arrivals may change due to a 'surge' in the custodial population or more predictable seasonal changes, especially given the high levels of segregation required with a single site prison. ACTCS officers identified that, when the detainee population is close to the total capacity, one new arrival may require the movement of up to ten other detainees to ensure accommodation for the new arrival is for the right category.
- 2.169 ACTCS officers also need to deal with the changing needs of the existing detainee population as their security classification or protection needs change. There was, for example, an average of 145 changes to security classifications for sentenced male detainees in each of the last two years.

Planned capacity

2.170 In 2013 the Justice and Community Safety Directorate sought advice from an independent expert to predict future imprisonment rates and, from these, what prison capacity may be necessary. This advice was finalised in a report in February 2014²⁶ and has been taken into account in planning new accommodation, operational management and service developments. The independent advice predicts 'detainees on-hand' and models this against 'design capacity'. A reduction in design capacity is applied to provide a contingency for detainee separation and for seasonal fluctuation in numbers in order to achieve optimum operational flexibility. This is planned capacity. The report identifies that plans for the AMC in 2003 allowed for a 36 per cent reduction in design capacity as a contingency.

Figure 2-5 Planned capacity including a contingency for optimal operational flexibility versus detainees on-hand



Source: Australian Bureau of Statistics (quarterly profile), including monthly data on *persons in full time custody* (2009 to 2014), and ACTCS Explanation of Key Terms regarding AMC Detainee Projections and AMC Capacity

2.171 Extra separation requirements have eventuated in the first five years of the operation of the AMC that were not predicted in the 2003 plans. The independent advice in 2014

²⁶ *The drivers of imprisonment rates in the ACT* John Walker Crime trends analysis, for the Justice and Community Safety Directorate, February 2014

identifies that at least a 45 per cent contingency is desirable in the medium term taking account of the level of separation experienced in the AMC (refer to Figure 2-5).

- 2.172 Using the initially 'planned for' and current 'desirable' levels of contingency in relation to the 270-bed design capacity as built, and the actual detainee numbers on-hand, it is evident that AMC utilisation levels have exceeded planned capacity, which takes account of a contingency for efficient operation, for most of the operational life of the AMC. Utilisation has been high but sub-optimal:
- since June 2009, using the 2014 contingency; and
 - since November 2009, using the 2003 contingency allowances.
- 2.173 Several senior ACTCS officers confirmed that, over the course of the last five years, identifying suitable accommodation for detainees, while respecting appropriate segregation, has been, at times, the overriding management challenge. These officers also identified consequential difficulties, arising from higher detainee numbers and sub-optimal utilisation rates, in maintaining good order and in ensuring the safe and efficient movement of detainees around the site. For example, the 'town square' concept was designed to give detainees freedom to associate and to facilitate a community environment. This has not been achieved due to the higher numbers of protected status detainees. ACTCS officers advised that under current detainee management arrangements in the order of 300 detainee movements are required each day. Furthermore, the challenges of higher utilisation and the unpredicted and changing profile of detainees have made planning and implementing rehabilitative activities difficult.
- 2.174 The 2007 delivery strategy states that 'changes in the prisoner profile will require further analysis at a later stage'. The actual profile of the detainee population in custody during the first five years of the AMC operations has varied considerably from the planning assumptions made in 2007 yet planning documents used to guide rehabilitative activities have not been updated to reflect changes.
- 2.175 The AMC's high utilisation levels (in terms of planned, design and total capacity) over much of its operation have provided ACTCS officers with very limited operational flexibility to accommodate new detainees. These levels have also presented challenges in maintaining good order for existing detainees. While it is respected that ACTCS officers have needed to give priority to maintaining a safe, secure and humane custodial environment, this has limited their ability to plan and deliver rehabilitative activities. Consequently progressing the strategic priority of encouraging change in offender behaviour has been compromised. There is a pressing need for the development of a rehabilitation framework that reflects the reality of the AMC operating environment.
- 2.176 Due to the lack of up-to-date planning documents there is no realistic basis to assess rehabilitative activities and services, or to determine how the senior management of the AMC confirms that the rehabilitation of detainees is taking place in a manner which meets the Government's intention. The lack of up-to-date planning documents presents a risk to the effective delivery of rehabilitative activities.

2.177 Delivery of rehabilitation is considered in Chapter 5.

RECOMMENDATION 1 REHABILITATIVE FRAMEWORK (CHAPTER 2)

A rehabilitation framework for the Alexander Maconochie Centre (AMC) should be developed by ACT Corrective Services (ACTCS) which, among other things:

- a) reflects the profile of the detainee population;
- b) is flexible to respond to changes while providing guidance;
- c) guides the integration of rehabilitative activities and services to achieve a 'structured day' that incorporates sufficient 'purposeful activity' for detainees;
- d) provides the rationale and outlines the therapeutic programs that will be provided; and
- e) guides the provision of employment.

RECOMMENDATION 2 ROLE OF COMMERCIAL OR BUSINESS ENTERPRISES ('PRISON INDUSTRIES') (CHAPTER 2)

The role of commercial or business enterprises ('prison industries') in providing employment for detainees in the AMC should be clarified by the ACT Government. A paper for the Government's consideration, which outlines options and recommends the role of commercial or business enterprises ('prison industries') should be developed in consultation with stakeholders.

3 IMPROVEMENT PLANNING AND REPORTING ON PERFORMANCE

- 3.1 This chapter outlines performance measures for rehabilitative activities and services in the AMC. Improvement planning and evaluation of rehabilitative activities and services are considered to determine how these guide continuous improvement.

Conclusion

Developing comprehensive performance measures for determining the success or otherwise of rehabilitative activities and services provided in prisons is problematic as a wide range of factors, including those outside the control of the prison, influence a detainee's rehabilitation. There are no nationally agreed, comprehensive rehabilitation performance measures available to facilitate the ACT Government determining whether its strong emphasis on the rehabilitation of detainees is being achieved and if efforts to rehabilitate detainees are reducing reoffending rates or improving ex-detainees' prospects after release.

ACTCS does not have an established business planning discipline for its AMC rehabilitative activities and services although it has recently commenced undertaking business planning. It is important that this continues so all improvement priorities can be consistently translated into action. ACTCS internally reported performance measures need to be developed and integrated into the business planning process so that progress can be evaluated and improvements made when necessary.

The efficiency measures that are available which allow comparisons between jurisdictions show that the ACT's detainee costs per day, and utilisation rates have all trended towards the Australian average over the last five years, from having been the least 'efficient' of all jurisdictions in 2009-10. However, the change may primarily relate to the increase in the ACT detainee population. Although some information is available on the costs associated with the delivery of rehabilitation, without measures of effectiveness it is not possible to determine whether rehabilitation is being achieved efficiently.

Given that comprehensive performance measures are not yet available, undertaking evaluations is particularly important. However, there is no evaluation framework for AMC rehabilitative activities and services. Although some evaluations are undertaken, this is not done routinely. Auditing and quality assurance need to be increased to allow program-specific deficiencies to be identified and addressed systematically.

There is a need to segregate different cohorts of detainees and specific individuals in prisons. This, combined with the physical design of the AMC, an all-purpose mixed gender prison, with a detainee profile that is significantly different from that envisaged prior to opening, have resulted in access to some rehabilitative activities and services being constrained. The major changes to

be made to the design, through the addition of new buildings, are likely to improve access. It is important that the effectiveness of the changes on the rehabilitation of detainees be evaluated.

Key findings

	Paragraph
At the Australian Government level, progress has been limited in developing comprehensive rehabilitation performance measures that are capable of being efficiently monitored and reported. Accordingly such measures are not available for use by ACTCS.	3.24
Publically reported detainee time out-of-cells, employment and education performance indicators identify that during the period of the AMC's operation the ACT's performance has generally exceeded the Australian average, but has been decreasing year on year. However, high education and employment rates may not be a good indicator of detainee participation, or the quality or outcome of these programs.	3.33
The use of recidivism measures is a very obvious means of monitoring a key effect of rehabilitation. A two-year recidivism measure is a relatively longstanding and standardised measure. While it has limitations, it is a useful performance indicator if used consistently, and with caution, year on year or for specific cohorts.	3.36
ACTCS strategic plans focus on rehabilitation for the purpose of reducing the risk of reoffending, reducing recidivism, and achieving reparation, although these are not accompanied by performance measures. Other key purposes of encouraging detainees to self-improve and lead successful lives in the community are not stated as priorities or goals. Having these as goals would better facilitate the ACT Government's stated purposes for rehabilitation.	3.40
Given that there are no performance measures for rehabilitation in ACTCS strategic plans there is no way the ACT Government is able to directly determine whether its: <ul style="list-style-type: none"> • strong emphasis on the rehabilitation of detainees is being achieved; or • efforts to rehabilitate detainees are reducing reoffending rates or improving ex-detainees' prospects after release. 	3.43
The <i>Report on Government Services</i> efficiency measures of costs per detainee per day (operating costs and total cost including capital cost) and utilisation rates (prisoners on-hand versus prison design capacity) show that, in the period 2009-10 to 2013-14, the ACT has trended towards the Australian average. It was the least 'efficient' of all jurisdictions in 2009-10.	3.53

The level of, and change in, resources specifically for the rehabilitation of detainees at the AMC are not possible to establish as they are not discretely reported. Furthermore, inter-jurisdictional efficiency comparisons are based on all operational resources not just those relating to rehabilitation. 3.69

Efficiency relates to a combination of unit cost analysis and effectiveness. The ACT Government does not have adequate mechanisms for monitoring or reporting on the effectiveness of its rehabilitative activities and services. It is, therefore, not possible to establish whether rehabilitation is efficient. 3.70

With respect to the ACTCS response (Sept 2014) to the Hamburger Review (2011) regarding a 'structured day', ACTCS advised that it did not operate with a strict 'structured day' but 'instead applies a loose routine to ensure detainees are productively occupied'. No evidence was found that it was stated policy to provide a 'loose routine to ensure detainees are productively occupied' rather than a 'structured day' of purposeful activity. 3.77

Records of regular management meetings at the AMC were examined. These provide a qualitative account of the priorities of each business unit in the AMC. However, there is no evidence of the regular reporting of quantitative measures relating to AMC Offender Services activities, other than those required by the *Report on Government Services* and those that are reported as part of the Directorate's Statement of Performance. ACTCS senior officers advised that a new, AMC-specific monthly reporting and accountability template was being developed and that this would include 'service delivery outputs' for each business area, including AMC Offender Services. 3.88

ACTCS strategic plans highlight improvement priorities. Task-and-finish oversight arrangements have been established, for example, in relation to ACTCS's response to internal and external reviews such as the Hamburger Review (2011). However arrangements are not in place to report or achieve continuous improvement in the AMC Offender Services or more widely across ACTCS in relation to the rehabilitation of AMC detainees. 3.89

At the level of the business unit ACTCS officers confirmed that business and improvement planning in the AMC Offender Services team was to commence in 2014. However it had not been in place in recent years in this business unit. ACTCS officers provided Audit Office with a 2013 draft operational plan template but indicated it was not yet in widespread use. 3.90

Improvement planning for rehabilitation is constrained. Accordingly, it is difficult to demonstrate that all improvement priorities identified at the Executive level are 3.91

being consistently translated into action in AMC operations.

Data on detainees' access to rehabilitation programs, prior to and post the new AMC buildings, needs to be collected and evaluated to inform changes to future developments at the AMC.	3.102
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The meaning of the 'throughcare' of detainees in the AMC needs to be defined as the only current expression of 'throughcare' is in the draft <i>Case Management Policy Framework</i> (July 2014). Furthermore, in this framework the term is not described consistently and does not distinguish between 'throughcare' and the pilot Extended Throughcare initiative. Without clarity, there is a risk that 'throughcare' as intended in the AMC operating philosophy, is not being achieved.	3.111
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The operating philosophy of the AMC stresses the importance of evaluating programs. Some are evaluated, such as programs relating to substance abuse (not considered in this audit). However, ACTCS has not routinely evaluated, audited or undertaken quality assurance procedures for many of its therapeutic, including criminogenic, programs. This and the lack of evaluation, auditing and quality assurance, present the risk that improvements are not being made which could benefit the rehabilitation of detainees and improve the delivery of programs.	3.124
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Summary management reporting on the quality of the provision of vocational education and training activity in the AMC and on maintaining or improving detainee participation rates has been limited. Furthermore, there has been no discrete independent evaluation of the effectiveness of vocational education and training provision in the AMC. This presents the risk that needed improvements in the vocational education and training activity in the AMC are not identified and implemented.	3.131
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An evaluation of the AMC's employment program has not occurred. Therefore it is not possible to determine the extent to which detainee employment contributes towards the objectives of the ACT Government.	3.134
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There is currently no evaluation framework despite the priority in the operating philosophy for the AMC on evaluating programs related to rehabilitation.	3.137
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Monitoring and reporting on the effectiveness of rehabilitation

3.2 The monitoring of the performance of rehabilitative activities and services in the AMC should provide the means to confirm whether the ACT Government is achieving its

objectives for the rehabilitation of detainees. These objectives (paragraph 2.12) seek to reduce reoffending and improve the prospects for ex-offenders in the community.

- 3.3 Performance measures and arrangements for monitoring and reporting performance, relating to rehabilitation in the AMC were examined. This included considering requirements in: Directorate, Agency and business unit performance indicators and plans; and in agreed arrangements with the Commonwealth.

ACT Government reporting

- 3.4 No specific primary or subordinate legislation requiring the systematic monitoring or reporting of rehabilitative outcomes for AMC detainees was identified.

Justice and Community Safety Directorate

- 3.5 The Justice and Community Safety Directorate identified the following AMC performance indicators in its annual reports:

- *percentage of offenders referred to programs and services that target their offending behaviour.* This indicator relates to offenders on community sentences only and there is no similar indicator for detainees serving sentences in the AMC. In any event, this is not considered to be a measure of the effect of rehabilitation as it does not identify whether referral leads to participation or positive outcomes;
- *percentage of offenders whose risk of reoffending has reduced.* This indicator focuses on the risk of reoffending, one of the objectives of rehabilitation. However, it also relates to offenders on community sentences only and there is no similar indicator for detainees serving sentences in the AMC. This indicator was discontinued at the end of the 2012-13; and
- *rate of return to prison.* This focuses on one way of measuring recidivism (re-imprisonment, within two years of release) and so it is potentially highly targeted at one of the ACT Government's objectives of rehabilitation. As the AMC received its first detainees in March 2009, the first year 'rate of return to prison' was reported as a change in the recidivism rate was in the Justice and Community Safety Directorate's Annual Report 2012-13.

- 3.6 The Justice and Community Safety Directorate's Annual Report 2012-13 identifies that there was an increase in the return to prison rate within two years from 40.80 to 46.64 per cent (refer to Figure 3-4). This Annual Report (page 115) summarises the possible reasons for the increase in the percentage:

... the recidivism rate provides a very basic tool for measuring what is typically a very complex issue. There are many drivers behind offending and reoffending behaviours that can impact on this measure including changes to sentencing legislation, availability of support services within the community, police operations, crime reporting rates and court sentencing practice ...

- 3.7 The Justice and Community Safety Directorate's Annual Report 2013-14, on the other hand, identified a fall in recidivism rates from 46.64 to 41.9 per cent (page 84):

In actual raw numbers this is a difference of 15 clients not returning to the AMC.

3.8 Neither report seeks to attribute the change in the recidivism rate to the effectiveness of rehabilitation. The utility of recidivism as measure of rehabilitation is discussed in paragraphs 3.34 to 3.43.

3.9 In addition to reporting performance (accountability and strategic) indicators, the Justice and Community Safety Directorate annual reports also provide narrative on rehabilitative activity. For example, the 2013-14 Annual Report (page 75) includes commentary on education completed by detainees:

In 2013–14, an average of 88 detainees completed further education and/or vocational qualifications at the AMC, this compares to 69 in 2012–13.

Review of accountability and strategic indicators

3.10 ACTCS commissioned an independent review²⁷ (Oakton, May 2014) of its accountability and strategic indicators relating to:

... provision of safe and secure custody for detainees with strong focus on the delivery of rehabilitative, educational and vocational programs, effectively managing unsentenced offenders and community based corrections programs, and providing advice and services to the ACT justice system.

3.11 The final report (Oakton, May 2014):

- did not identify the need for, or provide any improved way of, reporting on the rehabilitation of AMC detainees;
- identified that other than the current single strategic indicator (escapes from custody) recidivism or survival (i.e. its inverse) rates would provide improved coverage for ACTCS outputs;
- proposed comparing recidivism rates for Extended Throughcare program participants with those who do not participate in the program, if the program should continue beyond its pilot phase;
- identified 'referral to offender programs' as an ineffective indicator and recommended it be replaced with a more specific indicator in the longer term; and
- outlined the limitations of current business processes (e.g. use of paper-based case plans) and information systems, that meant that the cost of data capture continued to outweigh the benefit in some areas where improvement would otherwise be recommended (refer to paragraph 4.152 for further discussion on this).

²⁷ ACT Corrective Services, *Review of Corrective Services Strategic and Accountability Indicators*, Oakton, May 2014

ACT Corrective Services Agency and the AMC

- 3.12 ACTCS officers advised that there are no other measures, operational or strategic, by which rehabilitative activity (input, output, outcome or impact) is periodically monitored and reported.
- 3.13 Over the past two years the AMC's senior management team has been trialling a monthly report, in which all AMC business units provide key performance data focused on 'service delivery outputs'. The pilot monthly reports, prepared since July 2012, and the records of other regular meetings, such as the monthly senior managers' meetings, were considered in this audit.
- 3.14 None of these contain regular reports on the rehabilitation of detainees, in terms of inputs, output, outcomes or impact. For example, there is no established reporting by AMC Offender Services for the number or range of programs being delivered or the percentage of detainees accessing or satisfactorily completing programs.

Australian Government reporting

- 3.15 The ACT Government's reports to the Australian Government, through the Corrective Services Administrators' Council mutually agreed standards, the Australian Bureau of Statistics, and the Productivity Commission's annual *Report on Government Services*.

Corrective Services Administrators' Council

- 3.16 Corrective Services departments in Australian jurisdictions have been collaborating on the production of minimum standards since 1978. The latest version, *Standard Guidelines for Corrections in Australia* (March 2012) states:

[The standards] represent a statement of national intent, around which each Australian State and Territory jurisdiction must continue to develop its own range of relevant legislative, policy and performance standards that can be expected to be amended from time to time to reflect 'best practice' and community demands at the state and territory level.
- 3.17 A separate set of standards has been prepared for programs: *Australian offender program and facilitation standards* (January 2013). Both sets of standards have been endorsed by the Corrective Services Administrators' Council, a professional body comprising all Australian States and Territories.
- 3.18 Neither set of standards establishes a principle or good practice relating to the regular monitoring or outcome reporting of rehabilitative activity. ACTCS officers advised that work on developing this at an Australian Government level has been on ongoing for more than ten years.

Australian Bureau of Statistics

- 3.19 The Australian Bureau of Statistics gathers data on prisoners and publishes this quarterly and annually. The Justice and Community Safety Directorate also publishes data on AMC

detainee populations on a quarterly basis. However, neither reports data on rehabilitative outcomes.

The Productivity Commission

3.20 The Productivity Commission's *Report on Government Services* annually reports data against mutually agreed indicators for all Australian States and Territories. Chapter Eight of the 2015 report identifies a performance indicator framework for Corrective Services. Concepts and performance measures are further defined by the National Corrections Advisory Group, a working group of the Corrective Services Administrators' Council. The National Corrections Advisory Group produces a data collection manual to assist Australian Corrective Services agencies in applying counting rules, including those that support the Productivity Commission's *Report on Government Services* requirements. The 2013-14 manual refers to the following in relation to rehabilitation in a prison environment:

- Time out-of-cells. Measures are specified, data collected and annually reported;
- Offence-related programs. No measures have been developed;
- Employment. Measures are specified, data collected and annually reported; and
- Education. Measures are specified, data collected and annually reported.

3.21 An offence-related programs measure has been identified as desirable and this has been part of the Corrective Services Administrators' Council approved performance framework since 2001. However, no measure has been developed, nor data collected and reported at the Australian Government level for more than 12 years.

3.22 The National Corrections Advisory Group *Data Collection Manual 2013-14* (page 120) also refers to the 1998 objective of developing a 'structured day' indicator:

... the 'structured day' was seen as a framework used by prison authorities to manage the period of time when prisoners were not confined to their cells (i.e. time out-of-cells).

The rationale for the 'structured day' was twofold:

- to ensure that prisoner time out-of-cells was used productively and that prisoner needs were met through access to employment, programs, services and other activities (offender care), and
- to ensure staff needs and the operational needs of the correctional centre were met through the strategic allocation of resources (resource management).

3.23 It is stated in the *Data Collection Manual 2013-14* that this indicator will not be progressed 'until such time as information systems could provide reliable data'. It is also stated that jurisdictions need 'to be able to access data from individual case management files and/or for data relating to structured day components to be available for further analysis'.

3.24 At the Australian Government level, progress has been limited in developing comprehensive rehabilitation performance measures that are capable of being efficiently monitored and reported. Accordingly such measures are not available for use by ACTCS.

ACT performance as reported in the Report on Government Services

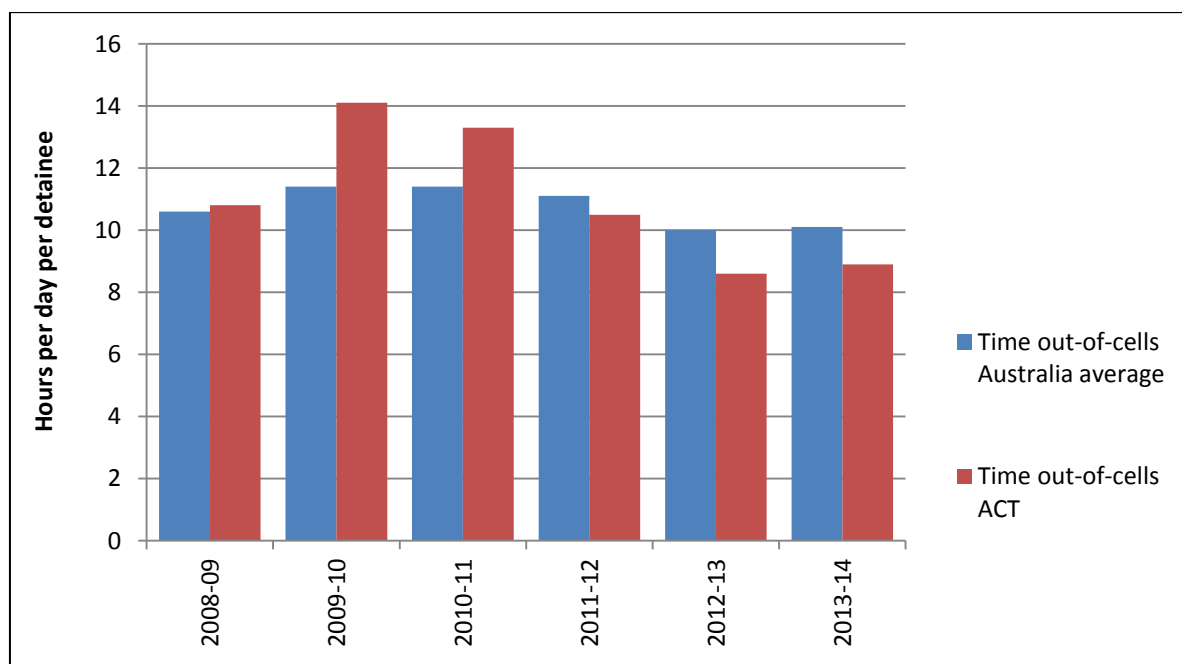
3.25 Data has been collected and reported in the *Report on Government Services* for time out-of-cells and the employment and education of detainees at the AMC (refer to paragraph 3.20) during the period of the AMC's operation. The AMC's performance compared to that of other jurisdictions has been high but has been decreasing year on year.

3.26 What may account for the AMC's performance, particularly in relation to employment and education indicators was examined. While a conclusion cannot be made, factors that may account for the ACT's performance are mentioned in the following paragraphs.

3.27 The *Report on Government Services* identifies that:

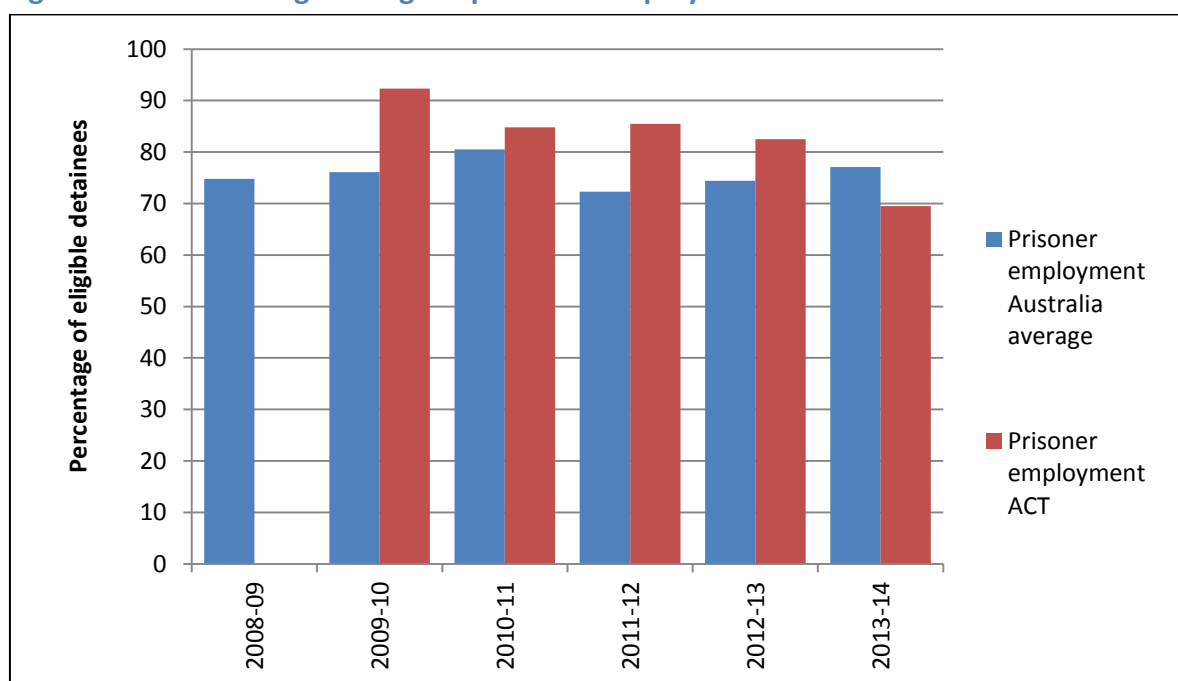
A relatively high or increasing average time out-of-cells per day indicates better performance. The periods during which prisoners are not confined to their cells or units provides them with the opportunity to participate in a range of activities that may include work, education, wellbeing, recreation and treatment programs, the opportunity to receive visits, and interacting with other prisoners and staff.

Figure 3-1 Time out-of-cells in hours per day



Source: Data from *Report on Government Services* 2010 to 2015 (Table 8A.18)

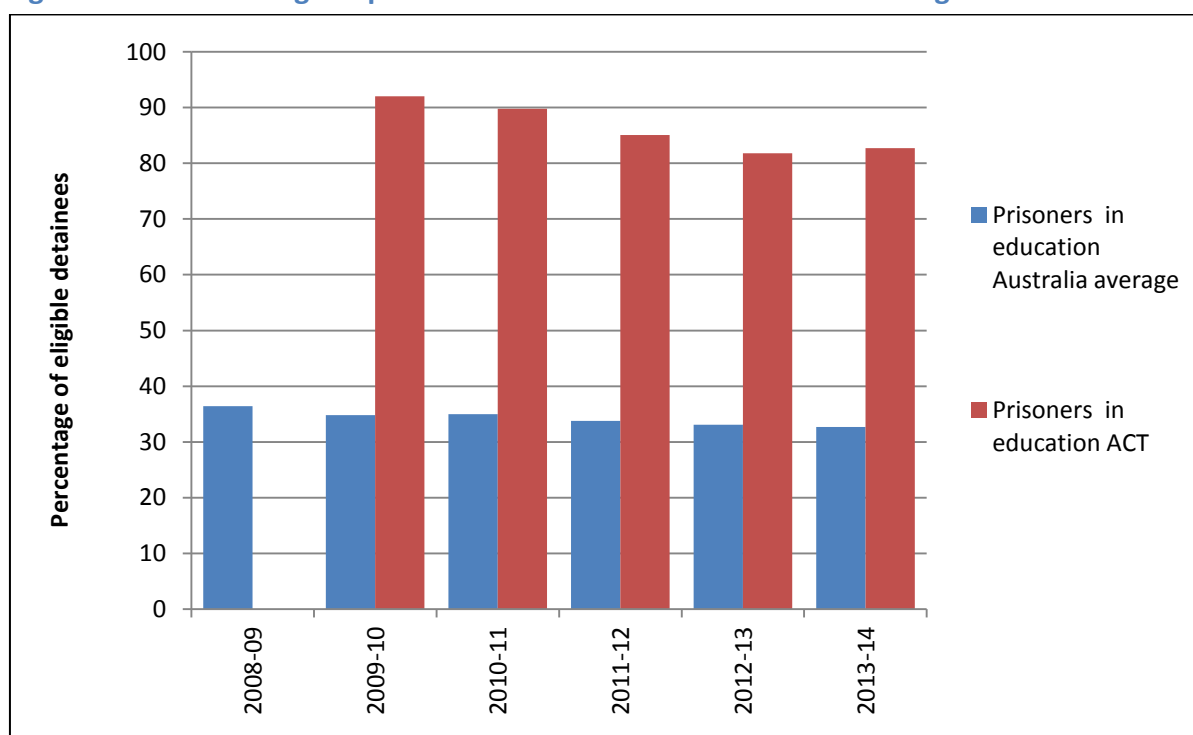
3.28 Reports provided by ACTCS senior managers identify that AMC detainees' time out-of-cells has been significantly affected by planned and/or unplanned lockdowns. These arise from a range of circumstances including the unavailability of staff (refer to paragraph 5.29). ACTCS officers advised that the reduction in time out-of-cells is a reflection of the acute accommodation pressures and design shortcomings in existing facilities and that these have a negative impact on rehabilitative activities and services.

Figure 3-2 Percentage of eligible prisoners employed²⁸

Source: Data from *Report on Government Services 2010 to 2015* (Table 8A.20)

3.29 Employment data includes sentenced detainees who are able to work but excludes remandees who choose not to work. Until 2012-13 it appeared that participation in employment was high compared to the Australian average despite the lack of availability of commercial industry opportunities at the AMC. ACTCS officers identified that as a small to medium-sized 'all classifications' prison, there was more duplication of AMC service roles, for example, more cleaners and laundry jobs in the separated accommodated units (i.e. cottages and cell blocks) and therefore more potential for AMC-based service employment. The 2013-14 year was the first year where ACT prisoner employment was below the Australian average.

²⁸ ACTCS officers advised that i) there was a change to the *Report on Government Services* counting rules in 2009-10 which adversely affected the ACT performance against this indicator, and ii) ACTCS adopted this change for the 2011-12 report.

Figure 3-3 Percentage of prisoners enrolled in education and training

Source: Data from *Report on Government Services* 2010 to 2015 (Table 8A.21)

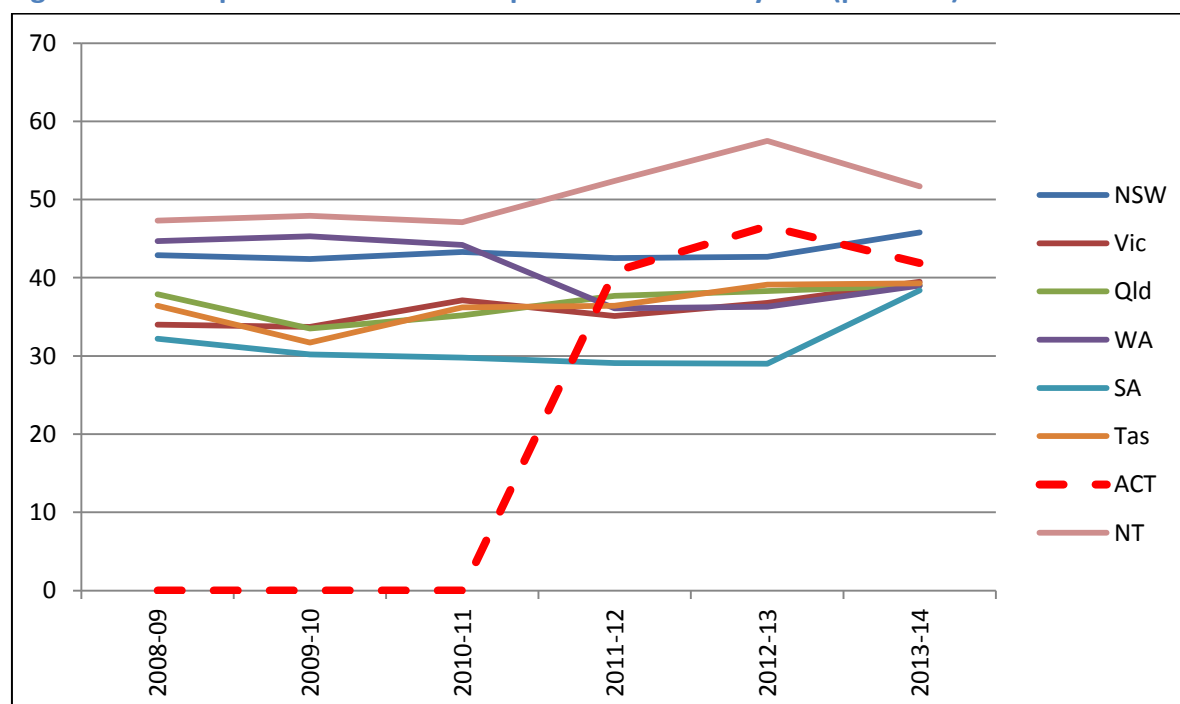
- 3.30 Education participation at the AMC is very high compared to other jurisdictions. According to the *Report on Government Services* and National Corrections Advisory Group guidance, the indicator is designed to identify the percentage of detainees who participate in accredited vocational education and training at some time during the year. The same guidance also requires only the inclusion of 'accredited education and training courses under the Australian Qualifications Framework'.
- 3.31 In practice this education measure is reported by all Australian jurisdictions using a spreadsheet developed by the National Corrections Advisory Group, and agreed by the Productivity Commission, that collects data on enrolment only, not participation. The measure does not provide any account of detainee participation other than in the initial enrolment process, and it does not differentiate induction activities and more extensive education and training. In the AMC, induction is an accredited unit and all detainees who agree are inducted. This includes undertaking basic workplace health and safety training to prepare detainees for living and working in a custodial setting.
- 3.32 ACTCS officers identified that the timeliness of data collection is improving. Over the past two years ACTCS officers have instituted *Report on Government Services* data collection on a monthly basis rather than an annual basis. More timely data increases its utility and likelihood of being more reliable.
- 3.33 Publically reported detainee time out-of-cells, employment and education performance indicators identify that during the period of the AMC's operation the ACT's performance has generally exceeded the Australian average, but has been decreasing year on year.

However, high education and employment rates may not be a good indicator of detainee participation, or the quality or outcome of these programs.

Rehabilitation to reduce the risk of reoffending: recidivism

3.34 As mentioned in paragraph 3.6, the Justice and Community Safety Directorate stated in its Annual Report 2012-13 that the two-year recidivism rate ‘provides a very basic tool for measuring what is typically a very complex issue’. ACTCS officers clarified that, in focusing on recidivism as a measure of the effect of rehabilitation, many other interrelated factors that influence the likelihood of reoffending may not to be considered, that is, ‘causal attribution’ can be problematic. Furthermore, the recidivism measure does not take account of any change in the detainee’s offending profile. For example, a change in the type of any subsequent offence from a serious to a lesser one is something that could be considered as positive but this is not included in the measure.

Figure 3-4 Ex-prisoners returned to prison within two years (per cent)



Source: *Report on Government Services* January 2014 Volume C: Justice Table C.5

3.35 The risk of over-reliance on recidivism measures is outlined in the report *Recidivism in Australia: findings and future research* (Payne, 2007) published by the Australian Institute of Criminology. This report highlights the risk of making like-for-like comparisons that overlook the range of variables in different agencies each adopting different methodologies that reflect their own objectives. However, the report stated:

Although the studies vary widely in context and across the key methodological elements, they show a number of interesting findings:

- about two in every three prisoners will have been previously imprisoned;
- about one in four prisoners will be reconvicted within three months of being released from prison;

- between 35 and 41 percent of prisoners will be reimprisoned within two years of being released; and
- the recidivism rates (regardless of how they were measured) appear reasonably consistent over time.

3.36 The use of recidivism measures is a very obvious means of monitoring a key effect of rehabilitation. A two-year recidivism measure is a relatively longstanding and standardised measure. While it has limitations, it is a useful performance indicator if used consistently, and with caution, year on year or for specific cohorts.

Rehabilitation to improve ex-offenders' prospects in the community

3.37 The performance measures, as reported in the Productivity Commission *Report on Government Services* and the Justice and Community Safety Directorate's annual reports, are of limited use in determining the benefits of rehabilitation to detainees once released to the community, other than a reduction in reoffending by the detainee. For example, key measures relating to education and employment focus on participation rates while in prison, not on outcomes post release.

3.38 High-level plans in ACTCS set out ACT Government priorities and ACTCS operational priorities and key actions. In the *2008-2011 ACTCS strategic plan*, in relation to the rehabilitation of detainees, two goals are stated which are to:

- provide offender rehabilitation programs that result in reduced risks of reoffending;
- continually evaluate the effectiveness of offender management processes and programs in reducing recidivism.

3.39 The 2011-13 and 2012-17 ACTCS strategic plans establish the operational priority of:

... encouraging change in offender behaviour by effective risk assessment and client centred case management and rehabilitation to i) maintain community safety, ii) reduce rates of recidivism, and iii) achieve reparation.

3.40 ACTCS strategic plans focus on rehabilitation for the purpose of reducing the risk of reoffending, reducing recidivism, and achieving reparation, although these are not accompanied by performance measures. Other key purposes of encouraging detainees to self-improve and lead successful lives in the community are not stated as priorities or goals. Having these as goals would better facilitate the ACT Government's stated purposes for rehabilitation.

3.41 ACTCS officers emphasised the importance of the role of program evaluation to inform the ACT Government's understanding of how rehabilitation results in improved outcomes for detainees, in addition to reducing reoffending. The topic of evaluation is explored further in paragraphs 3.112 to 3.136. Suffice it to say here that there is no evaluation framework and there has been limited evaluation of employment and education programs. However, several therapeutic programs have been evaluated.

- 3.42 The ACT Government's Extended Throughcare program (refer to para 3.108) focuses on improving detainees' prospects upon release. An evaluation framework for Extended Throughcare outcomes is being developed but has not yet been finalised. Current Extended Throughcare program monitoring focuses on the number of detainees entering the program, returns to custody and the reasons for doing so.
- 3.43 Given that there are no performance measures for rehabilitation in ACTCS strategic plans there is no way the ACT Government is able to directly determine whether its:
- strong emphasis on the rehabilitation of detainees is being achieved; or
 - efforts to rehabilitate detainees are reducing reoffending rates or improving ex-detainees' prospects after release.

Delivering rehabilitation for detainees efficiently

- 3.44 In the twenty-year period prior to the ACT Government's 2004 AMC announcements, the building of a prison in the ACT was identified as likely to:
- be a more expensive option than continuing to send detainees to New South Wales and that the small number of prisoners would make it difficult to justify expenditure on programs in an ACT prison (Australian Law Reform Commission, *Sentencing* No 44, 1988); but also
 - result in cost savings compared to maintaining existing arrangements while rebuilding the Belconnen Remand Centre (Standing Committee and Justice and Community Safety Report No. 16: *The ACT prison project: operational models, strategic planning and community involvement*, August 2001, citing the Rengain²⁹ report).
- 3.45 This shows that it is not only the building and operating costs of the AMC that have received attention but also the costs of providing rehabilitation programs.

Productivity Commission reported efficiency measures

- 3.46 The Productivity Commission's *Report on Government Services* identifies several performance measures it refers to as 'measures of efficient resource management' in State and Territory Government Corrective Services. The report also states 'that efficiency indicators are difficult to interpret in isolation and should be considered in conjunction with effectiveness indicators'. The following two *Report on Government Services* performance measures relate to custodial operations:
- costs per detainee per day (operating costs and total cost including capital cost); and
 - utilisation rates (prisoners on-hand versus prison design capacity).

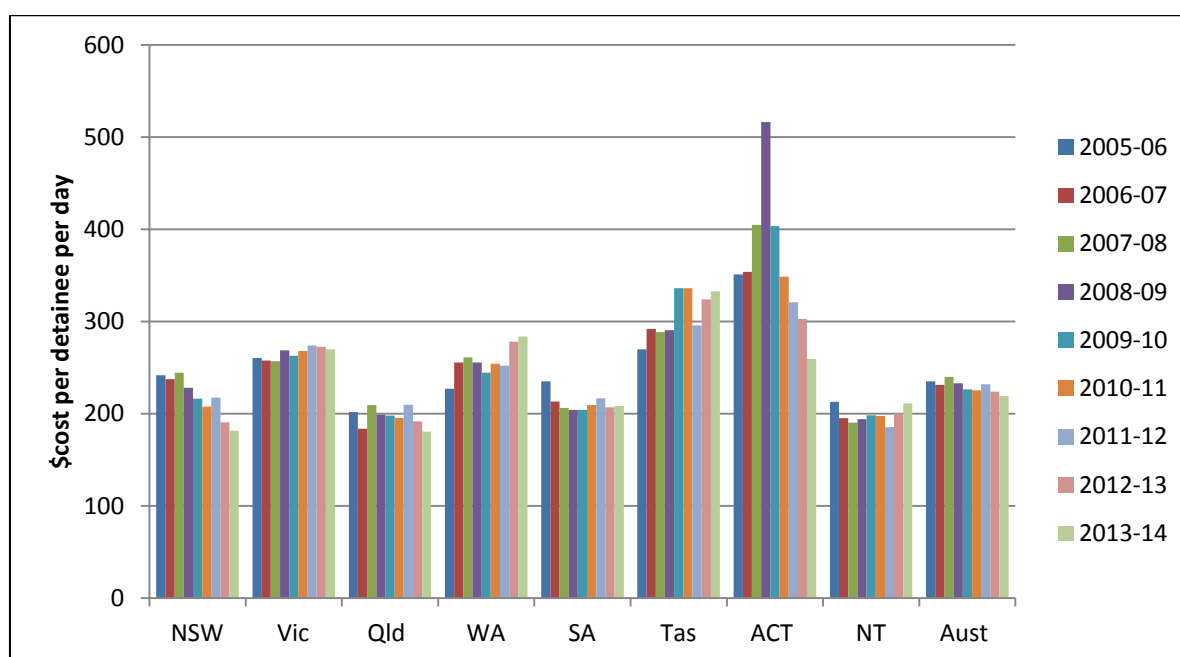
²⁹ ACT Prison Project by Rengain Consultants, for the Minister for Corrective Services, April 2001

- 3.47 Another measure, 'offender-to-staff ratio', relates to offenders on non-custodial sentences and full-time equivalent community corrections staff members. It is, therefore, not relevant to the efficiency of AMC custodial operations.

Costs per detainee per day

- 3.48 The Productivity Commission has been reporting average cost per detainee per day for at least twenty years. The methodology for the unit costing of prison activity has developed over that time such that unit operating costs (excluding capital costs) are now reported as well as total unit costs including capital costs.
- 3.49 While noting that the ACT circumstances are unique, in that the ACT did not have its own full-time custodial facility for sentenced offenders until 2009, the *Report on Government Services* reports indicate that ACT detainee costs per day for all custody settings (secure, open, and periodic) have been consistently higher when compared to those of all other jurisdictions.
- 3.50 However, operating costs per detainee in the ACT have been declining since the AMC received its first detainees in 2009. A contributing factor is likely to be the increasing number of detainees on-hand year on year since the AMC opened.

Figure 3-5 Real net operating expenditure, per prisoner per day



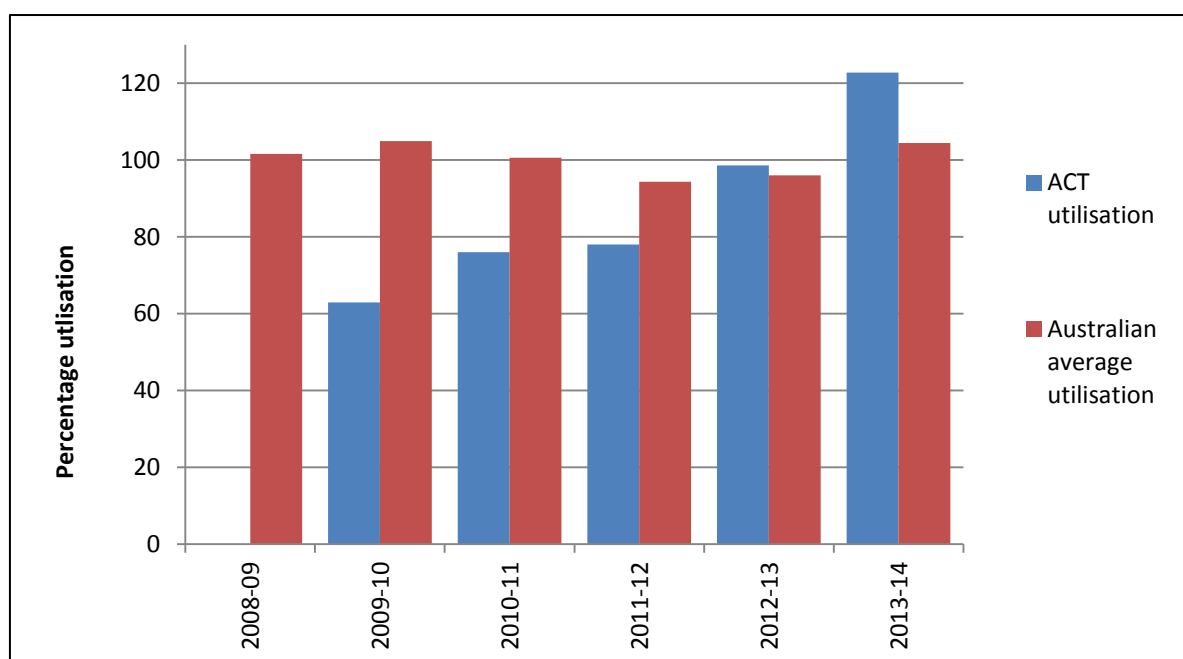
Source: Audit Office, using State and Territory data reported to the Productivity Commission, adjusted using deflators to 2013-4 prices

- 3.51 In 2012-13 for the first time, at \$300 per day, 'net operating expenditure per prisoner' in the ACT was not the highest of all Australian jurisdictions. The ACT 'net operating expenditure per prisoner' continued to fall in 2013-14 relative to previous years and relative to the Australian average.

Prison utilisation

3.52 Paragraphs to 2.166 to 2.175 identify different utilisation rates based on detainee numbers on-hand at the AMC, compared to design capacity and total capacity for the AMC and in relation to planned (2003) and desirable (2014) design capacity. The Productivity Commission's *Report on Government Services* publically reports comparisons of all Australian jurisdictions for utilisation rates in relation to design capacity. This shows that since the opening of the AMC, prison utilisation in the ACT has increased year on year while the Australian average has remained in the range of 94 to 104 per cent. In 2013-14 the ACT utilisation rate (123 per cent) exceeded the Australian average (104 per cent) by 19 per cent.

Figure 3-6 Prison design capacity utilisation (percentage)



Source: Data from *Report on Government Services* 2010 to 2015 (Table 8A.23)

3.53 The *Report on Government Services* efficiency measures of costs per detainee per day (operating costs and total cost including capital cost) and utilisation rates (prisoners on-hand versus prison design capacity) show that, in the period 2009-10 to 2013-14, the ACT has trended towards the Australian average. It was the least 'efficient' of all jurisdictions in 2009-10.

3.54 These two efficiency measures are derived using detainee numbers on-hand. Therefore the improvement in the ACT relative to other Australian jurisdictions must partially reflect the relative growth rate in detainee numbers at the AMC. For example, ACT detainee numbers have been increasing at a faster rate (an average of 15 per cent per year since 2009-10) compared with the Australian average for all jurisdictions over the same period (three per cent per year).

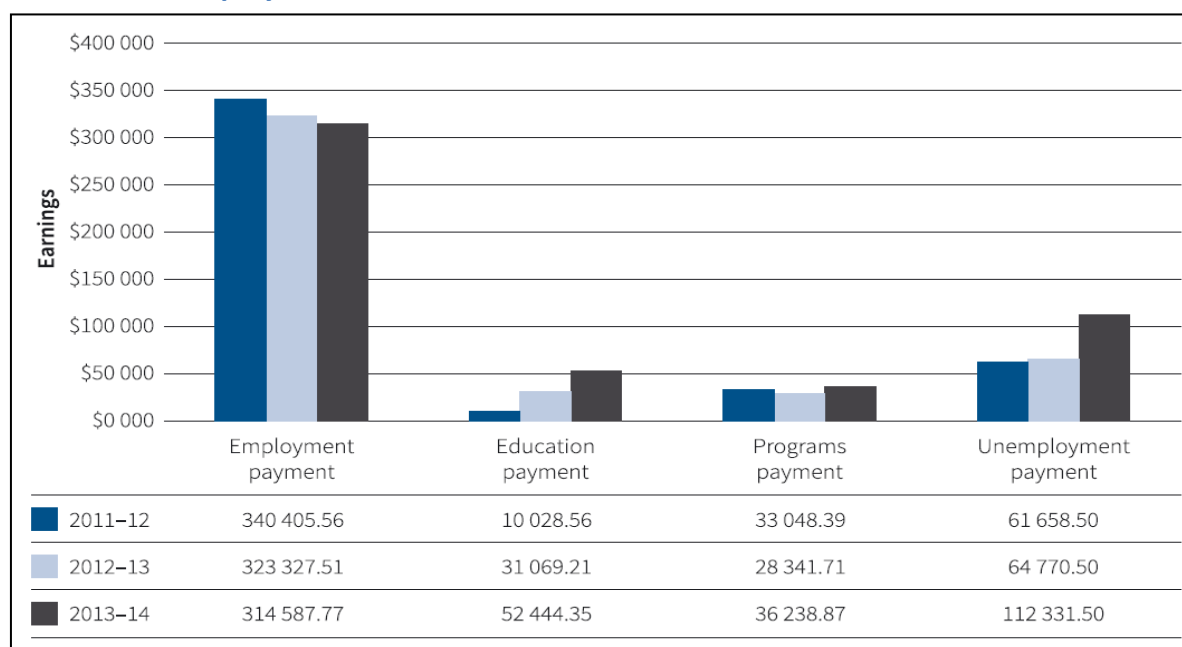
- 3.55 Data for efficiency measures collected or reported at the Australian Government level identify changes in efficiency at the jurisdiction level for prisons. No measure requires data to be collected or reported that is specific to the provision of rehabilitation programs in prisons.

Resources for rehabilitative activity

- 3.56 Aspects of rehabilitative activities and services that can be costed are:

- the direct costs associated with the provision of vocational education and training services and other services such as 'SHINE for Kids' and the Chaplaincy as these are under service agreements or contracts. The total expenditure in these three contracts was \$730 000 in 2013-14; and
- the cost of providing gratuities to detainees participating in all program activities, including employment in AMC services industries. The total cost of gratuities has been around \$445 000 to \$515 000 per year in 2011-12 and 2013-14, with 61 to 76 per cent of this (refer to Figure 3-7) representing employment in essential services. In theory these services would otherwise need to be provided at full cost to the ACT Government. It is a stated objective in the AMC operating philosophy that detainee employment will reduce prison running costs (refer to paragraphs 2.95 and 2.96) but the extent of any reduction is not known to ACTCS.

Figure 3-7 Gratuities for detainee participation in programs, education and employment



Source: Justice and Community Safety Directorate Annual Report 2013-14 Vol. 1 page 73

- 3.57 Expenditure associated with the delivery of education services under contract and gratuity payments represented a comparatively small proportion (three per cent) of the AMC net operating costs of \$30 million for the year 2012-13. Staff costs for the estimated 38 staff

working in or associated with AMC Offender Services represent a greater proportion of AMC net operating costs.

- 3.58 ACTCS officers provided full-time equivalent (FTE) data for AMC Offender Services (refer to Table 3-1). AMC Offender Services officers have duties relating to case management and detainee supervision, programs planning and delivery³⁰ including the Therapeutic Community, employment and visitor coordination, and administration.

Table 3-1 Staffing levels in AMC Offender Services

Full time equivalent (FTE)	2011-12	2012-13	2013-14
AMC Offender Services	30.9	33.3	37.6
AMC Offender Services Staff to detainee ratio	1: 8.09	1 : 8.11 (0.2% decrease)	1 : 8.03 (0.9% increase)
AMC staff – operational	175	168	185
AMC staff - corporate other	29	30	32
AMC operational staff to detainee ratio	1: 1.43	1: 1.61 (11% decrease)	1: 1.63 (2% decrease)
Detainees, 30 June ABS census prior to start of year	250	270	302

Source: ACTCS staff ratios data (25 August, 2014). NB 2012-13 and 2013-14 AMC Offender Services staff includes Extended Throughcare staff that are not recurrent funded.

- 3.59 In the three years 2011-12 to 2013-14 staffing resources within AMC Offender Services increased at a rate similar to that of detainee numbers. Therefore the ratio of staff to detainees has remained stable, with marginal increases (+/- one per cent). However, AMC operational staff numbers have not increased at the same rate as detainee numbers. The staff to detainee ratio has decreased from 1:1.43 to 1:1.63 between 2011-12 and 2013-14, with an 11 per cent decrease in the ratio in 2012-13.

Assessment of efficiency using the *Report on Government Services*

- 3.60 The Productivity Commission's *Report on Government Services* advises that 'efficiency indicators are difficult to interpret in isolation and need to be considered in conjunction with effectiveness indicators'. More efficient use of resources may not be accompanied by more effective services. As stated in paragraph 3.43, the current performance indicators for rehabilitation are unable to be used to identify the Government's effectiveness in rehabilitating detainees.
- 3.61 There are other difficulties in assessing the efficiency of the ACT Government's activities relating to the rehabilitation of AMC detainees using *Report on Government Services* measures:

³⁰ Programs staff included in this figure provide programs to detainees at the AMC and also to offenders in the community via Eclipse House

- the operating costs of rehabilitating detainees are not reported. In any case, while rehabilitation may be the result of specific activities and services, it is also facilitated by all those working with detainees in the custodial environment. Given this it is difficult, and perhaps meaningless, to isolate costs and correlate these with the success or otherwise of rehabilitation programs.
- the real net operating expenditure per jurisdiction reflects each jurisdiction's costs for meeting all its Government's custodial objectives. This includes maintaining a safe, secure and humane custodial environment as well as the rehabilitation of offenders. The 2009 national review of rehabilitation in prisons (refer to paragraph 2.18), published by the Australian Institute of Criminology, identifies that jurisdictions place a different weight on these objectives and so any comparison needs to recognise the different priorities; and
- the ACT is a small population, has only one full-time custodial setting for both remand and sentenced detainees, and the AMC is the first full-time prison for sentenced detainees to operate in the jurisdiction. Also the detainee population in the ACT³¹ has increased on average at 15 per cent a year between 2009 and 2014 compared to an average three per cent increase per year for all Australian jurisdictions. These factors complicate comparison of efficiency or effectiveness measures between jurisdictions.

Internal reviews of expenditure

3.62 The Justice and Community Safety Directorate has requested additional recurrent funding through business cases and budget submissions to Cabinet. Some have focused on addressing AMC operational cost pressures in 2012-13, 2013-14 and 2014-15.

3.63 Cabinet agreed and the Legislative Assembly subsequently approved funding in each of these three years. For example, \$3.28 million was agreed in the 2014-15 budget to provide additional staffing as a consequence of increasing detainee numbers at the AMC. In each case the rationale for additional funding presented by ACTCS cites the priority the ACT Government places on rehabilitation and also identifies:

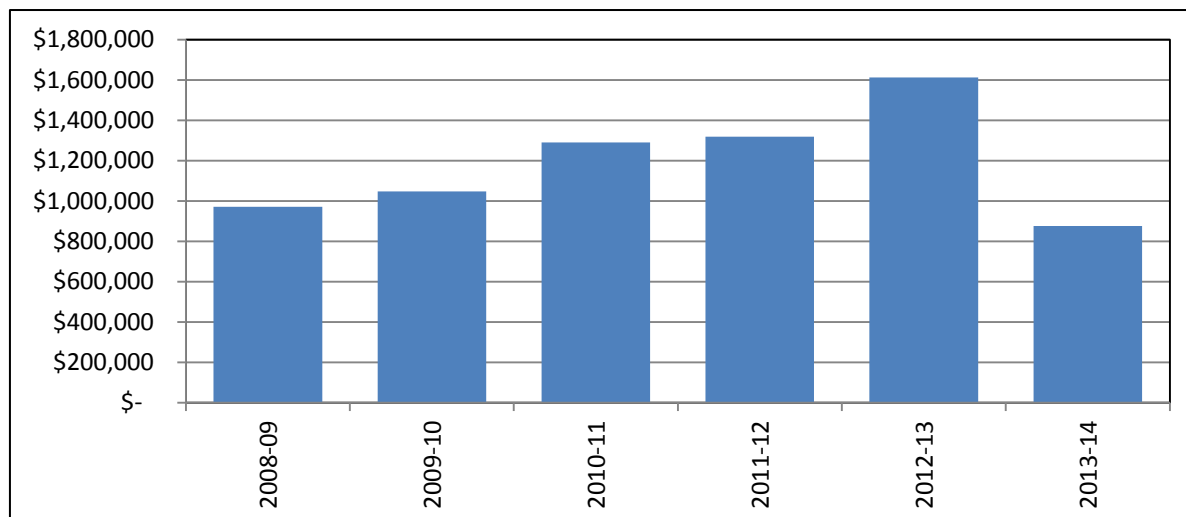
... that without funding ... the ability to deliver the required rehabilitative programs will be at risk

3.64 A number of different methodologies were developed and presented in the submissions to estimate the additional resources needed as the detainee population increased. However, none identified specifically the meaning of 'required rehabilitation' or the costs of rehabilitative activities and services. The cost of providing employment gratuities was considered. Submissions have not stated what it would cost to improve rehabilitation or to what extent rehabilitation costs increase with increasing detainee numbers.

³¹ Australian Bureau of Statistics 30 June census data (from tables 4517) is used here. This is at jurisdiction level, not just the AMC, in order to make like-for-like comparisons

- 3.65 In submissions to Cabinet there has been a focus on the level of expenditure on staff overtime for the running of the AMC. This emphasis is also evident in the pilot monthly management reports between July 2012 and April 2014 (refer to paragraph 3.13).

Figure 3-8 Expenditure on ACT Corrective Services Agency overtime



Source: ACTCS Executive briefing: *An evolving human service*, Aug 2014

- 3.66 ACTCS officers advised that the cost of overtime in 2013-14 significantly declined to \$876 000 from \$1.6 million in 2012-13 (refer to Figure 3-8) as ACTCS improved work practices. Furthermore, as part of this, a 'culture change' has been fostered to improve relationships between management, staff and detainees (refer to paragraphs 5.38 to 5.42).

Independent reviews of AMC expenditure

- 3.67 The Expenditure Review Division in the Chief Minister, Treasury and Economic Development Directorate is responsible for expenditure review activities on specific services and functions as determined by the ACT Government. The Division is currently reviewing ACTCS; examining its financial performance, future levels and standards of service delivery and future sustainability. The review is not specifically considering the efficiency or effectiveness of rehabilitative activities.
- 3.68 In October 2009 the ACT Government expressed a commitment to conduct an independent review into the first year of operation of the AMC, prompted by concerns about delays in the commencement of custodial operations in 2008-09. The review was undertaken by Keith Hamburger and his team during 2010. This review covered a broad range of aspects of AMC operations, some in great detail. However it was primarily concerned with operational effectiveness rather than efficiency.
- 3.69 The level of, and change in, resources specifically for the rehabilitation of detainees at the AMC are not possible to establish as they are not discretely reported. Furthermore, inter-jurisdictional efficiency comparisons are based on all operational resources not just those relating to rehabilitation.

- 3.70 Efficiency relates to a combination of unit cost analysis and effectiveness. The ACT Government does not have adequate mechanisms for monitoring or reporting on the effectiveness of its rehabilitative activities and services. It is, therefore, not possible to establish whether rehabilitation is efficient.

Improving and evaluating rehabilitative activity

Improvement planning at the AMC

- 3.71 Records of the Justice and Community Safety Directorate's Audit and Performance Improvement Committee since the opening of the AMC were examined for improvement activity in the AMC. ACTCS senior officers provided their views on key mechanisms for achieving service-wide, AMC-specific and AMC detainee rehabilitation-specific continuous improvement.
- 3.72 A number of activities, additional to the work of Birgden (refer to paragraphs 2.62 and 4.10), were prominent in discussions with ACTCS senior officers including:
- the review of operations of the AMC by Keith Hamburger (the 'Hamburger Review', 2011), and the Knowledge Consulting *Review ACT Corrective Services Governance including in relation to Drug Testing at the Alexander Maconochie Centre* (April 2011);
 - external assessment of, and organisational commitment to, the International Standards Organisation (ISO) Quality Management System Standard 9001;
 - the cultural change program; and
 - annual business planning.

The Hamburger Review of AMC operations

- 3.73 The Hamburger Review of the AMC's operations, undertaken during 2010 and its report released in March 2011 was the first and, to date, only independent review of the whole prison. The ACT Government commissioned a task force to oversee the response to the 128 recommendations. By March 2012 the task force had identified that over half of the recommendations had been completed, while acknowledging that some relating to 'organisational models, data management, culture and leadership ... will require addressing over many months or even, over many years'.
- 3.74 ACTCS senior officers advised that a closure report in response to the Hamburger Review had been prepared by and circulated within ACTCS Executive in September 2014. Interim and closure reports were examined in this audit and found to have provided a useful mechanism for considering, prioritising and reporting the ACT Government's response to the Hamburger Review.
- 3.75 While the closure report is a self assessment by ACTCS, it points to a large number of completed recommendations that relate to improving good order, the therapeutic

environment and rehabilitative effort within the AMC. The implementation of many of these recommendations should already be having an impact, for example, recommendations relating to:

- leadership and culture (Recs 2, 11, 115, and 123);
- detainee crises, mental wellbeing and behaviour management (Recs 14, 16-27, 55 and 104);
- psychological support (Recs 84, 86 and 87); and
- use of force (Recs 9 and 8), overtime (Rec 125) and Throughcare (Rec 90).

3.76 Other recommendations are recognised as requiring a long time to be completed and are ongoing actions:

- an illicit drugs strategy (Rec 101); and
- recommendations that depend on improvements to information management systems (Rec 85 and 120) relating to program and performance management.

Table 3-2 Recommendation 89 (Structured Day)

<i>Hamburger Review recommendation</i>	<i>'That ACT Corrective Services and AMC Leadership give high priority to ensuring the centre's philosophy of active engagement by detainees in meaningful activities is achieved through an efficiently organised "structured day" where the various staff disciplines ensure attendance and participation by detainees in their programs, activities and employment'</i>
Status	Implemented – Complete
ACTCS response	The Alexander Maconochie Centre does not operate with a strict "structured day" but instead applies a loose routine to ensure that detainees are productively occupied. Programs, Activities, Education and Visits timetables have been reviewed and new timetables are in operation. A detainee's day will vary according to individual case management referrals to each area.

Source: ACTCS closure report on the Knowledge Consulting report, *Independent review of operations of the Alexander Maconochie Centre ACT*, Sept 2014

3.77 With respect to the ACTCS response (Sept 2014) to the Hamburger Review (2011) regarding a 'structured day', ACTCS advised that it did not operate with a strict 'structured day' but 'instead applies a loose routine to ensure detainees are productively occupied'. No evidence was found that it was stated policy to provide a 'loose routine to ensure detainees are productively occupied' rather than a 'structured day' of purposeful activity.

3.78 Paragraphs 5.140 to 5.147 report findings about the probable level of purposeful activity within a structured day.

ISO 9001 Quality Management System

3.79 According to commentary in the Hamburger Review report (March 2011, p318):

The ACT Corrective Services Agency advises that a Continuous Improvement Framework has been in place since 2005, accredited at Certification Standard ISO 9001:2008. To maintain this accreditation ACT Corrective Services Agency is audited twice per year. The last audit was conducted in November 2010. The ACT Corrective Services Agency advises that no other Correctional Agency in Australia has their total organisation accredited under Quality Assurance Standards.

3.80 The 2008-11 Corrective Services strategic plan included a goal of maintaining accreditation against the ISO 9001 standard. However, ACTCS senior officers confirmed that: no assessment has been undertaken since 2012 and that there is no longer Executive commitment to use the standard for the Agency's continuous improvement; and work practice using the standard has not developed since 2012. The ACTCS Executive advised that:

... [the standard's] implementation and maintaining accreditation was highly resource intensive with benefit disproportionate to its cost.

In making this decision, the ACTCS Executive Director concluded that implementing the formal requirements of the standard was diverting attention away from ensuring that suitable corrections management practice had been adopted and making improvements to practice when deficiencies were identified. There was a focus on conformance with documented practice, rather than improving underlying quality of practice.

'Culture change'

3.81 Several senior officers as well as others interviewed from inside and outside ACTCS, identified that ACTCS was in a process of 'culture change'. From their accounts this is resulting in a more productive relationship between staff, and staff and detainees. The results of this process are described in paragraphs 5.38 and 5.42. ACTCS senior officers advised that the Corrective Services Executive's drive to achieve a 'culture change' is not a defined change management program but an overarching philosophy.

3.82 'Culture change' specific to the custodial environment was also commented upon in the Hamburger Review (March 2011):

... that AMC management as part of its Continuous Improvement Plan develop and implement 'culture change' strategies to deal with behaviours driven by traditional negative detainee culture such that detainees and staff are engaged in a manner that facilitates detainee rehabilitation as expected within a 'Human Rights Correctional centre' (page 40).

3.83 ACTCS's assessment in its closure report (refer to paragraph 3.74) states, in response to Recommendation 11 of the Hamburger Review:

Leadership and governance issues that significantly drive cultural change are being addressed by continuing internal review. A number of structural changes have been implemented The creation of these positions and general improvements in leadership have improved the culture amongst corrections officers.

Business planning

Agency planning

- 3.84 The ACTCS strategic, agency-wide plans (2008 to 2017) identify a wide ranging improvement agenda, with 'improvement of service delivery to the ACT Government and to community' as a stated business imperative (2008-11). The plans include a large number of specific improvements, increasing:
- efforts in the rehabilitation of offenders (2008-11);
 - the range and delivery of offender programs (2012-13);
 - ACTCS collaboration, integration and coordination with other government and community agencies to reduce gaps in service provision and prepare offenders for return to the community (2012-13);
 - efficiency and effectiveness of activities through evaluation of practice and active assurance programs (2012-2017); and
 - the use of Corrective Services' performance measures through the establishment of service delivery outcomes (2014-16, the latest ACTCS business plan finalised in December, 2014).
- 3.85 A further part of agency-wide planning is the establishment of annual strategic themes. In 2014-15 two of the ACTCS strategic themes are the *expansion of AMC* and *prison industries*.

Business unit planning

- 3.86 While strategic plans relating to AMC operations seek improved delivery and outcomes the Audit Office was unable to identify a focused, planned and actively managed approach to achieving improvement in rehabilitation efforts. However ACTCS officers identified that many changes to service delivery, for example in AMC Offender Services, have taken place and continue to take place but these are not at this stage established in, and driven by, the Agency's planning framework.
- 3.87 A draft plan, *Offender Services Business Improvement Plan 2014-2017 Draft v1* was reviewed. The draft plan outlined high level tasks but did not provide the means (e.g. the accountability, capacity and timeframe) to achieve them. For example, *the Offender Services Business Improvement Plan 2014-2017 Draft v1* is explicit that there is no overarching business or strategic framework in which the functions and units within AMC Offender Services can operate, and so *a key task is stated as:*
- ... to develop rehabilitation and re-integration frameworks, will include performance standards and service delivery outcome targets ...
- Each area will have a combination of performance measures and monthly service delivery outcome targets that cover *quantity* of effort (number of case plan reviews, etc), and *quality* of effort (% of successful completions, etc)

- Programs and Services will be evaluated to gauge levels of effectiveness across interventions. An evaluation framework is currently being developed
- National Offender Program and Delivery Standards have been developed for Australian Correctional Services. These standards will be incorporated directly into the Rehabilitation Framework.

3.88 Records of regular management meetings at the AMC were examined. These provide a qualitative account of the priorities of each business unit in the AMC. However, there is no evidence of the regular reporting of quantitative measures relating to AMC Offender Services activities, other than those required by the *Report on Government Services* and those that are reported as part of the Directorate's Statement of Performance. ACTCS senior officers advised that a new, AMC-specific monthly reporting and accountability template was being developed and that this would include 'service delivery outputs' for each business area, including AMC Offender Services.

Improvement agenda within the agency and for rehabilitative activities and services

3.89 ACTCS strategic plans highlight improvement priorities. Task-and-finish oversight arrangements have been established, for example, in relation to ACTCS's response to internal and external reviews such as the Hamburger Review (2011). However arrangements are not in place to report or achieve continuous improvement in the AMC Offender Services or more widely across ACTCS in relation to the rehabilitation of AMC detainees.

3.90 At the level of the business unit ACTCS officers confirmed that business and improvement planning in the AMC Offender Services team was to commence in 2014. However it had not been in place in recent years in this business unit. ACTCS officers provided Audit Office with a 2013 draft operational plan template but indicated it was not yet in widespread use.

3.91 Improvement planning for rehabilitation is constrained. Accordingly, it is difficult to demonstrate that all improvement priorities identified at the Executive level are being consistently translated into action in AMC operations.

Current initiatives and recent developments

3.92 Through the budgeting process the ACT Government has recognised the need to invest resources in infrastructure and operations at the AMC. For example³², the ACT Government has provided:

- \$5.124 million over four years to address a number of budgetary pressures identified in the Hamburger Review (from 2011-12);
- \$0.62 million to assist in undertaking a feasibility study into future accommodation needs for the AMC (2011-12);

³² Based on *Historical Budget Initiative Review for the AMC* prepared by ACTCS February 2015

- \$0.85 million to review and address data management issues at the AMC through a two-phased research consultancy and implementation project (2011-12);
- \$2.915 million over four years (from 2012-13) to provide additional operational capacity, repairs and maintenance;
- \$1.363 million over four years (from 2012-13) to address higher levels of AMC overtime;
- \$0.558 million to improve the design and functionality of the Crisis Support Unit (from 2012-13);
- \$5.781 million over four years (from 2013-14) to meet recent increases in service demand;
- \$5.777 million allocated for the design phase of the AMC additional facilities; and
- \$13.6 million over four years (from 2014-15) to meet costs associated with increases in average detainee numbers.

Planning new accommodation for 2015 and 2016

3.93 Future accommodation needs at the AMC have been under consideration for at least three years. The ACT Government's October 2011 response to the Hamburger Review identified that:

Significant work has also progressed on the feasibility study more generally. A tender has been let for the preparation of concept drawings addressing such issues as physical location, basic layout, interoperability and connection to existing utilities.

3.94 The ACT Government announced funding on 4 June 2013 to build new, flexible accommodation at the AMC for 110 detainees with a surge capacity of 142 in order to meet short and medium term needs. This accommodation comprises a 30 bed special care centre (due on stream in 2015) and an 80 bed accommodation block (2016). The Minister for Corrective Services' media release (May 2014) identified:

Building design has been carefully considered to not only deliver increased bed numbers, but also enhance staff safety and allow for more flexible management of detainees through clever use of space. The new facilities will deliver security, safety, rehabilitation and value for money.

3.95 The ACT Government announced in the 2014-15 budget funding of \$54.09 million to construct, and \$25.5 million over three years to run, the 30 bed Special Care Centre and the 80 bed accommodation block (from 2015-16).

3.96 ACTCS officers discussed with the Audit Office some of the key management challenges of the first five years of operation of the AMC (refer to paragraphs 1.20 to 2.148) and how these would be eased by the design of the new accommodation.

- 3.97 The functional design brief³³ was reviewed and examined and the plans for the new buildings were discussed with ACTCS officers. The functional design brief states that the new accommodation 'will lead to significant improvements in separation, consequentially leading to improved safety and security outcomes and rehabilitation prospects for detainees' (page 21).
- 3.98 ACTCS officers identified the inclusion of rehabilitation areas within each building. This should ease the current challenges relating to classification and protection issues when detainees need to move through different areas of the AMC in order to access the programs area. Detainees in each of new buildings will be able to access programs and services, including some health services and interview space, without needing to be escorted to another area of the AMC by a custodial officer.
- 3.99 ACTCS officers advised that the 30 bed special care centre, due to open in mid 2015, was designed with rehabilitation programs in mind; this includes ensuring acoustics in the program rooms allow detainees to be heard and interview rooms provide privacy. ACTCS officers also noted that the special care centre is designed so that it would be possible to provide a specific, live-in program setting for particular detainee cohorts: e.g. a six-month sexual offenders' program; new detainees during induction; or a step-down, reintegration program from the Crisis Support Unit (allowing monitoring of progress).
- 3.100 The 80 bed accommodation block, due for completion in mid 2016, includes space for program facilitators, service providers and case managers in the custodial officers' area. This is to facilitate communication between the custodial officers and the program and case management staff while providing program and case management staff and detainees with opportunities for unscheduled, informal communication.
- 3.101 ACTCS officers advised that the design and features of the proposed AMC additional facilities will address the current challenges imposed by the classification and protection status of detainees. This will have a positive impact on:
- providing purposeful activity for detainees more efficiently;
 - increasing the volume of visits; and
 - the management of male detainees across the AMC. Officers identified that the capacity and use of the new accommodation, and the reduction in detainee movements, will allow for greater flexibility in managing detainees housed elsewhere in the AMC.
- 3.102 Data on detainees' access to rehabilitation programs, prior to and post the new AMC buildings, needs to be collected and evaluated to inform changes to future developments at the AMC.

³³ ACT Government, *Functional Design Brief Alexander Maconochie Centre Additional Facilities*, Construction Control 15 April 2014

Developing 'throughcare'

- 3.103 The concept of 'throughcare' dates back at least 20 years in Australian corrective services practice. The ACT Criminal Justice System strategic plan 2002-2005 refers to 'throughcare', as does the 2001-2004 New South Wales Corrective Services department corporate plan.
- 3.104 'Throughcare', in relation to offenders detained in the ACT, is described in the operating philosophy for the AMC, set out in the Ministerial announcement of 24 August 2004, as involvement:
- in prisoner health and well-being, and rehabilitation;
 - from the community to the prison and back to the community;
 - that engages family and close associates in the behavioural change process;
 - that ensures support (i.e. 'aftercare') to the prisoner as he or she re-enters society; and
 - that ensures an integrated (i.e. multi-disciplinary) and seamless approach to the delivery of services for offenders and provides continuity of knowledge of the offender, programs and other services.
- 3.105 'Throughcare' as expressed in the operating philosophy for the AMC and in a draft *ACTCS Throughcare Framework* for the AMC (28 August 2007) is presented as an opportunity for continuity in supporting a detainee regardless of whether the offender is in the community or in custody. It is also an important means for facilitating the integration of a detainee into their family and community as part of the rehabilitation process.
- 3.106 The independent *Community Corrections Review for ACT Corrective Services* (2013) considered the effectiveness of the throughcare model of case management, recognising the ACT Government's intention to introduce additional support to ex-offenders for up to 12 months post release.
- 3.107 In 2012-13 the ACT Government provided \$1.137 million over two years for a pilot on Extended Throughcare. The principles underpinning Extended Throughcare were set out in an options paper prepared by the Chief Minister and Cabinet Directorate, *Seeing it Through*.³⁴

... while technically throughcare in the Corrections context ends with the completion of mandated contact with ACT Corrective Services, it is generally understood that the support needs of offenders do not end with their release from prison or completion of a community based order. In fact, their support needs are greatest at this time because their needs are multiple, complex and ongoing. Therefore, release from prison is a critical transition point for the individual being released, as transitions represent a fundamental shift for the person transitioning. For those with multiple and complex needs, transitioning can be daunting and exacerbated by the barriers they face when accessing support services in the community.

³⁴ *Seeing it through: Options for improving offender outcomes in the community*, prepared by the Social Policy and Implementation Branch of the Chief Minister and Cabinet Directorate, Dec 2011

- 3.108 The ACT Government's pilot Extended Throughcare initiative is therefore distinct from 'throughcare' as a mainstream practice elsewhere, as initially planned for the AMC, although both include 'aftercare'. Extended Throughcare is primarily focused on improving reintegration during the 'at risk' period immediately after release, and seeks voluntary participation. It is less focused on encouraging 'change from within' (refer to paragraph 2.58) and more on removing or avoiding the triggers of recidivism. It is not a substitution for 'throughcare' as defined in the AMC's operating philosophy but is an enhancement of pre and post release ('aftercare') services.
- 3.109 The ACT Government provided \$2.176 million to fund the pilot Extended Throughcare initiative for a further two years in the June 2014 budget announcement. An independent process evaluation, *A preliminary review of Throughcare in the ACT*³⁵, was conducted for ACTCS after the first ten months of Extended Throughcare (August 2014).
- 3.110 The meaning of 'throughcare' relating to the case management of a detainee was considered in this audit to understand how it differed from the ACT Government's Extended Throughcare initiative introduced in 2012-13. The July 2014 draft *Case Management Policy Framework* (refer to paragraph 2.50) refers to 'throughcare', but not specifically Extended Throughcare, and is inconsistent in the use of the term. It refers to a 'unit model', a cohort of 'throughcare recipients', and to an 'integrative approach to case management'. This terminology is not consistent in describing either 'throughcare' as originally defined in the operating philosophy for the AMC, or Extended Throughcare as implemented since 2012-13. However ACTCS officers advised that this will be addressed before the draft *Case Management Policy Framework* finalised.
- 3.111 The meaning of the 'throughcare' of detainees in the AMC needs to be defined as the only current expression of 'throughcare' is in the draft *Case Management Policy Framework* (July 2014). Furthermore, in this framework the term is not described consistently and does not distinguish between 'throughcare' and the pilot Extended Throughcare initiative. Without clarity, there is a risk that 'throughcare' as intended in the AMC operating philosophy, is not being achieved.

Evaluating rehabilitative programs

- 3.112 The operating philosophy of the AMC stressed the importance of evaluation and in particular, the evaluation of rehabilitative programs. For example it was stated in the 2007 delivery strategy that:
- the AMC will demonstrate high levels of accountability and transparency in all aspects of its operations to provide maximum opportunity for independent scrutiny, oversight and evaluation; and

³⁵ Taylor E, *A preliminary review of Throughcare in the ACT*, A Report for the Throughcare Unit, ACT Corrective Services, August 2014

- programs need to be well-managed and coordinated, to be appropriately resourced and evaluated on an ongoing basis to determine effectiveness and inform future direction.

3.113 The Hamburger Review (2011) concluded that:

ACT Corrective Services Agency advises that longitudinal evaluation of the effectiveness of the programs on detainees' rehabilitation over time has not commenced as yet. This matter is currently under preliminary consideration by ACT Corrective Services.

3.114 The extent to which the evaluation of program activities has occurred since the Hamburger Review was released in March 2011 was examined.

Therapeutic programs

3.115 The *Vocational Education and Training and Rehabilitative Programs at the Alexander Maconochie Centre* (2007) cites Andrews (2001)³⁶ who identified a 'number of key principles that have gained broad consensus of researchers in the field of criminology', including that:

Programs should be delivered in the manner in which they were intended (i.e. with program 'integrity'). To achieve this, intervention programs should:

- be based upon a specific, empirically sound theory;
- select staff based on attributes associated with successful intervention;
- train staff to ensure they can deliver the program properly;
- supervise staff on a regular basis;
- use trained clinical supervisors;
- have consultation services available for clinical supervisors;
- have printed/taped program manuals;
- monitor service delivery for quality;
- monitor changes in offenders;
- take action to ensure adherence to service process;
- provide an adequate dosage, duration, and intensity of service;
- involve a researcher in the design, delivery and evaluation of the service; and
- ensure that other staff and management issues support rather than undermine the integrity of the program.

3.116 The 2009 national review of all Australian jurisdictions' prison-based correctional offender rehabilitation programs published by the Australian Institute of Criminology (refer to paragraph 2.19) identified the three highest intensity/longest duration criminogenic programs in the AMC as:

- Cognitive Self-Change Program (100 hours plus);
- Family Violence Self-Change Program (100 hours plus); and
- Adult Sex Offender Program (24 months).

³⁶ Andrews D, *Principles of Effective Correctional Programs* in Motiuk L, Serin R, *Compendium 2000 on Effective Correctional Programming* Correctional Services Canada, Ottawa 2001

Outcome evaluations

- 3.117 The 2009 national review identified that pre and post individual assessment tools had been selected for the Cognitive Self-Change Program, the Family Violence Self-Change Program and the Adult Sex Offender Program, and program-wide evaluation had been planned. The authors of the 2009 review concluded:

The next five years for ACT Corrective Services' Corrections Programs Unit will initially comprise the bedding down of the programs provided in prison, learning from the experiences of the first few cohorts through each program, and adapting the content and delivery of the programs jurisdictions. ... Evaluation of longstanding and newer programs remains a priority ...

- 3.118 In 2012-13 ACTCS initiated a review of its criminogenic programs by Birgden (refer to paragraph 2.62). The review report, finalised in April 2013, concluded that process and outcome evaluations were lacking for the Cognitive Self-Change, the Family Violence Self-Change and the Adult Sex Offender programs. Furthermore the review found that the Adult Sex Offender Program manual had not been reviewed since 2003 despite the stated intention to conduct biannual reviews.
- 3.119 The April 2013 Birgden review identified shortcomings in the use of in-program assessment and evaluation, pre- and post-measures, and post-program follow-up. ACTCS officers advised that the review was predominantly a desktop review and therefore some of the conclusions need to be tested in practice. However, ACTCS officers also advised that some of the shortcomings have not been addressed. There was no evidence of any ACTCS mechanism for prioritising actions to address shortcomings.
- 3.120 ACTCS officers advised that an evaluation is now being undertaken for the Cognitive Self-Change Program. Evaluation of other programs has been planned or implemented, including:
- Solaris (the Therapeutic Community) has had both process and outcome evaluations;
 - drug policies and services and their subsequent effects (Burnet Institute, April 2011);
 - the Domestic Abuse Program, introduced in 2013 as a successor to Family Violence Self-Change Program. It has arrangements that enable it to be evaluated as part of the New South Wales Corrective Services evaluation framework, currently underway; and
 - the Forensic Schema Therapy pilot that commenced in 2014 (evaluation is planned).

Process evaluation

- 3.121 The pilot Extended Throughcare was the subject of a process review in August 2014. The development and implementation of an evaluation framework has been funded for 2014-15. The 2014 preliminary review (refer to paragraph 3.109) highlights early successes in the 'high proportion of enrolment from eligible detainees' and 'considerable level of support from partner agencies' for Extended Throughcare. However the review also points out weaknesses in the available information with respect to conducting an evaluation and validating processes.

- 3.122 The Birgden review (2013) of programs identified that program ‘integrity’, that a program is run according to its design principles to ensure it achieves its objectives, is severely compromised in some programs. For example, Birgden’s desktop assessment of the Cognitive Self-Change Program led her to conclude that while the program design met 86 per cent of standards (refer to paragraph 2.63) program delivery was likely to meet only 43 per cent of the standards.
- 3.123 ACTCS officers confirmed that there is no documented approach to assuring program delivery and that there is no auditing procedure for verifying compliance with program requirements or standards. Some program manuals specify particular delivery requirements but officers report that these are not necessarily met. For example, the following are not routine practice in programs where the program manual requires it:
- the development of individual treatment plans;
 - on-program (in session) facilitator supervision, review and feedback;
 - the setting of end-of-program goals; and
 - the completion of individual detainee exit reports.
- 3.124 The operating philosophy of the AMC stresses the importance of evaluating programs. Some are evaluated, such as programs relating to substance abuse (not considered in this audit). However, ACTCS has not routinely evaluated, audited or undertaken quality assurance procedures for many of its therapeutic, including criminogenic, programs. This and the lack of evaluation, auditing and quality assurance, present the risk that improvements are not being made which could benefit the rehabilitation of detainees and improve the delivery of programs.

Education programs

- 3.125 The *Vocational Education and Training and Rehabilitative Programs at the Alexander Maconochie Centre* (the 2007 delivery strategy) identifies four learning and assessment strategy objectives³⁷ against which activities may be measured:
- **Access:** To improve access to vocational education and training for adult prisoners and offenders;
 - **Participation and attainment:** To support successful participation and attainment across a range of fields of study and levels of vocational education and training;
 - **Employment and lifelong learning:** To contribute to the employment and learning pathways which can support the successful re-integration of offenders into the community; and

³⁷ Reflecting those in *Rebuilding Lives: VET for Prisoners and Offenders 2006* (a companion document to the *National Strategy for Vocational Education and Training for Adult Prisoners in Australia*, Australian National Training Authority)

- **Promoting quality and accountability:** To create an accountable system that provides quality vocational education and training outcomes for offenders.
- 3.126 Education services, primarily covering vocational education and training, induction assessment and learning planning have been provided under contract by Auswide Colleges since the AMC received its first detainees in March 2009. The contract has been extended three times by a deed of variation and was re-let and then transferred to Campbell Page in November 2014.
- 3.127 For most of the period of operation of the AMC Auswide Colleges, as a registered training organisation, delivered accredited learning and was regulated by the Australian Skills Quality Authority. From July 2014 Campbell Page is to provide a copy of the Australian Skills Quality Authority audit report to ACTCS annually.
- 3.128 The contracts for the period 15 Jan 2008 to 1 July 2014 have required the preparation of regular reports against key performance indicators that show 'progressive achievements' for each year and a facility for consolidated quarterly reports to be prepared 'upon request'. The monthly reports provided by Auswide Colleges were examined in this audit. These do not report progressive achievements so that it is not possible to monitor progress or improvement over time. ACTCS officers advised that no consolidated reports or quarterly reports have been requested or provided, except for two particular groups of detainees: women (June 2013) and indigenous detainees (April 2012). These report on education participation and achievement for women and indigenous detainees on-hand on a particular day.
- 3.129 There has been no discrete independent evaluation of the effectiveness of vocational education and training provision in the AMC. However, in the period 2014 to 2017, the University of New South Wales will undertake an evaluation of the relationship between in-prison and post-prison vocational education and employment programs, employment and recidivism across Australia. ACTCS is one of six partner organisations outside the University sector to be involved in the research.
- 3.130 Education provision was reviewed after the first year of operation of the AMC as part of the Hamburger Review (2011). This review did not consider the effectiveness of vocational education and training outcomes in improving detainee prospects upon release but did note:
- the achievement of establishing a relevant suite of accredited vocational education and training courses as well as literacy and numeracy program and tertiary studies;
 - rooms and equipment provided for program intervention and other educational programs were of high quality;
 - processes appeared to be sufficient to ensure quality of intervention and education programs; and
 - only about 50 per cent of detainees enrolled in vocational and educational programs attended during the first year of the AMC's operations due to a variety of reasons

such as lockdowns, lack of roving staff to perform escort duties, names incorrectly left off list and a range of detainee-driven reasons such as a lack of detainee interest.

- 3.131 Summary management reporting on the quality of the provision of vocational education and training activity in the AMC and on maintaining or improving detainee participation rates has been limited. Furthermore, there has been no discrete independent evaluation of the effectiveness of vocational education and training provision in the AMC. This presents the risk that needed improvements in the vocational education and training activity in the AMC are not identified and implemented.

Employment programs

- 3.132 In its *Report on annual and financial reports* no. 6 (Tabled 20 September 2011) the Standing Committee on Justice and Community Safety considered it important:

... that Corrections institute formal, ongoing, quantitative and qualitative evaluation processes for the Alexander Maconochie Centre's employment program, and that base-line data be established, at the earliest possible opportunity.

- 3.133 The Justice and Community Safety Directorate's annual reports 2009-10 to 2013-14 provide commentary on the type of employment activity, the hours of employment or gratuities provided within the AMC, work release for Transitional Release Centre detainees and pre release skills training. However the commentary does not include any analysis of employment outcomes in the AMC or the community once released. This may be achieved by the University of New South Wales led research into in-prison and post-prison vocational education and employment programs (refer to paragraph 3.129).
- 3.134 An evaluation of the AMC's employment program has not occurred. Therefore it is not possible to determine the extent to which detainee employment contributes towards the objectives of the ACT Government.

An evaluation framework

- 3.135 ACTCS officers advised that a number of evaluation activities have been concluded, planned or are underway, but that there is no overarching evaluation framework. The draft *Offender Services draft business improvement plan* (May 2014) (refer to paragraph 3.87) states that:

... programs and services will be evaluated to gauge levels of effectiveness across interventions. An evaluation framework is currently being developed'.

- 3.136 ACTCS officers identified factors that inhibit the implementation of programs 'resourced and evaluated on an ongoing basis' (refer to paragraph 3.112). These factors include the small scale of custodial operations in the ACT that results in a small research population of a sub-optimal size, and very limited corporate and managerial capacity to undertake research and analysis. However, where possible programs, particularly therapeutic programs, are purchased on licence from other jurisdictions where they have been

evaluated³⁸. This reduces the need for ongoing evaluation but increases the need for quality assurance to ensure programs are run according to their design.

- 3.137 There is currently no evaluation framework despite the priority in the operating philosophy for the AMC on evaluating programs related to rehabilitation.

RECOMMENDATION 3 ACCOUNTABILITY AND REPORTING (CHAPTER 3)

Internal performance measures for rehabilitative activities and services should be developed by ACTCS. These measures should:

- a) reflect work already underway in response to the 2014 *Review of Corrective Services Strategic and Accountability Indicators*;
- b) complement those measures reported by the Justice and Community Safety Directorate (in its annual reports);
- c) be supported by the collection of data which is stored in ACTCS information management systems; and
- d) be included in business planning, be routinely monitored and guide improvements.

RECOMMENDATION 4 EVALUATION FRAMEWORK (CHAPTER 3)

An evaluation framework for rehabilitative activities and services should be developed by ACTCS which, among other things:

- a) integrates data collection, monitoring and evaluation;
- b) specifies priorities, frequency and timeframes for evaluation;
- c) guides routine programming of auditing and quality assurance work; and
- d) establishes the basis for evaluating the changes in detainees' access and completion of rehabilitation programs prior to, and post, the completion of the new AMC buildings.

RECOMMENDATION 5 THROUGH-CARE (CHAPTER 3)

'Through-care' and Extended Through-care should be defined and incorporated into ACTCS policy.

³⁸ For example, Corrective Services NSW Corporate Research, Evaluation and Statistics *Corrections Treatment Outcomes Study on offenders in drug treatment*, Research Bulletin no. 31, September 2011, which includes the SMART program, similar to that run at the AMC

4 INDIVIDUALISED REHABILITATION

- 4.1 This chapter examines how rehabilitation planning and delivery is individualised to meet the needs of detainees. Case management and the associated risk and needs assessment of detainees are considered.

Conclusion

Case management plans have an important role in the rehabilitation of detainees. While the need for a case management policy framework, to guide case managers' practices in the AMC was first identified in 2007, five years after the AMC received its first detainees there is no finalised case management policy framework. A draft *Case Management Policy Framework* (July 2014) has been prepared. It needs to be updated and finalised to guide desired, and prevent unwanted, practices.

There have been improvements in case management administration including increased contact between detainees and their case managers, improved timeliness of assessments and improved quality of case notes. However, inadequacies in case management supervision and the coordination of, and communication between, those who contribute to case management needs to be addressed. Guidance on how this is achieved could be given in the finalised case management policy framework.

While the individual needs of male detainees in the AMC are met to varying degrees and Aboriginal and Torres Strait Islander detainees have additional support, there is a need to give specific consideration to detainees with physical or intellectual disabilities and those from culturally and linguistically diverse backgrounds. Accordingly, data needs to be collected on these detainees to determine their support needs and inform their case management plans. The finalised case management policy framework could provide guidance for the collection of this data.

There are inadequacies in the ACTCS information management system (JOIST). These need to be addressed quickly as this system is restricting the ability of ACTCS to better manage the AMC and make timely improvements.

Key findings

	Paragraph
A formal case management policy framework has been a stated priority since April 2007. However, a draft <i>Case Management Policy Framework</i> (July 2014) was only recently developed. In the absence of a finalised framework, AMC case managers have no common reference to guide their activities.	4.14
ACTCS documentation from 2007 to 2014 shows that the 'centrality of the detainee' within case planning has been evolving in terms of what this means and	4.32

how it is to be achieved. The lack of a finalised case management policy framework presents a risk that inconsistent practice will occur.

Comments made by case managers and detainees indicate that there is variable ownership by detainees of their case plans. Encouraging ownership may enhance detainees' motivation and therefore their prospects for a successful outcome from rehabilitation. 4.51

A review undertaken by the Australian Institute of Criminology of the case files of 50 detainees showed that detainees' personal goals were only noted in 14 per cent of the 50 cases. However, with respect to identifying and recording information relating to detainees' risks of reoffending, the percentages were significantly higher, for example, offending history, and alcohol and drug use were noted in over 80 per cent of cases. As there is no finalised case management policy framework to provide guidance, it is not clear if this practice is appropriate. 4.53

The case file review found that the targets in the draft *Case Manager's Guidelines* (June 2014) for the: 4.56

- completion of induction for new arrivals met the seven day target for around 90 per cent of detainees in 2011-12 and just over 80 per cent in 2013-14;
- classification of detainees met the three-week target for around 80 per cent of detainees in 2011-12 and 100 per cent in 2013-14; and
- production of a case plan met the target of completion by six weeks for just under 80 per cent in 2011-12 and around 70 per cent in 2013-14.

Given the importance of case plans priority needs to be given to improving their completion for all detainees within the target six weeks. 4.57

Completeness of records improved for information on induction and case plans: from around 45 per cent in 2011-12 to just over 80 per cent in 2013-14. While this is a significant improvement, achieving 100 per cent completeness needs to be pursued. 4.58

The review of 50 detainee case files showed that case managers' contact levels with detainees have improved from 80 per cent in 2011-12 to 92 per cent in 2013-14. 4.61

The adequacy of case notes was assessed in the review as 44 per cent in 2011-12 and 84 per cent in 2013-14. Despite this significant improvement, the scope of coverage of case notes of the detainee risks and needs did not significantly improve: it was 56 per cent in 2011-12 and 59 per cent in 2013-14. 4.64

The review of case notes by the Australian Institute of Criminology reviewer found that case managers prepare their case notes in different ways. Some are prepared as basic chronologies of events, while others provide details which facilitate a fuller understanding of the detainees' needs, aspirations and progress. It was not possible to confirm whether the different approaches to the preparation of case notes reflects different levels of interaction with detainees, different insights or different case manager approaches to writing notes.

4.65

The completion of timely initial and follow up LSI-R assessments according to proposed standards in the draft *Case Manager's Guidelines* (June 2014) showed that there has been:

4.67

- a very significant increase in the number of LSI-R reassessments undertaken within 12 months; from 31 per cent in 2011-12 to 100 per cent in 2013-14;
- an increase in the number of detainees with current LSI-R assessments on entry to the AMC or assessments that have been undertaken within six weeks of entry; from 70 per cent in 2011-12 to 86 per cent in 2013-14; and
- a decrease in the number of LSI-R assessments undertaken within six weeks for detainees without current LSI-Rs when they enter the AMC; from 80 per cent to 67 per cent.

The timelines of the LSI-R assessments has generally improved between 2011-12 and 2013-14. Timely LSI-R assessments maximise their value in informing case management planning and review.

4.68

Although ACTCS case management officers described their supervisory activities, the documented evidence of these is inadequate, and does not facilitate:

4.71

- identifying individual learning and development needs or systemic issues relating to the case managers or case management;
- building assurance as to the reliability of the LSI-R assessment; or
- an assessment of caseload performance of a case manager or the case management team as a whole in relation to meeting minimum standards, quantitative or qualitative measures.

Communication and coordination between the programs team, the case management team and custodial officers need to be improved. This is acknowledged as an issue by ACTCS officers. Improved communication and coordination would enhance the ability of ACTCS to support detainees.

4.79

Information on detainee access to programs is inadequate. While this is the case, that which exists indicates that access for some detainees is problematic. However, access to programs is not solely determined by the capacity of AMC

4.82

Offender Services to provide a program as detainee readiness is equally important.

While the draft *Case Management Policy Framework* (July 2014) facilitates the capturing of data on Aboriginal and Torres Strait Islander peoples, it does not facilitate the capturing of data on detainees with physical or intellectual disabilities or those from culturally and linguistically diverse backgrounds. 4.99

Considerable support is provided for Aboriginal and Torres Strait Islander detainees, ranging from specific programs for indigenous people to having access to an Indigenous Liaison Officer, an Indigenous Case Manager and an Indigenous Official Visitor. Additionally, AMC Offender Services officers meet with the ACT Aboriginal and Torres Strait Islander Elected Body and Relationships Australia and Winnunga Nimmityjah Aboriginal Health Services provide specific services at the AMC. 4.108

Data collection on detainees from culturally and linguistically diverse backgrounds is inadequate. Given that about 16 per cent of the AMC population were born overseas (June 2014) it is important that data on this cohort be collected and used to assist in their case management and to identify gaps in service provision. 4.113

ACTCS does not collect data on detainees with physical disabilities and therefore it is not possible to determine how well this cohort is supported. 4.116

There is a risk that only screening those detainees with an apparent intellectual disability may miss detainees with less obvious intellectual disabilities. If a detainee has an apparent intellectual disability a formal assessment would be more appropriate than a screening tool. 4.128

Individualised services for detainees with a mental illness have increased since the introduction of the Corrections Psychological and Support Services unit, including the High Risk Assessment Team and the Schema Therapy Group. However, there is a need to examine whether detainees from a culturally or linguistically diverse background or those with an intellectual or physical disability could be better supported. Furthermore, it will be important for evaluations of any interventions to be undertaken so that resources are effectively targeted. 4.151

The JOIST computer system has been inadequate as it has been unable to produce the type of management information that could assist in better managing AMC rehabilitative activities and services. The initial 2012 preparatory work to improve or replace JOIST has taken time to progress. There is a pressing need to progress improvements quickly. 4.159

The role of case management in detainee rehabilitation

4.2 Case management is:

... the professional task that involves engaging an individual in the process of change, through supervision and monitoring progress, delivering and/or brokering the necessary interventions to support that change, and promoting engagement and compliance. The application of those aspects of case management will vary between routine and intensive depending on the case.³⁹

Case management in Australian correctional services

4.3 Periodically revised *Standard Guidelines for Corrections in Australia* represent a 'statement of national intent' for Australian correctional services. The latest edition of the standards (2012) was adopted by all Australian jurisdictions. The 2012 standards include guidance on the case management of detainees:

- Each Administering Department should administer a system of individual case management of prisoners that enables the assessment, planning, development, coordination, monitoring and evaluation of options and services to meet the individual needs and risks of persons as they move between community corrections and prisons (page 30);
- All sentenced prisoners other than those serving a very short term, should have a sentence plan (or case plan) developed as soon as practical after receipt into custody. The prisoner should be encouraged to actively participate in the development of their individual plan (page 30);
- Arrangements for the case management of offenders should, as far as possible, be stable and consistent over time (page 10); and
- Case plans, including classification and placement plans of prisoners, should be regularly reviewed allowing for the prisoner as well as staff to provide updated information and should contain measurable and achievable short term and long term goals (page 30).

Case management in the ACT

4.4 The role of case management in improving the rehabilitation of ACT prisoners has been consistently identified in the operating philosophy for the AMC. Arrangements for case management were explored by the Standing Committee on Justice and Community Safety (October 1999) and identified in the Ministerial announcement on the building of the AMC in August 2004. A Vocational and Educational Programs Working Group (2004-2007) worked on refining the case management operating model and procedures prior to the opening of the AMC.

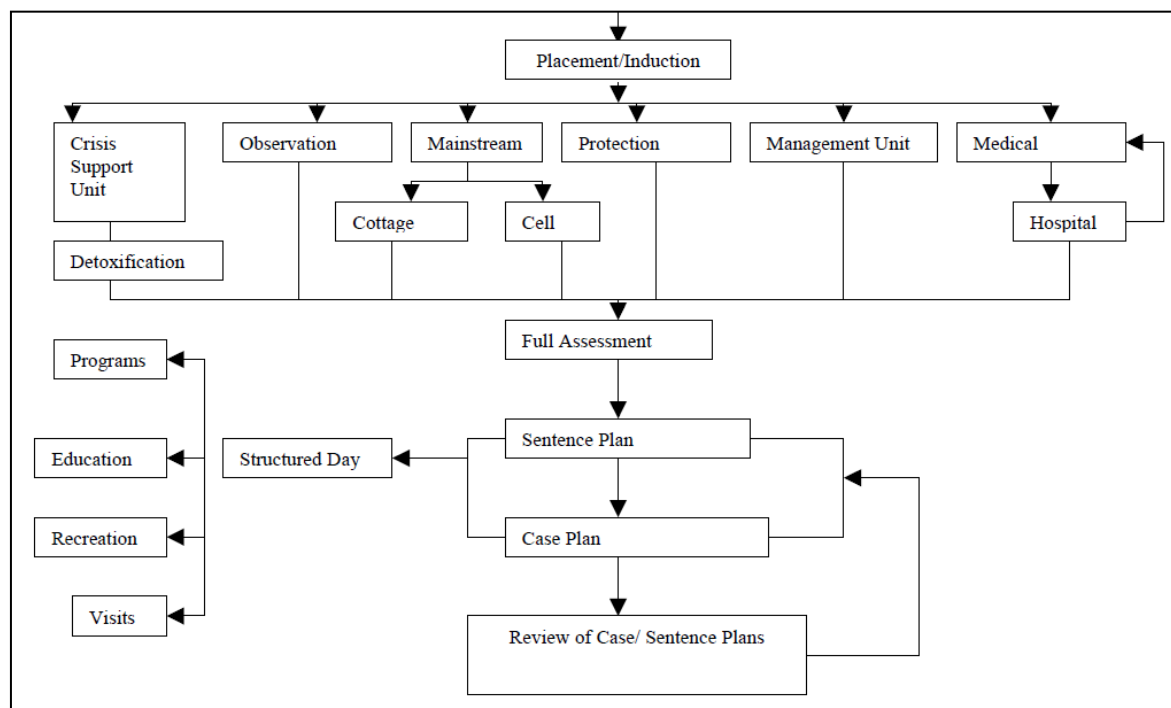
4.5 Central to case management is the case plan (refer to Figure 4-1). The *Corrections Management Act 2007* (s73) requires that the 'director-general must arrange for a case management plan to be prepared for detainees as soon as practicable after the detainee's admission to the correctional centre'. Section 78 requires the preparation and

³⁹ Framework for Risk Assessment, Management and Evaluation, (FRAME) Risk Management Authority, Scotland, 2011, p 27

maintenance of a plan for sentenced detainees, provides for the preparation and maintenance of a plan for remandees, and states what may or must be dealt with in the scope of these plans.

- 4.6 The *AMC Communications Plan* (2007) outlines the role of case management and case planning following detainee induction as a mechanism that informs the development of a detainee's 'structured day'.

Figure 4-1 The centrality of case plans to rehabilitation



Source: Justice and Community Safety Directorate AMC Communications Plan April 2007 operating model p17

- 4.7 The *AMC Communications Plan* (2007) states that work was underway, or in an advanced stage of development, for:

- a strategic case management framework that provides the operating model and key principles for the management of offenders in the AMC and in the community; and
- a case manager's guide. This will be the first guide prepared and implemented specifically for the custodial setting.

- 4.8 The *Commissioning Plan* (2008) briefly describes case management roles and the proposed case management model in the *AMC Draft Throughcare Framework* (28 August 2007).

ACTCS case management framework

- 4.9 ACTCS officers advised on what progress ACTCS had made in developing an operating framework for case management that would meet the intentions set out in the *Standard*

Guidelines for Corrections in Australia (2012) and the ACT's operating philosophy for the AMC.

- 4.10 ACTCS officers stated that the intention to develop a service-wide case management framework remained, and that this had been further emphasised following the independent review, *Community Corrections Review for ACT Corrective Services* (2013), led by Birgden.⁴⁰ Eighteen of the 49 recommendations made in this review relate to the development and implementation of a case management policy framework. The review states:

... It is proposed that a case management policy framework be devised... this should be the clarifying and overarching framework that includes case management, program delivery and throughcare with more detailed policies and procedures operationalising each area ...

- 4.11 A case management policy framework is particularly important for case management in the AMC as the *Community Corrections Review for ACT Corrective Services Agency* (page 5) states that:

While the focus of this project is on the review of [community-based corrections], case management also occurs within the AMC and the potential interface between community-based corrections and AMC case managers will be considered here. Case managers in the AMC are not guided by a policy and procedures manual ...

- 4.12 The draft *Case Management Policy Framework* (July 2014) and the *Case Manager's Guidelines, Offender Services and Correctional Programs AMC* (version 1, June 2014) were discussed with a wide range of AMC Corrective Services officers. The knowledge of these documents varied considerably and overall they had not been widely disseminated.

- 4.13 In the absence of a finalised *Case Management Policy Framework*, ACTCS officers who are directly involved in case management were interviewed to identify the operating model that they followed. Officers described the operating model as 'collegiate' and 'experienced based' and stated that there was an absence of agreed policies and procedures. Officers described case management as being 'lots of management, but very inconsistent' with 'so much changed, so frequently and so often since we opened' with new ideas being taken forward with variable levels of consultation and collaboration.

- 4.14 A formal case management policy framework has been a stated priority since April 2007. However, a draft *Case Management Policy Framework* (July 2014) was only recently developed. In the absence of a finalised framework, AMC case managers have no common reference to guide their activities.

The role of assessment in case management

- 4.15 The *Vocational Education and Training and Rehabilitative Programs in the Alexander Maconochie Centre* (2007 delivery strategy) identified that:

⁴⁰ *Community Corrections review for ACT Corrective Services*, by A Birgden, S Finucane, L Hardcastle, & S Casey, June 2013

- risk and criminogenic need are best assessed through validated risk/need assessment instruments, such as the Level of Service Inventory – Revised (LSI-R); and
- assessment will be based on the LSI-R in the first instance and rehabilitation plans [i.e. case plans] developed targeting dynamic risk factors as identified by that instrument.

4.16 The LSI-R assessment tool is generally considered⁴¹ one of the best methods of assessing risk and needs of offender populations. In 2001 ACTCS was one of the first Australian jurisdictions to adopt the use of the LSI-R assessment tool for its community-based corrective services.

Use of the Level of Service Inventory – Revised (LSI-R) in case planning

4.17 In the ACT the LSI-R assessment is administered by probation and parole officers or case managers (in the community or in a custodial setting). ACTCS officers advised that LSI-R assessments are taken into account, depending on the circumstances, in sentencing and parole decisions since the assessment is used to identify an offender's risk of reoffending. As set out in the 2007 delivery strategy, it also has value in informing rehabilitation case plans and can determine the supervision needs for the offender. Depending on a detainee's sentence length, the assessment may be undertaken more than once while in the AMC.

4.18 The 2007 delivery strategy and Birgden's *Community Corrections Review for ACT Corrective Services* (2013) identified other types of more specialist assessment such as those designed to determine risk factors in relation to sexual offenders, violent offenders and for offenders with a history of substance abuse. The 'Static 99R' assessment tool is used, for example, in the ACT as it is recognised as having greater validity in assessing the risk of reoffending for sex offenders. However, the mostly widely used and referenced criminogenic assessment in the AMC is the LSI-R.

4.19 The LSI-R, used by ACTCS, is referred to⁴² as a 'third generation' risk assessment tool. It uses 'both clinical and actuarial methods to objectively and systematically measure static and dynamic risk factors' (refer to Appendix A for coverage of LSI-R risk factors). Once an offender's risk profile has been assessed by an LSI-R trained Corrective Services assessor, a case plan can be developed that addresses the dynamic risks identified.

4.20 The *Community Corrections Review for ACT Corrective Services* (2013) included a review of offender assessment methodologies, the suitability of the LSI-R and its use and validity in ACTCS. The review recommended the continued use of the LSI-R assessment to categorise an offender's risk and identify criminogenic needs. It also identified that the LSI-R should be used more effectively in case management, for repeat assessments to identify progress and for reformulating case plans, and that its reliability should be enhanced through better training and supervision of LSI-R assessors.

⁴¹ Casey S, Appendix B: LSI-R analysis report, page 4 from the *Community Corrections Review for ACT Corrective Services* (June 2013)

⁴² Casey S, Appendix B: LSI-R analysis report, page 3

Understanding a detainee's attitude and motivation

- 4.21 In interviews ACTCS senior officers emphasised the importance of creating an environment in the AMC that is conducive to rehabilitation. This includes the physical and social environment.
- 4.22 The *Commissioning Plan* (2008) outlines the principles that guided the building of the AMC. For example, detainees should experience daily activities in the AMC in a similar way to that which occurs in the community where people leave their place of residence to access services and attend places of employment and education. Accordingly, AMC was designed so that accommodation is in 'precincts', and services are organised around a 'town square'.
- 4.23 ACTCS officers advised that all Offender Services staff are trained in 'motivational interactions'. While those involved in the rehabilitation of detainees at the AMC aim to provide the optimum range of opportunities, ACTCS senior officers emphasised that change invariably comes from within, that is, detainees need to want to progress, and that predicting a detainee's readiness to change or their 'responsivity' is challenging.
- 4.24 ACTCS senior officers identified a number of external motivations that may mask a detainee's genuine willingness to progress, including:
- the need to respond to sentencing requirements;
 - the need to present a positive account of rehabilitative effort to a parole hearing; and
 - a lack of confidence that programs will make any difference.

Self determination

- 4.25 The 2007 delivery strategy indicated that detainees are to be invited to participate in, to be consulted on, or to negotiate their case management plans.
- 4.26 The centrality of the detainee in planning is further developed in the draft *Case Manager's Guidelines* (June 2014) which state that:
- ... the ultimate success [of case management] depends on the detainee taking 'ownership' of the plan ...
- And,
- ... the Case Management Plan focuses on addressing risk and also includes a holistic view of the needs of the Detainee.
- 4.27 The draft *Case Management Policy Framework* goes further still, stating that the framework seeks to address two core human rights values:
- Improved well-being.** Case management will improve the physical, social, and psychological well-being of corrections client[s] by facilitating access to appropriate supports; and
- Supported autonomy.** Case management will provide opportunities for a corrections client to make informed decisions and choices, wherever possible.

- 4.28 While not referred to specifically in the ACT *Human Rights Act 2004*, the right to self-determination is included in the International Covenant on Civil and Political Rights and the International Covenant on Economic, Social and Cultural Rights. When appropriate, active participation in their own case plans is an opportunity for detainees to achieve self-determination.

Community risk versus identified detainee need

- 4.29 Another aspect to the centrality of the detainee in case planning relates to the balance to be struck between the needs and aspirations of the detainee versus the needs of the wider community to be protected.
- 4.30 The *Community Corrections Review for ACT Corrective Services* (2013) identified this issue (pages 13 and 14, Appendix C), stating:

The Risk Needs Responsivity (RNR) approach is concerned with addressing community protection by managing risk rather than by simultaneously meeting offender needs ... The RNR model is weighted towards the risk management of offenders and therefore does not address a human rights approach as required by the ACT Human Rights Act 2004..... Indeed the authors of RNR have acknowledged that they have failed to attend to the need to respect offender autonomy as a basic value ... [this] is crucial to person-centred planning.

Yet,

... the ACT community-based corrections manual is based on the RNR model ...

- 4.31 The Justice and Community Safety Directorate Annual Report 2013-14 (page 80) responds to this issue by stating that a case management policy framework is being introduced (refer to paragraph 4.10) and that this will seek to:

... integrate with the [Risk Needs Responsivity] RNR model the Good Lives Model of case management that reflects human rights values as its ethical core. This recognises that while offenders have obligations to respect other people's entitlements to well-being and freedom, they are also entitled to the same considerations ...

- 4.32 ACTCS documentation from 2007 to 2014 shows that the 'centrality of the detainee' within case planning has been evolving in terms of what this means and how it is to be achieved. The lack of a finalised case management policy framework presents a risk that inconsistent practice will occur.

Case management resources in the AMC

- 4.33 The operating model in the AMC's *Commissioning Plan* (2008) emphasises the importance of promoting 'extensive staff (as role models) and prisoner interaction and the development of positive relationships'. Case management, a key part of these relationships, involves a large number of AMC staff.
- 4.34 ACTCS officers advised that case managers are allocated a detainee caseload of 40 at any one time. Nine case managers work with both sentenced and remanded detainees at the AMC, from when detainees are admitted until released. Three additional case managers

have been recruited in the last three years as detainee numbers on-hand have increased. Case managers have detainee supervisory responsibility which may entail frequent or infrequent contact with a detainee, depending on their risk and need.

- 4.35 The Hamburger Review (2011) reported that a case manager held a caseload of around 48 detainees. According to case management records provided by ACTCS officers in June 2014, the average at that time was around 38. Two case managers have recently been identified, carrying lower caseloads, for detainee pre-release planning.
- 4.36 Uniformed custodial officers also have a 'case officer' role. Custodial officers primarily have a responsibility to keep detainees safe and secure and to maintain order. However, custodial officers are also allocated between 10 to 20 detainees whom they oversee closely. Custodial officers in their 'case officer' role have considerable day-to-day contact with detainees and have the potential to share observations and written notes with case managers.
- 4.37 Program facilitators receive detainee referrals from case managers for particular therapeutic programs, such as criminogenic programs. The program facilitators then undertake initial assessments prior to receiving detainees in programs.
- 4.38 Many other people, employed directly by ACTCS, by other parts of the ACT Government or by external partner organisations, provide services coordinated by case managers. The coordination of these services is considered later in this chapter (refer to 4.72 to 4.79).

Case management in practice

- 4.39 As there is no finalised case management policy framework, case managers were asked to explain and demonstrate the main components of their case management approach. Documented and undocumented procedures and policies were discussed. Documented procedures generally lacked formal endorsement. Case managers broadly agreed about what are the key records for building the case-file record, the use of *pro formas*, assessment tools and timeliness targets for certain case management milestones.
- 4.40 While there is no case management policy framework, there is a degree of commonality in the administrative steps used in the case management of detainees. This reflects the case management guidance within the *Standard Guidelines of Corrections in Australia* (2012) as set out in paragraph 4.3.

Assessing case planning and case management

- 4.41 ACTCS officers emphasised that detainees are the subject of much research by a wide range of community and academic organisations. AMC therapeutic program facilitators capture some feedback from detainees on specific programs. However, there was no source of consolidated, written feedback other than feedback relating to detainee participation in particular programs. For example, there was no detainee feedback

available about case management, rehabilitative activities in general, or other 'purposeful activities' making up the 'structured day'.

What the detainees say

- 4.42 ACTCS officers and other stakeholders, such as the two ACT Government-appointed Official Visitors, regularly interact with AMC detainees. ACTCS officers meet monthly with detainees' representatives, known as 'delegates'. These meetings provide ACTCS officers with information on the concerns of detainees. Some therapeutic programs include a facility for program staff to receive feedback from participants.
- 4.43 Some detainees' views on rehabilitation were obtained through an Audit Office auditor:
- sitting in on program facilitators' sessions with detainees;
 - conducting a survey of detainees; and
 - interviewing a sample of detainees.
- 4.44 As only a relatively small number of detainees' views (around 25) were received, they should not be considered representative of the views of all AMC detainees.
- 4.45 Detainees' participation was voluntary. Their views have been considered with respect to:
- case management (refer to Table 4-1);
 - programs (refer to Table 5-2); and
 - the 'structured day' (refer to Table 5-4).

What the files say

- 4.46 In addition to seeking detainees' views directly, the Australian Institute of Criminology was engaged by the Audit Office to conduct a review of detainee case files stored electronically in the JOIST⁴³ system. The review examined 50 randomly selected files⁴⁴, 25 from each of two years (2011-12, and 2013-14) from a cohort of 520 detainees who had been convicted, had served only one custodial sentence in the AMC between March 2009 and July 2014, and then had been released (201 detainees). The cohort was further refined to identify only detainees in custody, who had served at least 90 days of their sentence, post sentencing (108 detainees).
- 4.47 The review sought to identify, according to the evidence in the electronic case files, the extent to which:
- commonly understood timeliness standards for key tasks had been met;
 - commonly understood core tasks had been completed; and

⁴³ JOIST stands for Justice Offender Information System of Tasmania

⁴⁴ There were 131 (2011-12, 25 sample = 19 per cent) and 56 (2013-14, 25 sample = 45 per cent) qualifying detainee custodial episodes

- accepted practice standards had been met, relating to the adequacy and scope of case notes.

Case management practice: self determination and identifying detainee needs

4.48 Having reviewed the available documentation on case management policy, the Audit Office examined the extent to which case plans and the case planning process reflect detainees' involvement and in doing this, recognise detainee needs and personal goals as well as risks. This was achieved through feedback from case management officers and detainees and from the case-file review.

Detainee and case manager views on case planning

- 4.49 Case managers reported that generally detainees' case plans are developed by the case manager and brought to the detainee for sign-off. However, some case managers reported a more participative role by detainees in formulating case plans. Some detainees are more willing and ready to participate than others.
- 4.50 Detainees' comments in interview confirmed a general understanding of the case manager role and a mixed appreciation of the detainee's and case manager's involvement in case planning.

Table 4-1 Detainees comments on case management and rehabilitation

Sample comments from detainees – verbatim and paraphrased
<ul style="list-style-type: none"> - <i>'rarely sees his case manager'. If he has a case plan he hasn't seen it.</i> - <i>Case manager is a 'machine' and helps him as much as they can.</i> - <i>knows who his case manager was and stated that he liked them</i> - <i>'likes the case manager' ... but detainee 'prefers to work through things himself'. Case manager is helpful though and 'smooths the way' when he needs something.</i> - <i>'only reason to do a case plan is to do programs'. The case manager comes to visit him and asks if he wants them to do anything and he usually responds 'not really'.</i> - <i>Case manager is 'pretty helpful' but 'what can they do, but they can't do anything'</i> - <i>'Case manager is very good communicates well... but you go through the motions, play the game'</i> - <i>Case manager may place specific programs on the case plan and if 'you do not do them, they will not recommend parole'. He said this time he has not seen anyone.</i> - <i>He thinks case management is just about the paperwork. He was not aware of any real plans for himself.</i> - <i>He said this plan felt like it was his plan and that that was a 'really big thing'. He has had previous plans but they did not feel like his</i> - <i>'the success of rehabilitation depends on how much work you want to put into it'</i>

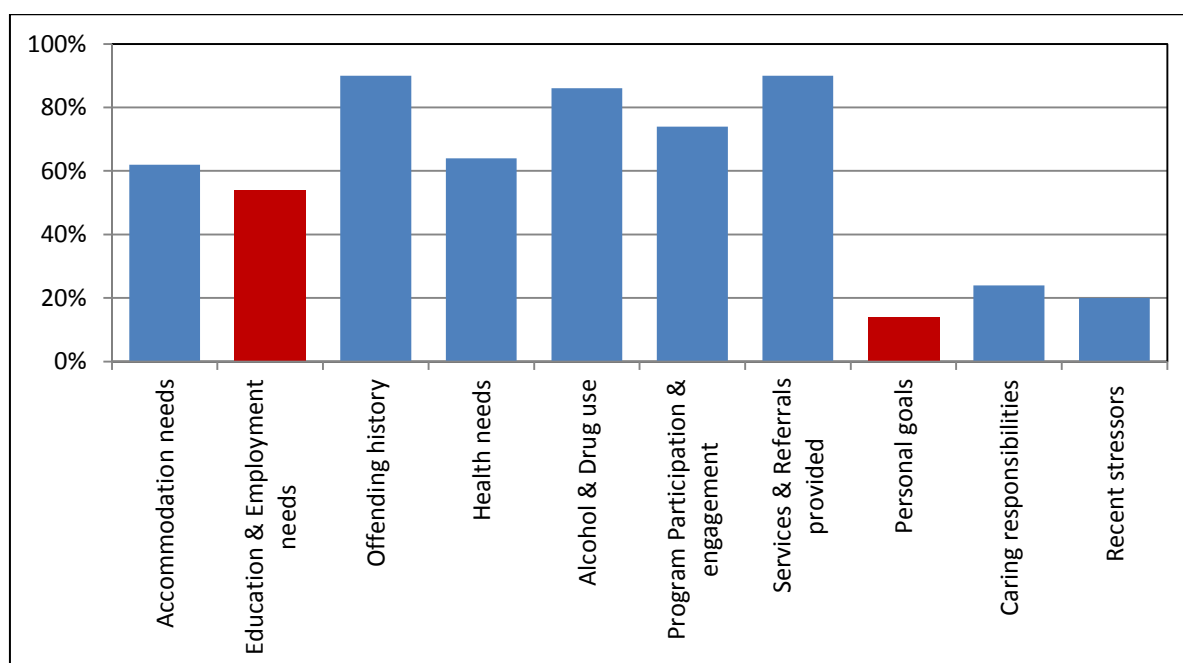
Source: Detainee interviews and survey comments 1 to 30 September, 2014

4.51 Comments made by case managers and detainees indicate that there is variable ownership by detainees of their case plans. Encouraging ownership may enhance detainees' motivation and therefore their prospects for a successful outcome from rehabilitation.

Case file review

4.52 The Australian Institute of Criminology's review of detainee case files identified evidence in case file notes relating to both static and dynamic risk factors (refer to Appendix A: LSI-R risk factors). The majority of case files contained evidence relating to detainee accommodation, education and employment, and health needs as well as offending history, program participation and engagement. This shows that case managers place a high priority on identifying and recording factors relating to risks of reoffending.

Figure 4-2 Detainee needs, circumstances and goals referred to in case files



Source: Australian Institute of Criminology case file review of 2011-12 and 2013-14 records held within JOIST, 21 to 25 August 2014

4.53 A review undertaken by the Australian Institute of Criminology of the case files of 50 detainees showed that detainees' personal goals were only noted in 14 per cent of the 50 cases. However, with respect to identifying and recording information relating to detainees' risks of reoffending, the percentages were significantly higher, for example, offending history, and alcohol and drug use were noted in over 80 per cent of cases. As there is no finalised case management policy framework to provide guidance, it is not clear if this practice is appropriate.

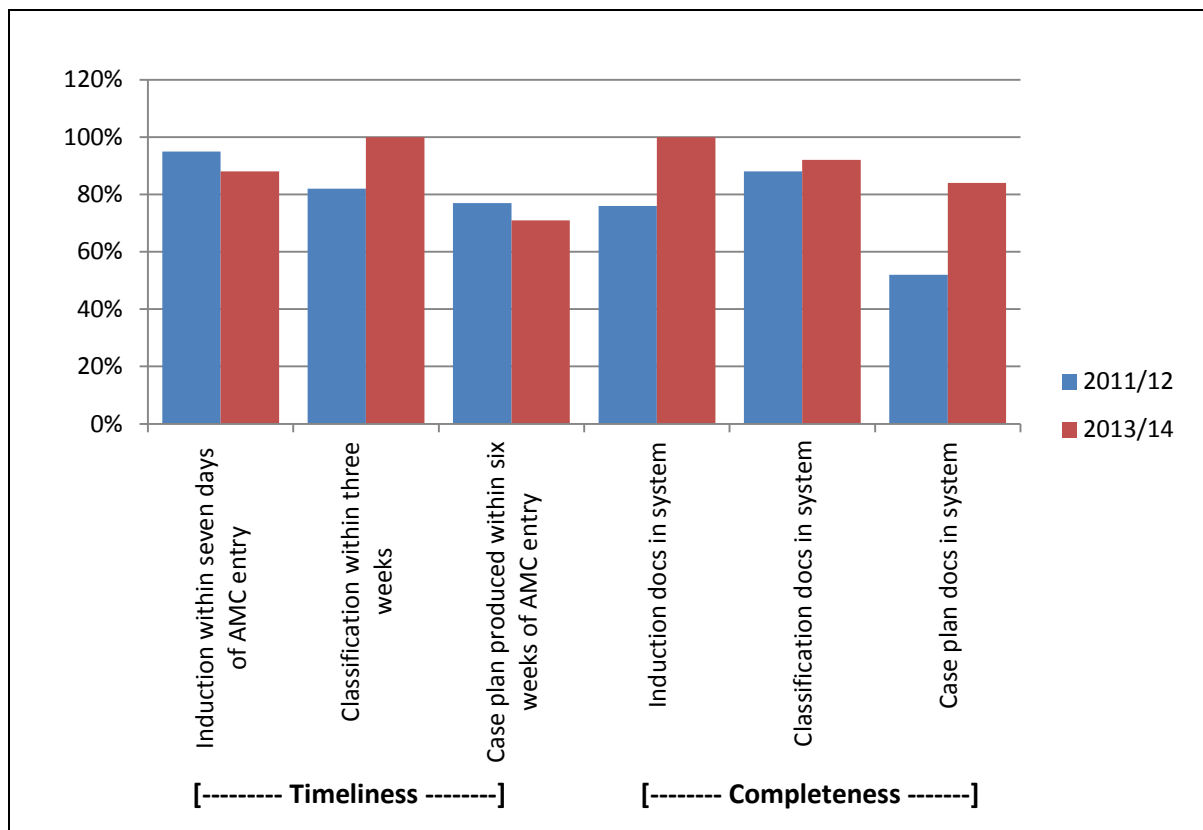
Case management practice: review and supervision

4.54 The ACTCS Executive advised that case managers' frequency of contact with detainees is initially determined by a detainee's LSI-R score. In addition, the frequency of case plan

reviews is determined by LSI-R scores: every six months for low risk; and two months for high risk detainees. These frequencies are specified as 'minimum standards' in the draft *Case Manager's Guidelines* (June 2014).

- 4.55 The draft *Case Manager's Guidelines* (June 2014) propose a seven-day target for the completion of induction for new arrivals, a three-week target for classification, and a six-week target for the agreement of a case plan. ACTCS officers confirmed these standards have been broadly recognised as being 'in effect' since March 2014 even though the *Case Manager's Guidelines* have not been finalised.

Figure 4-3 Timeliness and completeness of induction and case planning



Source: Australian Institute of Criminology case file review 2011-12 and 2013-14 records, within JOIST, 21 to 25 August 2014

- 4.56 The case file review found that the targets in the draft *Case Manager's Guidelines* (June 2014) for the:

- completion of induction for new arrivals met the seven day target for around 90 per cent of detainees in 2011-12 and just over 80 per cent in 2013-14;
- classification of detainees met the three-week target for around 80 per cent of detainees in 2011-12 and 100 per cent in 2013-14; and
- production of a case plan met the target of completion by six weeks for just under 80 per cent in 2011-12 and around 70 per cent in 2013-14.

- 4.57 Given the importance of case plans priority needs to be given to improving their completion for all detainees within the target six weeks.

- 4.58 Completeness of records improved for information on induction and case plans: from around 45 per cent in 2011-12 to just over 80 per cent in 2013-14. While this is a significant improvement, achieving 100 per cent completeness needs to be pursued.

Case manager contact with detainees

- 4.59 The LSI-R determined frequency of contact between case managers and detainees, as evidenced in case file records and notes, was assessed based on the minimum standard contact levels in section 8.3 of the draft *Case Manager's Guidelines* (June 2014). For detainees with LSI-R scores of 13 or lower the minimum contact is to be monthly, for those with scores of 14 to 40 contact is to be fortnightly and for scores of 41 to 54 contact is weekly.

Table 4-2 Case manager level of contact with detainees achieved

	2011-12	2013-14
Risk based contact levels achieved	80 per cent	92 per cent

Source: Australian Institute of Criminology case file review 2011-12 and 2013-14 records, within JOIST, 21 to 25 August 2014

- 4.60 Table 4-2 presents summary information from the review of detainee case files.
- 4.61 The review of 50 detainee case files showed that case managers' contact levels with detainees have improved from 80 per cent in 2011-12 to 92 per cent in 2013-14.

Case notes

- 4.62 Case managers identified that they rely on observed changes in detainee behaviour to assess the effectiveness of their case management. The changes are documented in case notes. Case managers advised that the quantifiable data that is collected in the JOIST system on the effectiveness of case management is minimal. This means it is difficult to review the effectiveness of case management in aggregate using JOIST.
- 4.63 An Australian Institute of Criminology case file reviewer considered aspects of the quality of case notes, according to a set of review criteria based on practice standards⁴⁵ familiar to them as a former Corrective Services Agency officer (refer to Table 4-3).

Table 4-3 Case note quality

	2011-12	2013-14
Adequacy of case notes	44 per cent	84 per cent
Scope of notes	56 per cent	59 per cent

Source: Australian Institute of Criminology case file review 2011-12 and 2013-14 records, within JOIST, 21 to 25 August 2014

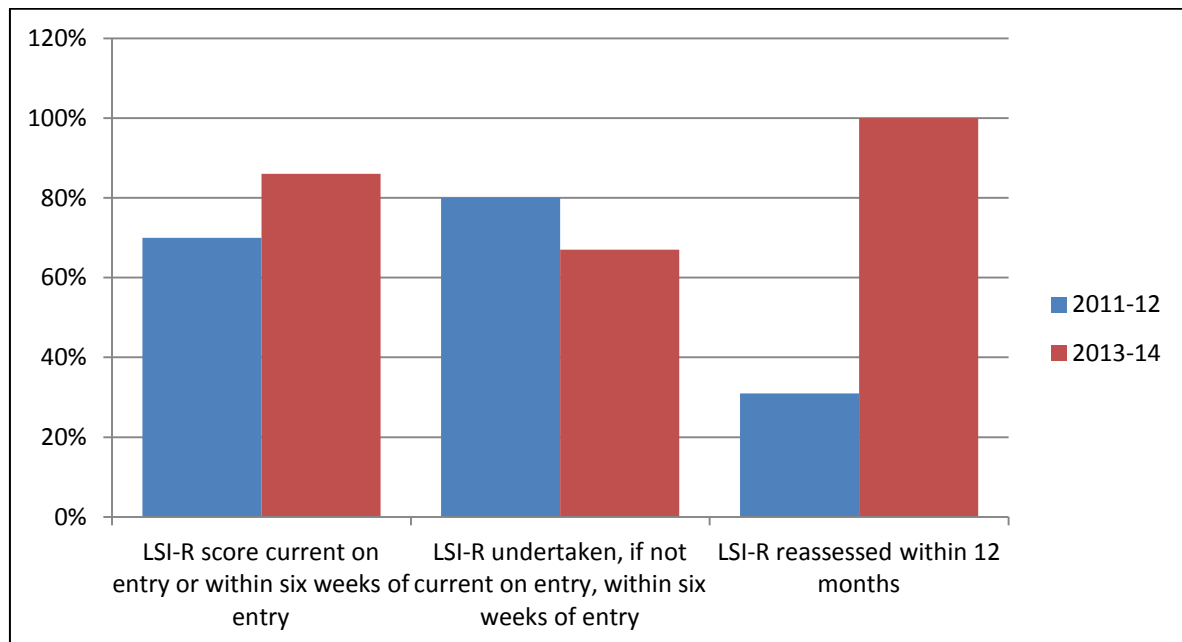
⁴⁵ *Adequacy* relates to the extent to which case notes included use of professional language, no discernible breaches of privacy, risks/needs identified, evidence of referrals, evidence of detainee wishes/plans, evidence of monitoring/follow-up with detainees, detainees' current circumstances, and evidence of client advocacy. *Scope* refers to where pre-sentence reports, case notes and entry/release documents identify any reference to a detainee's circumstances (and/or needs) against each of the domains.

- 4.64 The adequacy of case notes was assessed in the review as 44 per cent in 2011-12 and 84 per cent in 2013-14. Despite this significant improvement, the scope of coverage of case notes of the detainee risks and needs did not significantly improve: it was 56 per cent in 2011-12 and 59 per cent in 2013-14.
- 4.65 The review of case notes by the Australian Institute of Criminology reviewer found that case managers prepare their case notes in different ways. Some are prepared as basic chronologies of events, while others provide details which facilitate a fuller understanding of the detainees' needs, aspirations and progress. It was not possible to confirm whether the different approaches to the preparation of case notes reflects different levels of interaction with detainees, different insights or different case manager approaches to writing notes.

Use of LSI-R assessment in case management

- 4.66 The Australian Institute of Criminology case file review included consideration of the use of the LSI-R assessment. The Birgden *Community Corrections Review for ACT Corrective Services* (2013) found that LSI-R assessments were not used as extensively as they could be to inform case management. The LSI-R could, for example, be used to undertake repeat assessments to identify progress and to reformulate case plans (refer to paragraph 5.13).

Figure 4-4 Ensuring LSI-R assessments remain 'current'



Source: Australian Institute of Criminology case file review 2011-12 and 2013-14 records, within JOIST, 22 August 2014

- 4.67 The completion of timely initial and follow up LSI-R assessments according to proposed standards in the draft *Case Manager's Guidelines* (June 2014) showed that there has been:
- a very significant increase in the number of LSI-R reassessments undertaken within 12 months; from 31 per cent in 2011-12 to 100 per cent in 2013-14;

- an increase in the number of detainees with current LSI-R assessments on entry to the AMC or assessments that have been undertaken within six weeks of entry; from 70 per cent in 2011-12 to 86 per cent in 2013-14; and
- a decrease in the number of LSI-R assessments undertaken within six weeks for detainees without current LSI-Rs when they enter the AMC; from 80 per cent to 67 per cent.

4.68 The timelines of the LSI-R assessments has generally improved between 2011-12 and 2013-14. Timely LSI-R assessments maximise their value in informing case management planning and review.

Supervision of case management

4.69 A case management coordinator reviews case managers' workloads, assessments and outcomes. Case managers receive monthly supervisory reviews of their progress with respect to their management of detainee cases. This includes timeliness checks against the key tasks shown in Figure 4-3 and discussion about detainee progress. LSI-R assessments are also reviewed by the coordinator, although not with the benefit of all the evidence available to the case manager. Records of this process are limited.

4.70 As mentioned in paragraph 3.88, business units in the AMC do not have adequate mechanisms for monitoring and reporting core activities of their team, between teams or to senior management. This is equally so with respect to the case management team.

4.71 Although ACTCS case management officers described their supervisory activities, the documented evidence of these is inadequate, and does not facilitate:

- identifying individual learning and development needs or systemic issues relating to the case managers or case management;
- building assurance as to the reliability of the LSI-R assessment; or
- an assessment of caseload performance of a case manager or the case management team as a whole in relation to meeting minimum standards, quantitative or qualitative measures.

Communication between officers involved in rehabilitation

4.72 A wide range of ACTCS officers including custodial officers, program facilitators and case managers were interviewed. A number of issues were raised by officers relating to communication and coordination. This indicates openness to recognise shortcomings and a desire to seek improvement.

4.73 Many views were expressed by ACTSC officers on how improvements could be made. Two themes were dominant: communication and coordination. These will influence the achievement of an integrated multi-disciplinary 'throughcare' approach as promoted in the operating philosophy for the AMC (refer to paragraph 3.104).

Communication between managers and front line staff

- 4.74 AMC Offender Services officers identified the operational difficulties created by the rapid pace of change in the AMC. Although managers work through workplace change, including follow-up meetings with individuals and groups of officers, comments were made by officers about the frequency of change and the way changes had been introduced. Changes were considered in some instances to have been introduced at short notice with inadequate preparation and planning. This resulted in some officers stating that they:
- were confused as to what should take priority;
 - felt that change was being imposed; and
 - did not understand the reason for a change.
- 4.75 The programs team and the case management team are unable to effectively monitor or report on their core business activity as they do not have ready access to management information. For example, case managers are unable to quickly investigate detainee claims of difficulties accessing programs, long waiting lists or the slow progress of referrals. This presents the risk that collaboration between teams will be compromised and management will be unaware of issues.

Coordination of functions

- 4.76 AMC Offender Services officers reported a lack of communication and understanding between the programs team and the case management team. The two teams, although co-located in the programs area at the AMC, do not have sufficiently frequent or task-focused joint meetings. Shared information systems, such as JOIST, are inadequate to ensure case managers are able to directly identify the progress of detainees in a program or the success of the programs themselves.
- 4.77 Case managers and custodial officers do not universally have a good working knowledge of programs. However, ACTCS officers advised that case managers had been trained in the Cognitive Self-Change Program, the Domestic Abuse Program, and a violence intervention program.
- 4.78 Case managers and custodial officers reported having a good working relationship, but acknowledged that communication is sometimes difficult due to different working patterns, and lack of direct access to systems to create case file notes. Custodial officers working outside weekday, daytime hours may not always be able to effectively share the benefit of their frequent involvement with detainees with case managers.
- 4.79 Communication and coordination between the programs team, the case management team and custodial officers need to be improved. This is acknowledged as an issue by ACTCS officers. Improved communication and coordination would enhance the ability of ACTCS to support detainees.

Access to programs

4.80 ACTCS officers confirmed the audit finding that there is no management information for program waiting lists prior to 2014, such as the: average waiting time for programs; number of detainees commencing programs or assessed as suitable for a program; and desired timing of detainees joining programs. Examination of the 'live' waiting lists in June 2014 provided by AMC Offender Service officers identified that in the first six months of 2014 for the Cognitive Self-Change Program:

- 11 detainees commenced a program and had started, on average, 18 days after a suitability assessment report had been completed;
- by June another 11 had been on the waiting list, having already been assessed, for an average of 97 days and had not yet commenced a program; and
- 19 detainees, 8 of whom had two years or more remaining on their custodial sentence, had not had an assessment of their suitability.

4.81 Data was not available to determine if these figures are typical of the total detainee population prior to 2014 or of other criminogenic programs. ACTCS officers undertook a similar analysis in January 2015, and identified shorter waiting times than those indicated by the June 2014 data. ACTCS officers advised that some waiting time prior to joining programs is inevitable and some delay is 'by design' in order to optimise the therapeutic benefit of participation in a program. In addition, some programs such as the Cognitive Self-Change Program may be accessed in the community after release. However, given that the Cognitive Self-Change Program's intensity is four hours a week over at least 25 weeks, a delay of three months may result in some detainees having insufficient time to complete the program while in the AMC.

4.82 Information on detainee access to programs is inadequate. While this is the case, that which exists indicates that access for some detainees is problematic. However, access to programs is not solely determined by the capacity of AMC Offender Services to provide a program as detainee readiness is equally important.

Detainee Health

4.83 Detainees receive health and dental care from the Hume Health Centre which is situated in the AMC. The Hume Health Centre is managed and staffed through Justice Health Primary Services (Justice Health), which is part of the ACT Health Directorate, not ACTCS.

4.84 Dental and health care, while related to rehabilitation, was not included in the scope of this audit. However a number of stakeholders reported concerns about the provision of methadone to detainees: that methadone was provided to detainees who did not require it; and that methadone doses were increased with little consideration. Due to the seriousness of these concerns, and the frequency with which they were raised, discussions were held with the ACT Health Services Commissioner and Justice Health.

- 4.85 Justice Health data was analysed, including examining data on referrals for methadone, the number of detainees on methadone and whether this number was increasing. This analysis showed that the percentage of AMC detainees on methadone, as part of an opioid substitution program⁴⁶, has been broadly consistent from January 2011 until September 2014. Monthly percentages changes have been within +/- five per cent of the long-term average over the past 44 months, with no discernible trend.
- 4.86 The Health Services Commissioner advised that she maintains a watching brief with respect to trends in prescribing methadone in the AMC.

Case management of detainees with specific needs

Corrections Management Act 2007

- 4.87 Case management and services for detainees with specific needs are referred to in the *Corrections Management Act 2007*. Their inclusion in the Act indicates the importance of addressing the requirements of detainees with specific needs.⁴⁷

ACT Human Rights Act

- 4.88 The ACT *Human Rights Act 2004* (s40) outlines 'obligations of public authorities'. These include that 'public authorities must act consistently with human rights' (s40B(1)), that is it 'is unlawful for a public authority to act in a way that is incompatible with a human right; if in making a decision, to fail to give proper consideration to a relevant human right' (s40B(1)).⁴⁸
- 4.89 Section 40B(2) of the *Human Rights Act 2004* notes that Section 40B(1) does not apply: if a law expressly requires that a public authority act in a particular way that is inconsistent with a human right; or if a 'law cannot be interpreted in a way that is consistent with a human right'.⁴⁹
- 4.90 Human rights can also be limited: Section 28 (1) of the *Human Rights Act 2004* states that '(h)uman rights may be subject only to reasonable limits set by laws that can be demonstrably justified in a free and democratic society' and Section 28(2) details what must be included in consideration of deciding whether a limit on a right is reasonable,

⁴⁶ Justice Health advised it prescribes methadone in accordance with *The ACT Opioid maintenance Treatment guidelines* and clinical assessment.

⁴⁷ Ss 12 (k), 55 (1), 78 (3) (d) and (f), s90 (2) and s98 (2) (a)

⁴⁸ It is important to note in a discussion of rehabilitation that Public Authorities are not obliged to act in this way (s40B(3)) with respect to economic, social and cultural rights expressed in Part 3A (s27A) of the Act (the right to education: 'Everyone has the right to have access to further education and vocational and continuing training.'

⁴⁹ ACT *Human Rights Act 2004*, s40B(2)

including 'any less restrictive means reasonably available to achieve the purpose the limitation seeks to achieve'.⁵⁰

- 4.91 The Justice and Community Safety Directorate, an administrative unit, is a public authority and is therefore bound by the *Human Rights Act 2004*.⁵¹ As ACTCS, operating the AMC, is a part of the Justice and Community Safety Directorate, the operation of the AMC is also bound by the *Human Rights Act 2004*. Therefore, those responsible for the management of the AMC are required to act in accordance with this act; they are required to work to ensure that AMC detainees are accorded the right 'to enjoy his or her human rights without distinction or discrimination of any kind' (s8(2)). This means that ACTCS are required to meet the needs, with reasonable adjustment, of detainees with disability and detainees with mental illness; and to ensure that detainees from Aboriginal and Torres Strait Islander backgrounds and people from culturally and linguistically diverse backgrounds have access to culturally sensitive services and programs.
- 4.92 The AMC provides education to detainees as part of its rehabilitative initiatives in assisting detainees live in the community. The AMC is not obliged to do this through Section 27A of the *Human Rights Act 2004*, as public authorities are exempted from complying with this section (27A). However, once offering education, AMC is obliged to do so in a non-discriminatory manner, ensuring that it is provided to all detainees on an equitable basis, including those with disability or from a culturally or linguistically diverse background. The *Corrections Management Act 2007* also includes, under Section 12, Correctional centres - minimum living conditions, that '(i) detainees must have reasonable access to news and education services and facilities to maintain contact with society'. The two Acts support the equitable provision of education to detainees in the AMC.
- 4.93 Some detainees reported that education is difficult to access. This included difficulties accessing support for numeracy and literacy tutoring, having to study without support, and the lack of courses that would be useful on release. However some detainees were satisfied and reported that the education provided would assist in their employment after release.
- 4.94 The right to humane treatment when deprived of liberty in section 19 of the *Human Rights Act 2004* refers to 'respect for the inherent dignity of the human person'. As discussed (paragraphs 5.38 to 5.42) ACTCS staff have been undergoing a 'culture change' with an important part of this being the creation a more respectful culture for staff and detainees in the AMC.
- 4.95 Section 16 (2) of the *Human Rights Act 2004* outlines what the right to freedom of expression means: 'freedom to seek, receive and impart information and ideas of all kinds, regardless of borders, whether orally, in writing or in print, by way of art, or in another way chosen by him or her'. Education and programs that affect a detainee's rehabilitation

⁵⁰ ACT *Human Rights Act 2004*, s28

⁵¹ The AMC is a public authority, performing a function conferred on it under a territory law (*Corrections Management Act 2007*).

have the potential to provide an opportunity for freedom of expression for AMC detainees through participation in learning, discussions and art works. Measure of participation may provide an indication of success in this area (refer to paragraph 5.107).

ACT Corrective Services case management policy: specific needs

- 4.96 The ACTCS draft *Case Management Policy Framework* (July 2014) mentions disability once (page 13), in the context of ‘mental disability’ being a non-criminogenic risk factor and therefore it is not addressed in the Risk-Need-Responsivity approach (refer to paragraph 4.30). ‘Impairment’ is mentioned once (page 7):

The design and management [of programs and facilities] should: (a) reflect specific needs of offenders regarding gender, age, cultural background, physical or mental impairment, health status or other potential sources of discrimination; and (b) take account of particular needs and disadvantages that may be faced by indigenous people.

- 4.97 A ‘case manager’s induction’ checklist, which is in an appendix to the draft *Case Manager’s Guidelines* June 2014, includes questions on:

- identification as Aboriginal and Torres Strait Islander peoples;
- identified disability, physical or mental;
- the allocation of an NDIA⁵² package; and
- identified mental health issues, including if a referral is required.

- 4.98 Other checklists in the draft *Case Manager’s Guidelines* (June 2014) are for capturing data on detainees identifying as Aboriginal and Torres Strait Islander peoples. However, there are no checklists or procedures focused on assessing detainees with disability or those from culturally and linguistically diverse backgrounds other than Aboriginal or Torres Strait Islanders.

- 4.99 While the draft *Case Management Policy Framework* (July 2014) facilitates the capturing of data on Aboriginal and Torres Strait Islander peoples, it does not facilitate the capturing of data on detainees with physical or intellectual disabilities or those from culturally and linguistically diverse backgrounds.

Individual needs

Aboriginal and Torres Strait Islander detainees

- 4.100 There are four programs offered specifically for detainees who identify as Aboriginal and Torres Strait Islander peoples. These are the Indigenous art program, the Elders and

⁵² NDIA is the recently formed National Disability Insurance Agency which provides funding to support people with disability.

Community Leaders Visitation program, Yarning⁵³ (involving Relationships Australia) and the Conservation and Land Management (CALM) program. All other programs are also available to Aboriginal and Torres Strait Islander peoples.

- 4.101 Detainees and custodial officers provided positive feedback regarding the art and CALM programs. Participation in CALM results in a Certificate 2 for detainees who complete the course, providing a conservation and land management qualification. The Elders and Community Leaders Visitation program and Yarning program were not discussed during fieldwork.
- 4.102 Stakeholders reported a reluctance of some Aboriginals and Torres Strait Islanders to seek assistance to improve their literacy skills. They would however, be likely to attend a program such as CALM. This reinforces the importance of CALM as it is successful in enhancing Aboriginal and Torres Strait Islander detainees' skills in a culturally sensitive way.

Table 4-4 Aboriginal and Torres Strait Islander participation in education in 2014

Course / program type	Total number of detainees involved
Working Safely in the Construction Industry (White Card) Certificates awarded (NB some detainees had completed the training in previous years)	37
Conservation and Land Management	43, 12 gained training qualifications
Art classes	71, 17 contributed art works for exhibition and / or sales
Foundation Skills Training Package	21 completed units
Hospitality – Barista or Kitchen Operations	7 completed units
Retail Training Package	1 completed a unit
Asset Maintenance (Cleaning Operations)	1 completed 6 units
Hairdressing Statement of Attainment	1 (enabling employment within the AMC)
Information Technology Statement of Attainment	7
Business Services Training Package Full Certificate II in Business	1
Life Skills Course	73
Blood Borne Virus Awareness and Blood and Body Spills	6
ACT RTA compliant Road Ready course (driving licence preparation)	11
ACT Traffic Infringement Office Work or Development Program	2 detainees (resulting in paying off traffic fines)

Source: ACTCS Report on Aboriginal and Torres Strait Islander AMC Education and Training 2014

⁵³ An eight-week program for Aboriginal and Torres Strait Islander detainees designed to provide participants with an opportunity to discuss issues such as relationships, personal and financial matters in an open, honest and transparent environment. It aims to increase the 'tools' participants can access to manage personal issues and for participants to support each other, in and out of the group.

- 4.103 ACTCS advised that in some cases flexible learning strategies (based on reasonable adjustment principles) were adopted to ensure appropriate training was completed (refer to Table 4-4). ACTCS data indicated that more than 80 per cent of indigenous detainees in custody in the AMC in 2014 were enrolled in education and training at some time while in custody, an increase of 10 per cent on indigenous enrolment rates in 2013.
- 4.104 Winnunga Nimmityjah Aboriginal Health Service (Winnunga) provides a social and emotional wellbeing program in the AMC, funded through ACT Health. This program provides links with a variety of community services through Winnunga arranging one-to-one follow ups for detainees with relevant agencies. Relationships Australia provides indigenous counsellors at the AMC who provide generalist counselling to Aboriginal and Torres Strait Islander detainees.
- 4.105 In AMC Offender Services there are two people employed specifically to work with Aboriginal and Torres Strait Islander peoples; an Indigenous Liaison Officer and an Indigenous Case Manager. As the Indigenous Case Manager is not able to case manage all Indigenous detainees they provide advice to other case managers when required.
- 4.106 AMC Offender Services officers have met with the ACT's Aboriginal and Torres Strait Islander Elected Body, which was newly elected in July 2014. Aboriginal and Torres Strait Islander Elected Body members have been to the AMC on two occasions since July 2014 with four of the seven members having visited in the second half of 2014. AMC officers facilitated voting in the July 2014 Aboriginal and Torres Strait Islander Elected Body ACT-wide election, with ten per cent of votes coming from AMC detainees.
- 4.107 The Indigenous Official Visitor, appointed to investigate Aboriginal and Torres Strait Islander detainees' complaints and grievances, visits the AMC and reports quarterly to the Minister for Corrective Services as required by the *Corrections Management (Official Visitor) Policy 2011*. This provides Aboriginal and Torres Strait Islander peoples with targeted support to address their complaints and grievances.
- 4.108 Considerable support is provided for Aboriginal and Torres Strait Islander detainees, ranging from specific programs for indigenous people to having access to an Indigenous Liaison Officer, an Indigenous Case Manager and an Indigenous Official Visitor. Additionally, AMC Offender Services officers meet with the ACT Aboriginal and Torres Strait Islander Elected Body and Relationships Australia and Winnunga Nimmityjah Aboriginal Health Services provide specific services at the AMC.

Detainees from a culturally and linguistically diverse background

- 4.109 An analysis of Australian Bureau of Statistics data, as at 30 June 2014, shows that 16 per cent of custodial detainees⁵⁴ in the ACT were born overseas. These included: three detainees each from the United Kingdom, Iraq, India, Hong Kong, Indonesia, and

⁵⁴ The ABS 30 June 2014 census from which this analysis is drawn includes 62 detainees on periodic detention and includes women (5% of the AMC population).

Cambodia, four from the Philippines, five from Vietnam, seven from Lebanon, nine from New Zealand and 17 'other'. This shows that of those detainees born overseas most (86 per cent) are from a culturally and/or linguistically diverse background. This may be a larger percentage as the 17 'other' is likely to include countries which are culturally and linguistically different to Australia. This diversity may give rise to specific needs. The percentage of detainees born overseas is significantly higher than, for example, the percentage of female detainees in the AMC (about five per cent). However, appropriately, significantly greater effort is made to identify and address the needs of women in the AMC.

- 4.110 No formal programs catering for detainees from culturally and linguistically diverse backgrounds were identified in this audit. However, uniformed custodial officers receive cultural diversity training. The Pastoral Care Council funds and oversees the provision of a full time Pastoral Care Coordinator. At the time of the audit fieldwork this position was filled by two (Anglican) chaplains who job-share to provide one full time position. Other, volunteer, chaplains include two Roman Catholic, one Pentecostal, one Salvation Army and other religious visitors including an Imam. The inclusion of a range of religious affiliations provides some support to some people from culturally and linguistically diverse backgrounds. However, those who do not access the chaplains and religious visitors have no internal AMC access to such support.
- 4.111 ACTCS advised that counselling support can be accessed by completing an internal request form, written in English. However, there was no evidence of an alternative approach for accessing counselling support for detainees for whom English was not their first language. ACTCS advised that this applies to 'very few' detainees and those detainees 'who are unable to communicate in English are identified on admission and provided with extensive individualised support'. There was no data available to support this advice.
- 4.112 The *Corrections Management (Reception and Management of Non-English Speaking Detainees) Policy 2014 (No 1)* (NI2014-541) (21 October 2014) outlines the 'policy for the reception and management of non-English speaking detainees'. This policy outlines when an interpreter may be required and how to access an interpreter/translator, and states that foreign nationals are to be advised during induction that they may make contact with the diplomatic or consular representative of their relevant embassy in writing or by telephone. While this is an important policy in supporting people from a non-English speaking background, it does not indicate how detainees may be supported beyond providing access to interpreters/translators.
- 4.113 Data collection on detainees from culturally and linguistically diverse backgrounds is inadequate. Given that about 16 per cent of the AMC population were born overseas (June 2014) it is important that data on this cohort be collected and used to assist in their case management and to identify gaps in service provision.

Detainees with a physical disability

- 4.114 It is not known how many detainees at the AMC have a physical disability as ACTCS does not collect this data. It is possible that Justice Health has this data but as this, if collected, would be part of the detainees' medical records, ACTCS does not have access to this information due to restrictions under the *Health Records (Privacy and Access) Act 1997*.
- 4.115 AMC buildings, and those under construction, provide access for people with physical disabilities. ACTCS also reported to the Audit Office that rehabilitative services in the community have been accessed by detainees with physical disability, as ACTCS arranges transport to facilitate these services. However, some detainees reported concerns that services were not adequate. ACTCS does not have data on the access of detainees to community-based rehabilitative services, as these services are provided through Justice Health and information sharing is restricted under the *Health Records (Privacy and Access) Act 1997*.
- 4.116 ACTCS does not collect data on detainees with physical disabilities and therefore it is not possible to determine how well this cohort is supported.

National Disability Insurance Scheme

- 4.117 The ACT Government is working with other jurisdictions on the National Disability Strategy 2010-2020. Outcome 2, 'Right protection, justice and legislation – People with Disability have their rights promoted, upheld and protected', identifies five policy directions, one of which is 'more effective responses from the criminal justice system to people with disability who have complex needs or heightened vulnerabilities'. The Corrective Services Administrators' Council has established a national working group, coordinated by Victoria, to further the objective of facilitating best practice in meeting the needs of offenders with disabilities in Australia and New Zealand. ACTCS advised that it has a high level of engagement in this process which should assist the AMC in meeting the needs of eligible detainees.
- 4.118 Through ACTCS participation on the national working group, ACTCS it will gain greater insight into how to address the needs of detainees with a disability, including those with a physical disability. However, the ACT roll out of the Australian Government's National Disability Insurance Scheme (NDIS) commenced on 1 July 2014 and is expected to be completed by 2016.⁵⁵ As a trial site for the NDIS the ACT needs to incorporate the NDIS into other Government services, such as the AMC, ahead of other jurisdictions.⁵⁶
- 4.119 The implementation of the National Disability Insurance Scheme (NDIS) in the ACT has resulted in some uncertainty for AMC management with respect to detainees with disability (physical and intellectual). Officers in the AMC Offender Services have been

⁵⁵ <http://www.ndis.gov.au/about-us/our-trial-sites/ndis-act> NDIS in the ACT website Accessed 4 March 2015

⁵⁶ <http://www.ndis.gov.au/about-us/our-sites>. Our Site website, Accessed 4 March 2015

liaising with the National Disability Insurance Scheme taskforce for two years and have met with ACT National Disability Insurance Agency (NDIA) in order to understand how it will affect AMC detainees.

4.120 It has been stated⁵⁷ that:

... for people with intellectual disability and criminal justice involvement to get linked to [the National Disability Insurance Scheme] will require either active outreach and engagement by scheme staff such as local area coordinators and/or active linkage by people who are involved with the person already, for example a lawyer, advocate or justice system worker. Court diversion and early interventions schemes may have key roles.

4.121 It will be important for AMC Offender Services to continue to work closely with the National Disability Insurance Agency to ensure detainees with disability have access to support in line with people with disability in the community.

Detainees with an intellectual disability

4.122 Research⁵⁸ indicates that people with an intellectual disability 'are over-represented in the prison population by a rate of three to four times the prevalence in the general population'. Data on AMC detainees with intellectual disabilities is not collected by ACTCS.

Screening and assessment

4.123 On arrival at the AMC detainees are assessed by ACT Health with respect to immediate risks or needs in terms of physical health, mental health, safety and security. ACT Health staff are not required, and may not be permitted, to share this information with ACTCS as ACT Health staff must act in compliance with the *Health Records (Privacy and Access) Act 1997*.

4.124 ACTCS staff are expected to take into account if a detainee requires extra care which may have a bearing on the detainee's accommodation and the provision of daily assistance.

4.125 Within seven days of a detainee's admission case managers are responsible for administering the case manager's induction checklist (refer to paragraph 4.97). This includes a question on disability: '*Has the detainee identified that he/she has an NDIA package?*' (refer to paragraph 4.119).

4.126 According to the University of Sydney Medical School's *Overview of Hayes Ability Screening Index* the Hayes Ability Screening Index (HASI): can be administered by non-psychologists; correctly screens for intellectual disability in 82 per cent of cases; correctly excludes people without an intellectual disability in 72 per cent of cases; is culture and gender fair; and saves time and resources.

⁵⁷ Simpson J, *Participants or just policed?* May 2013 p 9

⁵⁸ Hayes S, Craddock G. *Simply Criminal* (1992) p 46, and Simpson J, *Participants or just policed?* Guide to the role of DisabilityCare Australia with people with intellectual disability who have contact with the criminal justice system. May 2013

- 4.127 The Hayes Ability Screening Index (HASI), previously administered by ACTCS case managers, is now administered by CPSS staff (psychologists) to those detainees with an apparent intellectual disability.⁵⁹ ACTCS advised that detainees are identified as having an intellectual disability as their relationship with case managers and custodial officers develop. ACTCS advised that due to the large number of detainees affected by drugs on admission administering the HASI on admission was found to be unreliable. Screening tools, such as the HASI, are designed to screen a population of people, e.g. detainees, in order to identify individuals who may have an intellectual disability and who, therefore, require an assessment performed by a psychologist.
- 4.128 There is a risk that only screening those detainees with an apparent intellectual disability may miss detainees with less obvious intellectual disabilities. If a detainee has an apparent intellectual disability a formal assessment would be more appropriate than a screening tool.
- 4.129 Professor Susan Hayes, who developed the HASI, recommended in 2009⁶⁰ that differential treatment be provided for defendants with intellectual disability and mental impairment, including:
- ... tailored programs similar to special school or vocational education ... be offered; appropriate programs [should be offered to give] increased chance of rehabilitation; there should be [planning] for more intensive and longer programs; protection [be provided] from exploitation/violence; and expertise [in the area of intellectual disability be included] among relevant professionals.

Making reasonable adjustment

- 4.130 Education providers in the AMC are required to make 'reasonable adjustment' for people with disability, by virtue of the *Disability Discrimination Act 1992*⁶¹. Registered training organisations such as Auswide Colleges (previously engaged at the AMC) and Campbell Page (the current provider) are required, as a condition of maintaining their RTO accreditation, to make reasonable adjustments. The extent to which this has been necessary and undertaken has not been reported to AMC Offender Services, which manages the delivery of the education contract. ACTCS advised that, during educational assessments, a detainee's individual needs are addressed through the provision of a range of tools.
- 4.131 ACTCS has not recruited anyone in the rehabilitation area specifically for their background in disability although the ACTCS advised that at least two officers have significant disability experience. Additionally psychologists employed in the Corrections Psychological and

⁵⁹ ACTCS advised that this method of administration was decided on in consultation with Dr Hayes.

⁶⁰ Hayes S, Levy M; Vanny K, Greenberg D *The relationship between intellectual disability, mental illness and socioeconomic factors amongst defendants appearing before NSW Local Courts* Australia Community Support Organisation 4th Forensic Disabilities Conference: 'Disability and Justice: Many faces, equal rights?' 16 – 17 July 2009, Melbourne

⁶¹ *Disability Discrimination Act 1992* (Commonwealth) Section Part 1, Sections 5 and 6

Support Services team have significant experience working with people with disabilities. ACTCS advised that they are currently considering whether a specific response to managing disability should be included in any revision of the draft *Case Management Policy Framework*. This is encouraged.

Detainees with mental illness

- 4.132 The *2010 ACT Inmate Health Survey*⁶² identified that the majority of AMC survey participants had mental health issues, with about 70 per cent of them having had a formal psychiatric assessment at some time. Of those, 27 per cent were diagnosed with Attention Deficit Hyperactivity Disorder. Significantly, 40 per cent had suicidal thoughts and 69 per cent of those had attempted suicide. Approximately 62 per cent of the survey participants had experienced a head injury resulting in unconsciousness.
- 4.133 Acute presentations related to suicide and self-harm and/or psychiatric episodes are considered 'rehabilitation interfering factors'. These factors significantly inhibit a detainee's ability, due to their vulnerability, to participate in programs, education and employment.

Corrections Psychological and Support Services

- 4.134 A part of ACTCS, Corrections Psychological and Support Services was established following the appointment of a forensic psychologist in 2013. The service supports AMC detainees with mild to moderate mental illness or mental health issues, including those who are temporarily accommodated in the Crisis Support Unit (CSU).⁶³ The service provides support to detainees who are not already involved with ACT Health mental health services and includes assessment of intellectual functioning and risks of violent behaviour.
- 4.135 The Hamburger Report (2011) made several recommendations relating to the Crisis Support Unit. A follow-up review⁶⁴ was undertaken in 2013, the *AMC Crisis Support Unit Report in Response to Knowledge Consulting*. It concluded that the overarching recommendation relating to the Crisis Support Unit had been partially met, that seven out of nine operational recommendations had been fully met and the remaining two had been partially met.
- 4.136 Fully implemented recommendations include those relating to the appointment of a forensic psychologist, introduction of a step-down regime, improved detainee separation and mixing in the unit, access to programs and activities inside and outside the unit, and information sharing protocols between services.

⁶² 2010 ACT Inmate Health Survey summary results, Health Series Number 55, ACT Health, July 2011, p 11

⁶³ The Crisis Support Unit is designed for short stays where detainees at risk of self harm can be managed in such a way that they cannot continue to self harm or (harm others).

⁶⁴ ACT Corrective Services *AMC Crisis Support Unit Report in Response to Knowledge Consulting* [the Hamburger Review], by A Birgden (Just Forensic) June 2013

4.137 The Corrections Psychological and Support Services do not provide a service to detainees with acute psychiatric disorders as they do not have access to a psychiatrist. However, detainees have access to psychiatric services through ACT Health. ACTCS officers advised that the average Corrections Psychological and Support Services caseload is 25 clients and that detainees are prioritised, taking into account the following factors:

- in custody for the first time;
- a past history of suicide attempt;
- at risk of returning to the Crisis Support Unit due to need seeking and self injurious gestures; and
- fear of leaving the Crisis Support Unit.

4.138 One of the Corrections Psychological and Support Services' aims is to minimise and prevent suicides and self inflicted injury through preventative and 'through care' processes.

4.139 The High Risk Assessment Team is chaired and coordinated by the Corrections Psychological and Support Services' manager. The team includes senior custodial officers, mental health staff (ACT Mental Health), primary health staff (Justice Health) and case managers who meet to develop joint risk management plans. The High Risk Assessment Team plans detainees' transition from the Crisis Support Unit. ACTCS advised that detainees now exit Crisis Support Unit in a timely and stable manner, with a detailed exit plan. This has increased the detainees' ability to: engage in meaningful programs; complete them without interfering behaviours such as the relapse of psychiatric or psychological symptoms, self harm or suicide attempts; and develop healthy attachments to peers and family. While this may be the situation, this was not assessed in this audit.

Table 4-5 Comparison of Crisis Support Unit use between October 2013 and October 2014

Date	Average length of stay (days)	Number of detainees for the month
October 2013	30 to 35	20 (5 exited and returned during October)
October 2014	12	33 (17 transitioned to other areas, 1 returned during October)

Source: ACTCS data February 2015

4.140 Table 4-5 shows the decrease in average length of stay and the increase in detainees supported in the Crisis Support Unit between October 2013 and October 2014. This indicates that the Crisis Support Unit is being utilised for shorter stays for more detainees in 2014.

4.141 There is now consistent rostering of uniformed custodial officers in the Crisis Support Unit which improves awareness and understanding of a detainee's needs. Furthermore, a training pilot is being conducted for custodial officers for managing the risk of detainee suicide and self harm.

- 4.142 Detainees with mental illness may be eligible for support through the National Disability Insurance Scheme and so will need to be supported to access these services along with detainees with physical and intellectual disabilities.
- 4.143 If prioritised for support through the AMC Corrections Psychological and Support Services, detainees with a mental illness receive a targeted service.
- 4.144 Given the significant role played by the Corrections Psychological and Support Service in addressing detainees' mental illness it will be important to collect data on detainees receiving intervention, and the outcomes of that intervention, in order to evaluate the impact of the service. Factors such as: time from referral to treatment; if detainees are excluded from treatment, and why; and if detainees are part of specific programs such as Schema therapy (if not, why not) should be included in any evaluation.

Schema Therapy

- 4.145 The more severe personality disorders, Antisocial, Borderline, Narcissistic and Paranoid, are the most prevalent in forensic settings. Corrections Psychological and Support Services and the University of Canberra conducted a six-month Schema Therapy Group pilot at the AMC in 2014, one of the first in an Australian prison.
- 4.146 Schema Therapy is suitable for individuals who are usually non-responsive to other programs and who exhibit traits of psychopathy and/or anti-social personalities. ACTCS officers advised that for the next Schema Therapy group, referrals with the following profile will be received:
- at least six months remaining on sentence;
 - psychopathology with prominently resistant personality disorders;
 - not benefiting from basic cognitive practices already offered;
 - voluntary and prepared to engage;
 - not a child sex offender, no active psychosis, not on the Autism spectrum; and
 - not in other psychological intervention groups.
- 4.147 A case study, in Figure 4-5, was provided by ACTCS, to illustrate a successful case of stabilising and supporting a detainee.

Figure 4-5 Stabilisation and support for detainees in crisis**Case study**

An offender was detained at the AMC having breached the conditions of his periodic detention order.

In his late 50s, born overseas and having migrated to Australia as an adult, he is from a culturally and linguistically diverse background. He is married with adult children and was a prominent member of his community. His offences and conviction have brought considerable shame and isolation to himself and his family.

Prior to entry to the AMC the offender had been receiving treatment for Post Traumatic Stress Disorder (PTSD) and depression and had made attempts (including a very serious one) on his own life. Upon entry to the AMC he was admitted to the CSU and identified as at an immediate risk of suicide. He also suffers from a range of other health disorders including hypertension and diabetes.

During the offender's first three weeks in the CSU staff attempted to ensure he ate properly and took his medication for his physical conditions. Staff also monitored his behaviour to ensure he did not commit an act of self-harm. The offender resisted these efforts and isolated himself from his family, refusing to attend their visits. The Corrections Psychological Support Services (CPSS) team actively engaged with ACT Health and with the offender's family, convincing the offender to begin eating properly and to take his medication.

Over the next two months CPSS moved the offender from an engagement phase, through a stabilisation phase, to a treatment phase. The offender began attending the daily activities and weekly groups available to detainees in the CSU. He was no longer constantly threatening suicide although he was still experiencing distress and threats of self-harm. ACT Adult Mental Health services were assessing his risk and providing therapy while CSU staff engaged with him daily. While he still refused visits intermittently, ACTCS senior managers encouraged attendance and informed his family when he refused. While the offender still presented as fearful of others and nervous about possible movement from CSU, he began to enjoy the company of others.

Towards the end of the two months the offender began mixing with other detainees, beyond the CSU activity schedules, and became close to two detainees. He began focusing on the future and was denying any suicidal intent. One of his adult children was having a baby and this gave him considerable focus and hope. During this time he reported that prior periods in hospital for treatment of physical and mental health problems had not been as effective as his current time in the CSU. While he was still fearful of moving from the CSU the offender expressed a wish to leave, gain employment, and attend other programs within the AMC. He commenced a transitional move to another area and completed a full movement from the CSU after about three months in the AMC.

Over the next nine months the offender transitioned through accommodation units in the AMC and to the Transitional Release Centre (TRC). He remained under the care and treatment of the CPSS team and Adult Mental Health Services as part of continuing care. He faced difficulties with some detainees who insulted and provoked him, showing that he remained a vulnerable detainee; with the assistance of staff and the support of other detainees he remained positive. The offender obtained work in the AMC kitchen, attended one on one therapy and a group which facilitated taking responsibility for his decisions around his offences. One-on-one therapy provided intensive and individualised interventions, important due to the impacts of his health and cultural needs on his adjustment to, and acceptance of, his circumstances.

After moving to the TRC the offender gained employment in the AMC stores and at various other locations. He returned to the CSU on one occasion when he was monitored for health concerns. His family sponsored him for home visits on leave permits and the forthcoming marriage of one of his children provided another positive focus. At one point the offender faced considerable stress when he faced fresh charges from prior to his time in the AMC; he remained positive and worked through these legal problems, avoiding extreme thinking patterns which had previously led him to suicide attempts. He was released from prison after 12 months.

The offender was engaged with the Extended Throughcare Program and the Detention Exit Community Mental Health Outreach Program (ACT Health) which offered intensive support on his release including health, mental health and social support to adjust into the community.

Source: ACTCS February 2015

Evaluating and identifying improvement priorities

- 4.148 ACTCS officers, through efforts to create a more respectful culture and by providing programs and education, work to support the human rights of detainees. ACTCS advised that, through effective case management, it addresses the individual needs of detainees and so ensures that, as much as is possible in a custodial setting, the human rights of detainees are upheld.

- 4.149 Detainees are not always active participants in the development of their case management plans. Detainees with an intellectual disability or from a culturally or linguistically diverse background may not be able to have their specific needs identified or addressed in their case plans. Without data on these cohorts it is not possible to judge the extent to which this occurs.
- 4.150 The issue of a detainee's participation in the development of their own case management plan is complex. Having someone else determine their plan is likely to be problematic from a human rights perspective. However, collecting data to better tailor case management plans for those detainees who wish to engage will provide a means whereby AMC Officers can increase their capacity to better support detainees. This in turn advances the implementation of human rights in the AMC.
- 4.151 Individualised services for detainees with a mental illness have increased since the introduction of the Corrections Psychological and Support Services unit, including the High Risk Assessment Team and the Schema Therapy Group. However, there is a need to examine whether detainees from a culturally or linguistically diverse background or those with an intellectual or physical disability could be better supported. Furthermore, it will be important for evaluations of any interventions to be undertaken so that resources are effectively targeted.

IT systems supporting the management of offenders

- 4.152 Justice and Community Safety Directorate annual reports and budget papers since 2012, and the *2012-2017 ACTCS strategic plan* identify the priority placed on improving information management systems, particularly systems that would:
- strengthen system resilience, serviceability and security;
 - enable more effective offender case management;
 - provide for interoperability between different arms of the criminal justice system;
 - enhance management information availability and analysis; and
 - support improvements in the governance framework across ACTCS.
- 4.153 ACTCS officers identified that work has been underway since 2012 to improve or replace the main computer system, known as JOIST. It was introduced in the ACT in 2004.
- 4.154 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.

- 4.155 Throughout the audit difficulties were encountered in obtaining sufficient, comprehensive and consistent management information that covered the five years of the operation of the AMC. This may in part be due to the change in AMC personnel over the five years, but it is also due to the heavy reliance on individual officers' spreadsheets for the operational management of activities in their area. This occurs as the electronic information system, JOIST, is inadequate in producing the required management information.
- 4.156 ACTCS commissioned an independent review⁶⁵ of existing data collection and management practices with a view to identifying ways in which a more integrated approach could be adopted to support data collection and management. The final report (September 2012) stated:
- ACTCS has been experiencing ongoing challenges in recent years in collecting, managing and reporting on its data and information. This is evidenced by a range of spreadsheet and database systems that are in place to support ACTCS's key business system JOIST.
- 4.157 The September 2012 independent review proposed a 'roadmap' to move from the 'current state' to the 'future state', with a preferred option, to enhance JOIST platform through a series of strategic activities over a five-year timeframe.
- 4.158 Since September 2012 other options have been developed and are under consideration. The ACT Government provided \$400 000 in the 2014-15 budget to begin work on developing an ACT 'Corrective Services information management solution'. This may enhance or replace JOIST. ACTCS has a target date of the end of 2017 for completing improvements to its information management systems.
- 4.159 The JOIST computer system has been inadequate as it has been unable to produce the type of management information that could assist in better managing AMC rehabilitative activities and services. The initial 2012 preparatory work to improve or replace JOIST has taken time to progress. There is a pressing need to progress improvements quickly.

RECOMMENDATION 6 CASE MANAGEMENT POLICY FRAMEWORK (CHAPTER 4)

The draft *Case Management Policy Framework* (July 2014) should be updated and finalised by ACTCS in a timely manner. It should, among other things, provide guidance on how to:

- a) maintain detainee autonomy while increasing the priority given to detainees' rehabilitation goals, balancing these against the community's need for protection;
- b) improve communication and coordination between those involved in supporting detainees; and
- c) collect data on all detainees.

⁶⁵ ACT Corrective Services *Data Collection and Management project* PwC Sept 2012

RECOMMENDATION 7 ADDRESSING INDIVIDUAL DETAINEE NEEDS (CHAPTER 4)

Data on detainees with physical disabilities, intellectual disabilities and those from culturally and linguistically diverse backgrounds should be collected by ACTCS. This should be used to improve services for detainees in these cohorts and evaluate the effectiveness of activities and services.

RECOMMENDATION 8 ACTCS INFORMATION MANAGEMENT SYSTEM (CHAPTER 4)

The implementation of improvements to ACTCS information management systems should be accelerated to correct inadequacies as soon as possible.

5 EFFECTIVENESS OF REHABILITATION PROGRAMS

- 5.1 This chapter examines a range of rehabilitative activities provided, or coordinated, by AMC Offender Services, and compares performance on an annual basis.

Conclusion

Improvements have been made in AMC operations in the last two years; there has been a reduction in staff overtime, an improved ratio of planned to unplanned leave, reductions in the use of force and lockdown hours, and a decline in detainees' length of stay in the Management Unit (facility for specialist supervision of detainees). This, coupled with a 'cultural change' that is underway provides an improved rehabilitation environment. However, despite these improvements, it is not possible to determine if rehabilitation planning and delivery is becoming more effective as the necessary information to determine this is not available.

The Level of Service Inventory-Revised (LSI-R) assessment, already used in the AMC, could be used more effectively in case management. While LSI-R reliability historically (pre-2012) has been questionable, it can be managed through ensuring assessors are trained and quality assurance measures are implemented. Furthermore, improving ACTCS information management systems will assist in LSI-R assessments being better used.

Although management information on detainee activities and services is limited, that which is available indicates that detainee participation in some purposeful activities gradually increased from 2012 to 2014. This occurred as the detainee population increased. However, programmed activity and participation levels are substantially lower than that planned in the 2007 delivery strategy. ACTCS officers recognise that the 'structured day' is not being achieved for many detainees. The 'structured day' and sufficient 'purposeful activity' need to be defined in ACTCS policy. Without a 'structured day' with 'purposeful activity' there is a risk that detainees will be bored and this can undermine rehabilitative effort.

Key findings

	Paragraph
The independent advice provided by the Australian Institute of Criminology for this audit supported the advice in the <i>Community Corrections Review for ACT Corrective Services</i> (Birgden) that timely follow-up LSI-R assessments may serve several purposes, including monitoring aspects of case management including changes in the risk profile of detainees. While this is the case, ACTCS advised that assessment scores should be used with caution as changes in scores can result from a range of circumstances, relating to the detainee, the environment of the detainee and the assessor.	5.16
LSI-R assessment scores are used in case management planning. However	5.22

assessment scores have not been used systematically by ACT Offender Services to review the implementation of case management. For this to happen in the future, ACTCS will need to reliably administer the assessment, and there are doubts that this occurred prior to 2012. Recording data electronically will ensure LSI-R assessments, if reliable, have greater utility.

External stakeholders advised that they had observed a changing culture in ACTCS. ACTCS officers acknowledged that this is the beginning of a long journey that may take ten years. The 'culture change' is likely to have contributed to the improved operating environment at the AMC achieved by a reduction of staff overtime, an improved ratio of planned leave to unplanned leave, reduced use of force to restrain detainees, fewer lockdown hours, and shorter lengths of stay by detainees in the Management Unit. 5.42

An analysis of program timetables for the years 2012 to 2014 indicates that, in terms of timetabled program time, the three criminogenic programs (Family Violence Self-Change/Domestic Abuse Program; Cognitive Self-Change; and Adult Sex Offender) account for 44 per cent of all the timetabled therapeutic programs available each week. In 2012, 22.4 per cent of the sentenced detainee population participated in at least one of these three criminogenic programs; in 2013, it was 22.1 per cent and in 2014 it was 21.0 per cent. This means about one in five sentenced detainees is in one of the three main criminogenic programs at any one time and this is for between 2 and 2.7 hours per week. 5.58

The number of detainees in criminogenic programs significantly increased from 2012 to 2014 from 33 detainees to 44 at any one time. The number of hours per sentenced detainee per year in programs (excluding detainees in specialised accommodation units) has also increased from a total of 21 hours in 2012 to 27 hours in 2014. However, this is significantly less time than the planned time of 52 hours per detainee per year assumed in the 2007 delivery strategy. 5.59

Based on participation rates in the three criminogenic programs for each sentenced detainee (excluding detainees in the Transitional Release Centre, the Crisis Support Unit the Therapeutic Community and the Management Unit, as their custodial setting precludes their participation in these criminogenic programs), the average number of hours per detainee in all timetabled therapeutic programs for 2014 was about one hour a week. 5.60

Participation in the Adult Sex Offender Program is around the level originally envisaged (9 versus 10 per cent of all sentenced detainees). However there are far fewer participants in the Cognitive Self-Change Program than was originally envisaged (26 versus 90 per cent). Also, while the Cognitive Self-Change program has been validated as suitable for violent offenders, there has not been any 5.64

delivery of programs specifically designed for violent offenders in the period 2012 to 2014, with the exception of domestic abuse offenders. Violent offenders were identified as a priority group for a specialised program in the 2007 delivery strategy.

The *Industries Plan* (2008) estimated that sentenced detainees would be available for purposeful activity for 40 hours a week (30 hours during the week and 10 hours at weekends) comprising 44 per cent AMC-based service employment, 8 per cent education and 7 per cent criminogenic program participation. A further 43 per cent of time was identified in the plan as being potentially available for employment in prison industries. These prison industries have not been developed in the AMC. 5.73

The Justice and Community Safety Directorate budget proposals and management reports indicate that the budget for detainee employment gratuities has been a limitation on the number of employment positions for detainees. Other factors include the capacity of the AMC to accommodate meaningful employment positions and the suitability of a detainee for a position. 5.81

Detainees who are available and waiting for work have been recorded as unavailable for work in data used for the *Report on Government Services*. Accordingly AMC detainee participation in employment is likely to be overstated in the *Report on Government Services*. 5.85

Information was not available to discern which factors are the most significant in affecting the reduction in the percentage of detainees in employment in the AMC. Fewer than one in two (41 per cent) participated in work in the quarter to June 2014. It is probable that the unavailability of work was a significant contributing factor. 5.90

There is no comprehensive record system to collect data (in hours) on the work undertaken by a detainee. It is therefore not possible to determine the contribution employment makes to 'purposeful activity' in a detainee's 'structured day'. However, it is very likely to be significantly fewer hours than the hours assigned to employment for detainees. 5.95

The range of employment opportunities at the AMC is limited, and has mainly been in work that contributes to the running of the prison. Employment as a means of developing detainees' skills ready for employment post-release has been very limited. Although ACTCS officers are considering how to diversify employment opportunities, this needs to be progressed quickly and reflected in an employment plan. Without such a plan there is a risk that needed employment opportunities to assist detainees' rehabilitation will not be realised. 5.98

ACTCS officers acknowledge that the allocation of employment and the progress detainees make within positions need to be more efficient and fairer. They have identified current shortcomings and are developing a new employment policy and procedures.

5.100

Enrolments in vocational education and training declined relative to the detainee population from 94 per cent in the quarter ending September 2011 to 74 per cent in the quarter ending June 2014. Furthermore, participation rates were significantly lower than enrolments. In the quarter ending September 2011 participation was 62 per cent of those enrolled and in the quarter ending June 2014 it was 72 per cent. Over the three-year period, participation rates varied between 62 and 83 per cent of those enrolled. This is an improvement on the finding in the Hamburger Review (2011) that there was an estimated 50 percent reduction between enrolment and attendance (i.e. participation).

5.108

Estimates derived from using education reports (July 2011 to June 2014) indicate that the numbers of detainees participating in one or more vocational education and training session per month were higher, sometimes substantially higher (up to 57 per cent), than the level anticipated in the 2007 delivery strategy.

5.111

Original planning estimates in the 2007 delivery strategy anticipated that detainees would participate in education for between three and five hours a day (or 15 to 25 hours per week). Actual participation rates for the period July 2011 to June 2014, at an average of two hours a week, were significantly below the original planning estimates of 15 to 25 hours per week.

5.114

There is a lack of management information on the participation of detainees in recreation and leisure activities in the AMC. This means that it is not possible to determine whether expectations, as set out in AMC plans, or whether detainees' needs and interests, are being met. The views of detainees, officers and other stakeholders indicate that while access to recreation activities can be limited, library services were well used and highly regarded.

5.127

Family and friends' visits facilitated by the AMC visitors' centre account for an average of six hours in visiting slots per detainee per month (one-and-a-half hours per week). Separately, visiting service providers account for less than one visit per month per detainee. Coordinated by the AMC Offender Services, the complex task of managing large numbers of service provider requests for visits is now being more actively managed. The level of visits overall, from family and friends and service providers, does not account for a substantial amount of time in the 'structured day' of a detainee.

5.139

The 2007 delivery strategy proposed a daily routine with approximately six hours of scheduled activities per day, five days a week for each detainee. However, fewer than one in two male detainees is in employment and for those who are, the time spent in work is indeterminate. Regardless of whether or not a detainee is working, their 'structured day' generally comprises no more than one hour a week on average in therapeutic programs and only approximately two hours a week is spent with family and other visitors; and an average of two hours a week is spent in education. Accordingly, detainees who do not work, on average only spend five hours per week involved in the three main activities of education, therapeutic programs and visits per week. This is significantly less time than the 30 hours envisaged in the 2007 delivery strategy. There is a risk that detainees become bored in the absence of sufficient 'purposeful activity', and that this undermines rehabilitative efforts.

5.145

ACTCS officers stated that the implementation of the structured day as outlined in the 2007 delivery strategy has not proved practicable since compelling detainee participation is inconsistent with the AMC operating philosophy. In addition, the design of the AMC requires a large number of daily movements to maintain detainee separation and segregation and this affects the efficient running of programs. While the new buildings under construction may alleviate this to some degree, there is a need to consider what can be achieved with respect to a 'structured day' and 'purposeful activity' in the light of the broad operational experience gained in running formal and informal programs over the first five years of the AMC. This needs to be articulated in written policy.

5.147

Twenty five per cent (15) of the places originally planned (60) have been provided in the Transitional Release Centre. However, a larger proportion of detainees have eventuated that are classified as a higher security risk. They are not suitable for an open prison. For detainees in the Transitional Release Centre opportunities are more limited than inside the fence regarding education, and in part depending on labour market conditions, for employment too. However, therapeutic program opportunities are greater and participation rates are higher.

5.166

It is probable that remanded detainees have fewer opportunities available to them than sentenced detainees for being purposefully occupied in therapeutic and employment programs.

5.183

Outcomes of the Government's emphasis on rehabilitation

5.2 As stated in paragraph 3.43, there are no overall rehabilitation performance measures available to the ACT Government to determine whether:

- its strong emphasis on the rehabilitation of detainees is being achieved; or
 - its efforts to rehabilitate detainees are reducing reoffending rates or improving ex-detainees' prospects after release.
- 5.3 There is no evaluation framework for rehabilitation, and evaluations of processes and outcomes related to rehabilitation have been limited. Therefore, ACTCS is unable to determine the effectiveness of processes, or the overall achievement of the programs and services that are provided.
- 5.4 Given the above, the effectiveness of specific rehabilitative activities is considered in this chapter based on information that is available to ACTCS officers. Since there is no rehabilitation framework, the *Delivery Strategy for Vocational Education and Training and Rehabilitative Programs at the Alexander Maconochie Centre* (the '2007 delivery strategy') is used as the policy document for assessing the level and mix of 'purposeful activity' that is intended to achieve a 'structured day' for detainees.
- 5.5 This assessment is limited to those activities:
- that can be quantified;
 - for which sufficient data has been sourced for 2009 to 2014, particularly the three years 2012 to 2014;
 - that are likely to account for largest quantity of a detainee's time; and
 - that are targeted at cohorts of detainees.
- 5.6 In the case of therapeutic programs, the assessment has focused on three criminogenic programs: (Family Violence Self-Change/Domestic Abuse Program; Cognitive Self-Change; and Adult Sex Offender) as these programs:
- account for 44 per cent of all the timetabled therapeutic programs available each week;
 - have run more or less continuously in the last three years; and
 - can be used as the basis to estimate probable participation levels across all weekly timetabled therapeutic program in the absence of more precise management information.

Assessing the effectiveness of rehabilitation in reducing reoffending

- 5.7 The Justice and Community Safety Directorate considers that relying on two-year recidivism as a measure of rehabilitation is over-simplistic (refer to paragraph 3.6).
- 5.8 As mentioned in paragraph 4.18, there are a number of assessment tools that case managers and others use to determine detainees' rehabilitative needs. ACTCS officers stated that the Level of Service Inventory-Revised (LSI-R) assessment is central to case management and is the primary risk assessment tool used in ACTCS. Furthermore, across

Australia it is the most widely used assessment tool for identifying a detainee's risk of reoffending.

- 5.9 As a predictor of recidivism, the LSI-R assessment tool has been extensively validated internationally. In Australia, research conducted by Corrective Services NSW⁶⁶ on 11 051 assessed detainees serving sentences of two years or more confirms the predictive validity of the LSI-R assessment. There was a strong correlation between assessed scores, and the rate of reoffending as well as the time taken to reoffend.
- 5.10 The Justice and Community Safety Directorate had, until 2012-13, adopted and reported in its annual reports a measure utilising LSI-R scores to calculate the changing 'risk of reoffending' profile. The measure reported the 'percentage and number of offenders whose assessed risk reduces over time'. However, this performance measure only related to offenders serving community orders, not custodially-sentenced offenders. The measure was not selected for annual reporting in 2013-14 and 2014-15 due to ACTCS Executive concerns about the use of LSI-R assessment scores for this purpose.
- 5.11 Although the Justice and Community Safety Directorate has not adopted any comparable measure for reporting changes in AMC detainees' risk of reoffending, the following was considered in this audit, whether:
- a change in individual detainee assessment scores over time indicates a change in the detainee risk profile and is a reasonable indication of the effectiveness of rehabilitation effort in the custodial setting; and
 - LSI-R risk assessment scores for AMC detainees could be used, in aggregate, to assess rehabilitative progress in custody.

Use of LSI-R to determine the effect of rehabilitation

- 5.12 The Australian Institute of Criminology advised that:

There will necessarily be limits to whether changes in assessed dynamic risk among prisoners can be attributed to rehabilitation programs as other factors may also have influenced this change. Those factors might include cognitive changes initiated and perpetuated by the individual, positive influences from custodial and program staff or other prisoners, support from family or service providers from outside the prison or changes in life circumstances within the community that influence the prisoner. Nonetheless, as an essentially closed institution the prison and the interventions delivered within the correctional system, are likely to exert a very strong influence over any observed change in a prisoner's criminogenic needs and dynamic risk. While LSI-R scores will not in isolation serve to establish a causal relationship between rehabilitative interventions and reduced risk, they can provide a strong indication that such a relationship may exist and can usefully indicate the effectiveness of a rehabilitative intervention.

- 5.13 The Birgden *Community Corrections Review for ACT Corrective Services* (2013), commissioned by ACTCS examined the robustness and efficacy of LSI-R assessment in

⁶⁶ *The utility of the Level of Service Inventory*, NSW Corrective Services NSW, Corporate Research, Evaluation and Statistics, Research Bulletin no. 29 January 2011

ACTCS. The Review emphasised the legitimacy of the LSI-R with respect to its use in informing case management and its predictive validity for recidivism.⁶⁷

... in addition to predicting risk and guiding intervention, these tools can be used to capture changes in levels of assessed risk across time (page 3);

... the LSI-R is appropriate for use in identifying treatment targets and monitoring offender risk while under supervision and/or treatment services (page 5);

(o)nce the offender has received treatment, a follow-up LSI-R can be administered to monitor the offender's progress and if necessary, modify the offender's treatment plan [i.e. case plan] (page 6); and

(t)he need to reassess LSI-R scores over time was recently highlighted it was necessary in order to 'determine if an assigned treatment and services reduce a client's risk factors associated with recidivism'⁶⁸ (page 11).

5.14 However, ACTCS officers advised caution:

- LSI-R component or overall scores alone are unlikely to be a sound basis for evaluating a specific program, but better reflect the effectiveness of case management in its totality if considered with other detainee information;
- detainees' LSI-R based risk decrease over time in prison due to factors imposed by the custodial environment, which may immediately revert upon release into the community; and
- detainees' LSI-R based risk may increase over time in second and subsequent assessments, particularly if performed by the same assessor who may gain a fuller understanding of the detainee.

5.15 ACTCS officers also stated:

Research has provided evidence for the dynamic validity of the LSI-R. The trend of scores for test and re-test provide an additional layer of evidence about the level of risk beyond the actual score.

5.16 The independent advice provided by the Australian Institute of Criminology for this audit supported the advice in the *Community Corrections Review for ACT Corrective Services* (Birgden) that timely follow-up LSI-R assessments may serve several purposes, including monitoring aspects of case management including changes in the risk profile of detainees. While this is the case, ACTCS advised that assessment scores should be used with caution as changes in scores can result from a range of circumstances, relating to the detainee, the environment of the detainee and the assessor.

⁶⁷ *Community Corrections Review for ACT Corrective Services* (2013) Appendix B LSI-R Analysis report, page 3 and 6

⁶⁸ Lowenkemp C, Bechtel K. *The predictive validity of the LSI-R on a sample of offenders drawn from the records of the Iowa Department of Corrections data management system* (2007) cited in the *Community Corrections Review for ACT Corrective Services*

Use of LSI-R in AMC case management

- 5.17 ACTCS officers confirmed that LSI-R data on AMC detainees is not extracted from the ACTCS information management system (JOIST) and is not used quantitatively to identify needs, changes in the risk of reoffending or the effectiveness of case management for detainees while in custody either individually or as a cohort.
- 5.18 Officers further identified that component scores (e.g. the individual scores or ten 'domain' scores relating to the dynamic and static risk factors, refer to Appendix A: LSI-R risk factors) are used in case management planning but are not recorded separately in JOIST and so cannot be extracted or used to explore linkages between risk factors, programs and rehabilitative outcomes. ACTCS recognises this is a desirable function for the information management system (JOIST) and it is included in the improvement work planned (refer to paragraph 4.158). Currently, officers manually link LSI-R domain scores to case plan activities.

LSI-R Data reliability

- 5.19 The Birgden *Community Corrections Review for ACT Corrective Services* (2013) referred to issues of LSI-R score reliability for those assessments conducted for offenders serving sentences in the community, and for pre-sentence reporting, due to the way LSI-Rs are implemented by ACTCS. For example, the review states:

... an issue that has arisen in staff consultation is that the LSI-R may not be appropriately administered/scored/interpreted ... (page 34)

And,

... the research highlights the need for adequate training in the administration and in interpretation of the LSI-R Training should extend beyond staff reading a manual A recent ACTCS incident has indicated poor scoring and interpretation of LSI-R ... (page 43 Appendix B: LSI-R analysis report).

- 5.20 ACTCS officers advised that LSI-R data should be used 'with caution' since:
- There were some deficiencies in the administration of the LSI-R tool that, while since corrected, undermine the reliability of scores before 2012.
- 5.21 ACTCS officers advised that changes to LSI-R assessment procedures, supervision and refresher training had been introduced since 2013, particularly focused on community-based LSI-R assessment. While this may improve the reliability of current and future assessments, it will not improve the reliability of the LSI-R evidence base for the first five years of the AMC's operations.
- 5.22 LSI-R assessment scores are used in case management planning. However assessment scores have not been used systematically by ACT Offender Services to review the implementation of case management. For this to happen in the future, ACTCS will need to reliably administer the assessment, and there are doubts that this occurred prior to 2012. Recording data electronically will ensure LSI-R assessments, if reliable, have greater utility.

Challenges to providing planned and ‘purposeful activity’

5.23 It has been identified that the ACT Government’s strong emphasis in the AMC on the planning and delivery of rehabilitation has been made more challenging in the first five years of operation (refer paragraphs 1.19, 2.148 and 3.43) due to:

- the much larger detainee population than was initially anticipated;
- the need for higher levels of segregation of detainees;
- the detainee population having a much higher risk classification than anticipated,
- shorter lengths of sentences served (although this has been lengthening);
- the lack of continuity in senior management in the first three years of the AMC and the initial lack of ACTCS corporate and operational experience of working in a rehabilitation focused custodial environment with sentenced detainees; and
- the absence of any means to determine the effectiveness of what is being delivered.

A changing operating environment

5.24 ACTCS officers advised of a number of areas of activity that are likely to be indicative of an improved operating environment in which to plan and deliver rehabilitative activities and services. These activities are:

- staff overtime;
- planned and unplanned staff leave;
- use of force to restrain detainees at risk of harm to themselves or others;
- lockdowns; and
- the Crisis Support Unit and the Management Unit.

Staff overtime

5.25 Overtime had been increasing during the first five years of AMC operations, but it declined by 45 per cent from \$1.6 million in 2012-13 to \$876 000 in 2013-14 (refer to Figure 3-8). Lower levels of staff overtime may reflect more forward planning rather than being reactive. Forward planning would facilitate a more predictable routine in which to plan rehabilitation.

Staff leave

5.26 An analysis of leave balances at the end of each financial year since June 2009 identified a gradually increasing proportion of leave balances for personal leave compared to leave balances for annual leave. This may indicate that more recreational leave is being planned and taken, with reduced absenteeism through sick leave. This pattern is likely to facilitate a more predictable routine in which to plan rehabilitation.

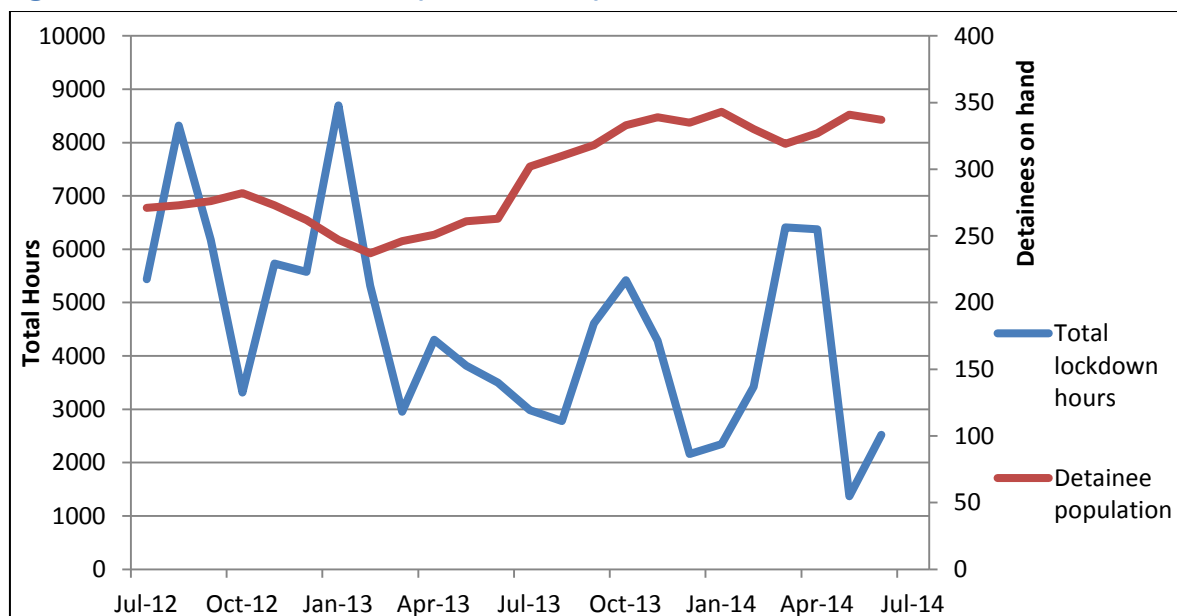
Use of force

- 5.27 ACTCS advised that in the past two years most operational staff had participated in a redesigned operational skills training program, with an emphasis on new protocols for the use of force and de-escalation techniques. Officers identified a history of poor practice and high levels of use of force occurring prior to the implementation of this training.
- 5.28 Internal reports indicate that there were between 60 and 65 use of force incidents recorded in 2010, 2011 and 2012. This declined to 48 in 2013 and 22 in the first half of 2014. Fewer incidents requiring the use of force may indicate more effective de-escalation by custodial officers, resulting in fewer lockdowns and a reduction in disruptive behaviour from detainees. This would lead to an environment more conducive to supporting and promoting rehabilitative opportunities.

Lockdowns

- 5.29 The Productivity Commission's *Report on Government Services* reports 'time out-of-cells' (refer to paragraph 3.28) annually. This is reported internally by ACTCS on a monthly basis. The monthly data includes information on the cause of lockdowns and the total number of detainee hours affected. Over half of all lockdowns in 2013-14 were the result of staff shortages. Data from the last two years indicates a gradually reducing number of detainee hours affected by lockdowns even though the detainee numbers on-hand have increased.

Figure 5-1 Lockdowns hours (all detainees)



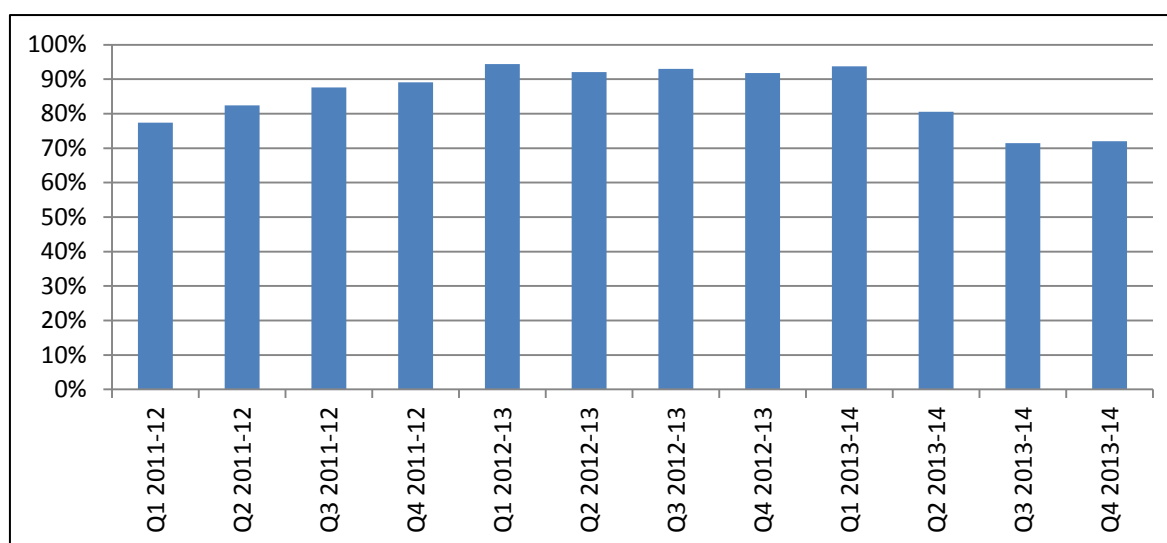
Source: ACTCS AMC monthly management reports

- 5.30 Detainee lockdown total hours, since December 2012 have overall trended downwards. However the two Official Visitors, between them making 73 visits to the AMC during 2013-14, report that lockdowns remain the subject of detainee complaint.

Use of the Crisis Support Unit and the Management Unit

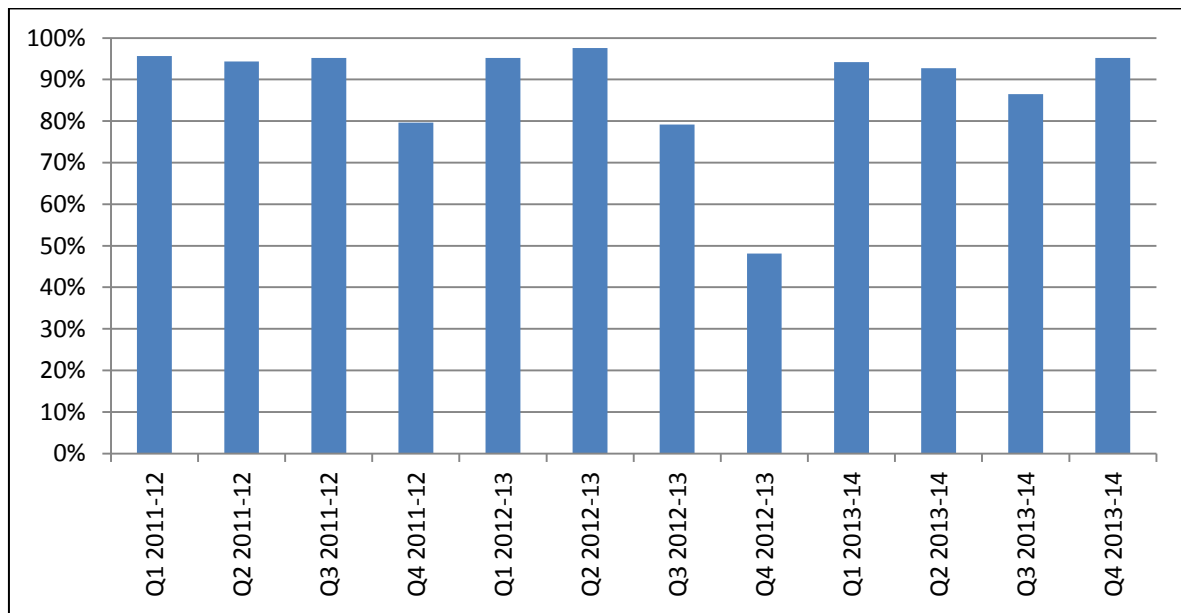
5.31 The 10 bed Crisis Support Unit and the 14 bed Management Unit provide a facility for specialist supervision of detainees with particular needs including disruptive behaviour. They are not long term accommodation units. The Hamburger Review (2011) identified that some of the cells in the Management Unit were being used for accommodating 'protection' status detainees, that there were detainees accommodated in the Crisis Support Unit who should not have been there, and that detainees were staying too long in the units.

Figure 5-2 Crisis Support Unit utilisation



Source: JOIST data Sept 2014, ACTCS

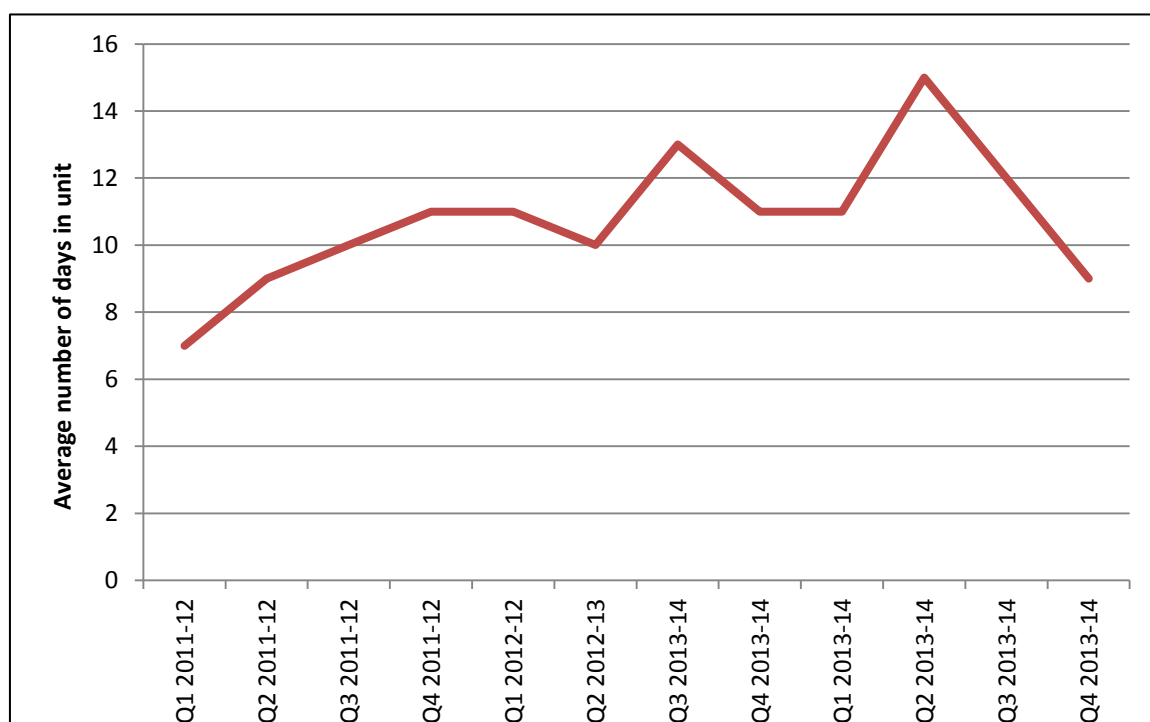
5.32 The Crisis Support Unit utilisation rate overall was high for the period July 2011 to June 2014. In this period, for five quarters out of 12 (42 per cent of the time) occupancy was over 90 per cent; and four quarters out of 12 (33 per cent of the time) occupancy was between 80 and 90 per cent. In the last four quarters to June 2014, occupancy of the Unit reduced from 94 per cent to 72 per cent.

Figure 5-3 Management Unit utilisation

Source: JOIST data Sept 2014, ACTCS

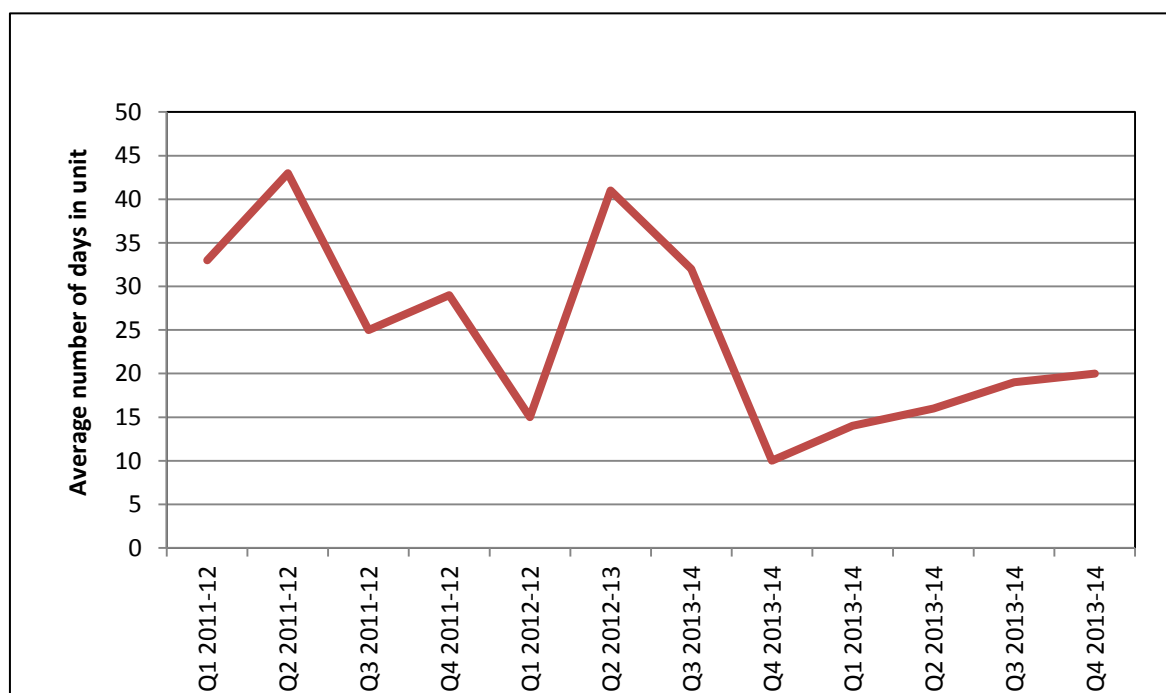
- 5.33 The Management Unit utilisation rate overall was high between July 2011 to June 2014. In this period, for 8 quarters out of 12 (66 per cent of the time) occupancy was over 90 per cent. In the 12 months to June 2014, occupancy of the Unit was between 87 per cent and 95 per cent.
- 5.34 Utilisation rates (refer to Figure 5-2 and Figure 5-3) indicate that both the Crisis Support Unit and the Management Unit have been close to full capacity for much of the last three years. Very high utilisation rates may be sub-optimal as this limits the ability to rapidly respond to changing needs.
- 5.35 A further dimension in the use of these units is the detainees' length of stay. Over the same three-year period, the average length of stay for detainees in the Crisis Support Unit (refer to Figure 5-4) has been in the range of 7 to 15 days. In the Management Unit the average length of stay (refer to Figure 5-5) has been trending downwards, within the range of 10 to 42 days.
- 5.36 Although utilisation rates have been relatively high in each case, the reducing number of days' stay for detainees in the Management Unit indicates that more detainees are able to benefit from these specialist units and are able to access them in a timely manner. It may also reflect a less punitive culture or better management of behaviour.
- 5.37 The operating environment at the AMC in which to plan and deliver rehabilitative activities and services is improving. There has been a reduction in staff overtime, an increase in planned leave and a reduction in unplanned leave, reductions in the use of force and the number of lockdowns, and a decline in detainees' length of stay in the Management Unit.

Figure 5-4 Crisis Support Unit average length of stay



Source: JOIST data Sept 2014, ACTCS

Figure 5-5 Management Unit average length of stay



Source: JOIST data Sept 2014, ACTCS

Achieving 'cultural change'

- 5.38 The first report of the New South Wales Inspector of Custodial Services, *The invisibility of correctional officer work* (May 2014) outlines the challenges of working in a custodial environment. The report states:

It is only through the professional conduct and humanitarian concern of the majority of staff that so many fundamentally unwell people who are in custody are seen through the night safely ...

- 5.39 The report identifies 'stressors in the correctional setting', such as the need for correctional officers to deal with self harming and suicidal detainees, with risks to personal safety for staff including infection, and a working environment with hard architecture, sensory deprivation, noise, and a lack of privacy that 'blunt human sensibilities'. It concludes that the correctional workplace is like few others.
- 5.40 Of the 185 operational staff (FTEs) working at the AMC during 2013-14 (refer to Table 3-1) the majority are uniformed custodial officers. Custodial officers have routine contact with detainees. Their appropriate recruitment, training and development ensure they are able to maximise their contribution towards achieving the balance of maintaining good order in the AMC and providing a rehabilitative environment for detainees.
- 5.41 ACTCS senior managers advised that the 'Good Lives Model' and pro-social modelling principles, as set out in the draft *Case Management Policy Framework* (July 2014), are influential in achieving 'culture change'. Senior managers have been focusing on:
- values-based recruitment;
 - rethinking training and development through a comprehensive review of the operational skills training package, which includes a new philosophy with a view to creating a cultural shift; and
 - setting a leadership tone that models appropriate day-to-day behaviour and that challenges and takes action in response to inappropriate behaviour such as swearing .
- 5.42 External stakeholders advised that they had observed a changing culture in ACTCS. ACTCS officers acknowledged that this is the beginning of a long journey that may take ten years. The 'culture change' is likely to have contributed to the improved operating environment at the AMC achieved by a reduction of staff overtime, an improved ratio of planned leave to unplanned leave, reduced use of force to restrain detainees, fewer lockdown hours, and shorter lengths of stay by detainees in the Management Unit.

Participation in activities and services

- 5.43 The extent to which rehabilitative activities and services have been provided as planned, and the extent to which activities are likely to provide a 'structured day', as set out in the 2007 delivery strategy, were examined as:

Boredom and inactivity in the correctional setting encourages drug use, undermines rehabilitation objectives and threatens security and safety. It is therefore important that the prisoner's day be marked by the prisoner's continuous engagement in purposeful activity. Over time, the prisoner will, through incentive-based regimes, exercise increasing levels of decision-making, assume greater levels of responsibility and will be placed in accommodation which reflects this. The means to achieve the integration of the prisoner's Rehabilitation Plans [i.e. case plan] will be a Structured Day of meaningful work, programs (including visits) and recreation.

- 5.44 A structured day is offered to some detainee cohorts. Detainees who are able to join the Solaris Therapeutic Community or the Transitional Release Centre participate in full-time therapeutic and other programs for several months. Detainee participation in activities is expected as a condition of entry to, or remaining in, to this accommodation at the AMC. These cohorts are discussed in paragraphs 5.150 to 5.173.
- 5.45 However, for the majority of detainees their structured day of meaningful work, programs and recreation comprises choices from a range of programs. Participation in those programs that are likely to account for the greatest amount of time in the 'structured day' of a detainee was reviewed. The programs are:
- therapeutic programs, in particular, the three most extensive criminogenic programs (those with the longest duration or number of hours per week i.e. the Family Violence Self-Change or its successor, the Domestic Abuse Program; Cognitive Self-Change; and the Adult Sex-Offender)
 - employment;
 - education and vocational training;
 - recreational activities; and
 - administrative activities, including daily living tasks such as receiving visitors.

Therapeutic program delivery

- 5.46 ACTCS officers and other stakeholders views on the implementation of therapeutic programs, including criminogenic, and non-criminogenic programs, were:
- the AMC faces severe disadvantage, as an all-classifications, all-offences custodial setting. It is not and cannot be a 'programs prison', that is a prison which specialises in one group of offenders, for example, sex offenders;
 - as a relatively small prison the AMC does not have economies of scale of larger prisons and so achieving a cohort of suitable detainees that meet predefined eligibility criteria for a particular program is very challenging; and
 - therapeutic program activity has a low profile, that is, there appears to be very little.
- 5.47 The 2007 delivery strategy outlines the rationale for criminogenic programs, program priorities and assumed participation rates. Program manuals identify duration (i.e. length

in weeks or hours) and dose (hours per week). There is no rehabilitation framework that brings these together.

- 5.48 The Hamburger Review (2011) identified that ‘approximately 106 detainees were involved in 22 group programs’. The total detainee population in the AMC at the end of 2009-10 was 223. Of the 106 detainees in programs that year, the Review reported:

... the evidence is that over the first year of AMC operations around 50 per cent of detainees enrolled did not attend. Of the 50 per cent that remained on program, around half dropped out of their programs, meaning it is possible that in the first year only a quarter of the detainees enrolled on therapeutic programs remained on program.

- 5.49 The Review identified that the percentage of detainees remaining in a program compared to the enrolment rate was low. No comment was made on whether those detainees remaining in a program completed it or met its objectives. No qualitative analysis is reported in the Review on the achievement of personal rehabilitative goals.
- 5.50 ACTCS officers advised that there are multiple reasons why detainees exit programs prior to completion. These include, for example, successful appeals, illness, misbehaviour or release from custody. Where detainees exit custody prior to completion ACTCS officers attempt to transition detainees from in-facility to in-community programs to enable program completion.

Program participation 2012 to 2014

- 5.51 It was not possible to determine whether program provision and participation rates had increased since the Hamburger Review. Data is not retrievable or reported internally in any summary form that allows, for example, comparisons of programs planned versus programs run, participation rates or completion rates over time.
- 5.52 A researcher evaluating the Cognitive Self-Change Program, in 2014,⁶⁹ stated (page 9) that:

Unfortunately the program to which an offender has been referred, is not recorded systematically on JOIST in a specific field. It could only be determined by examination of individual records – it was not possible to electronically extract this information en masse from JOIST.

- 5.53 The preliminary process evaluation of Extended Throughcare (2014)⁷⁰, commissioned by ACTCS also stated:

It is recommended that data is collected to ensure validity of the program (are all procedures in place and being completed e.g. 3 month pre-release interview), but the focus should be on measurable performance indicators in addition to recidivism. These can include:

- reductions in dynamic risk assessment scores;

⁶⁹ Marshall P, *Evaluation of the ACT Corrective Services Cognitive Self Change Programme* (Study 1), University of Canberra, 2014

⁷⁰ Taylor E, *A preliminary review of Throughcare in the ACT*, A Report for the Throughcare Unit, ACT Corrective Services, August 2014

- changes in pre/post measure such as test scores, changes in attitudes, thinking skills etc;
- completion of behavioural objectives, e.g. completing a program;
- substance abuse – drug tests, days of abstinence, negative test results; and
- employment e.g. number days in work, applications completed.

5.54 ACTCS officers advised that matters identified in this review will be considered through the development of Extended Throughcare evaluation by December 2015.

5.55 In lieu of adequate summary information, attendance sheets, session feedback forms and weekly program schedules for 2012, 2013 and 2014 (part year, to June) were analysed in this audit. Due to the numbers of records involved, the focus was on the delivery of the three programs that account for the largest number of hours in the last three years:

- the Family Violence Self-Change Program, a rolling program for a group, and its successor from October 2013, the Domestic Abuse Program, a set 40 hour program for a group;
- the Cognitive Self-Change Program, a rolling program for a group; and
- the Adult Sex Offenders Program, a rolling program for a group.

5.56 AMC Offender Services officers advised that remandees are rarely suitable for the main three criminogenic programs as an admission of guilt may be a prerequisite to participation. Nearly all participants are sentenced detainees.

5.57 Attendance records for the period 2012 to 2014 (2014 part year to June) show that:

- non-attendance without good cause is relatively rare. Officers confirmed a procedure is in place for written warnings and suspensions;
- between five and six detainees typically attend each session, although it can be as few as two;
- one in eight Sex Offender Program sessions was cancelled in the period, primarily due to the absence of one or more facilitators; and
- attendance at program sessions is typically a little variable when new programs begin but this settles down.

5.58 An analysis of program timetables for the years 2012 to 2014 indicates that, in terms of timetabled program time, the three criminogenic programs (Family Violence Self-Change/Domestic Abuse Program; Cognitive Self-Change; and Adult Sex Offender) account for 44 per cent of all the timetabled therapeutic programs available each week. In 2012, 22.4 per cent of the sentenced detainee population participated in at least one of these three criminogenic programs; in 2013, it was 22.1 per cent and in 2014 it was 21.0 per cent. This means about one in five sentenced detainees is in one of the three main criminogenic programs at any one time and this is for between 2 and 2.7 hours per week.

Table 5-1 Three criminogenic programs: planned hours versus actual hours per year

	Detainees in program at any one time	Est. wks of the year (and group size)	Ave. hours per week	Est. hrs total for the year	% age of sentenced population excl. TRC, CSU, TC and MU ⁷¹	Sentenced detainee population excl. TRC, CSU, TC and MU	Hrs per sentenced detainee excl. TRC
2007 Plan	n/a	48 (x 6)	n/a	4 896	n/a	95*	52 hrs
2012	33	48 (x 6)	2	3 168	22.4 %	148	21 hrs
2013	41	48 (x 6)	2	3 936	22.1 %	185	21 hrs
2014	44	48 (x 6)	2.7	5 760	21.0 %	209	27 hrs

Source: Audit Office estimates⁷² drawn from ACTCS attendance records and program timetables 2012-14 (all attendees, male and female) * NB the 2007 delivery strategy did not take account of cohorts in the CSU, TC or MU unavailable for programs.

5.59 The number of detainees in criminogenic programs significantly increased from 2012 to 2014 from 33 detainees to 44 at any one time. The number of hours per sentenced detainee per year in programs (excluding detainees in specialised accommodation units) has also increased from a total of 21 hours in 2012 to 27 hours in 2014. However, this is significantly less time than the planned time of 52 hours per detainee per year assumed in the 2007 delivery strategy.

5.60 Based on participation rates in the three criminogenic programs for each sentenced detainee (excluding detainees in the Transitional Release Centre, the Crisis Support Unit the Therapeutic Community and the Management Unit, as their custodial setting precludes their participation in these criminogenic programs), the average number of hours per detainee in all timetabled therapeutic programs for 2014 was about one hour a week.

5.61 Table 5-2 presents a range of detainee observations of the value of programs.

⁷¹ Detainees in the Transitional Release Centre (TRC), Crisis Support Unit (CSU), Therapeutic Community (TC) and Management Unit (MU) have been excluded from the sentenced detainee figure because their custodial settings preclude their participation in these criminogenic programs.

⁷² The average number of hours for a sentenced detainee on the three criminogenic programs in 2014 was 24 hours. These three programs represent around 44 per cent of all criminogenic and motivational program hours. If sentenced detainees participate in all other programs to the same extent as remandees, then sentenced detainees participate in an average 54 hours of programs per year (i.e. one hour a week).

Table 5-2 Detainees perceptions of programs

Sample comments from detainees
<ul style="list-style-type: none"> – <i>He said the library is good and that the chaplains are approachable. He would go and see them if he had an issue</i> – <i>He has completed 9 courses ... the programs were good. He thinks the chaplains are good. The library is also helpful.</i> – <i>'they are forcing people to take programs to get parole' not because the programs are worthwhile or because detainees want to participate</i> – <i>TC is the best thing that he has ever done. AMC is the best rehabilitative jail he has been in. He thinks the library good. He has done cog skills which was 'brilliant' He values the chaplaincy service. They 'offer as much help as they can'</i> – <i>'Rehabilitation is just pushed on you'. Some programs are good for people but most are not He said he would rather not participate in programs. 'I'd rather not do it and take my chances in front of the parole board because it's just too inconsistent'</i> – <i>He participated in AOD program First Steps and thought that was good. He said he has completed about 14 programs. He did not like the cog skills course because you have to share with everyone and he was not convinced people were not just making things up. It took him 9 months to complete the program. He found it difficult. He said the facilitators were good</i> – <i>He thinks the programs will help a lot. You 'get a view of the lifestyle you were living'</i> – <i>'The waiting list for programs can be long and detainees lose motivation and interest'.</i>

Source: Detainee interviews and survey comments 1 to 30 September, 2014

Program therapeutic focus

5.62 Figure 5-6 shows programmed hours per week for the three criminogenic programs: the Family Violence Self-Change/Domestic Abuse Program; Cognitive Self-Change; and the Adult Sex Offender.

5.63 Planning assumptions in the 2007 delivery strategy predicted participation rates in the three criminogenic programs. Comparing predicted participation rates to actual participation at any one time in the 2012 to 2014 period, as reflected in attendance records:⁷³

- between 4 (2 per cent) and 9 (5 per cent) detainees have participated in family violence or domestic abuse programs. No specialised programs were run in the 2012-14 period specifically for violent offenders other than for domestic abuse offenders. The 2007 delivery strategy predicted 50 per cent of detainees would participate in violent offender programs including the Cognitive Self-Change Program;

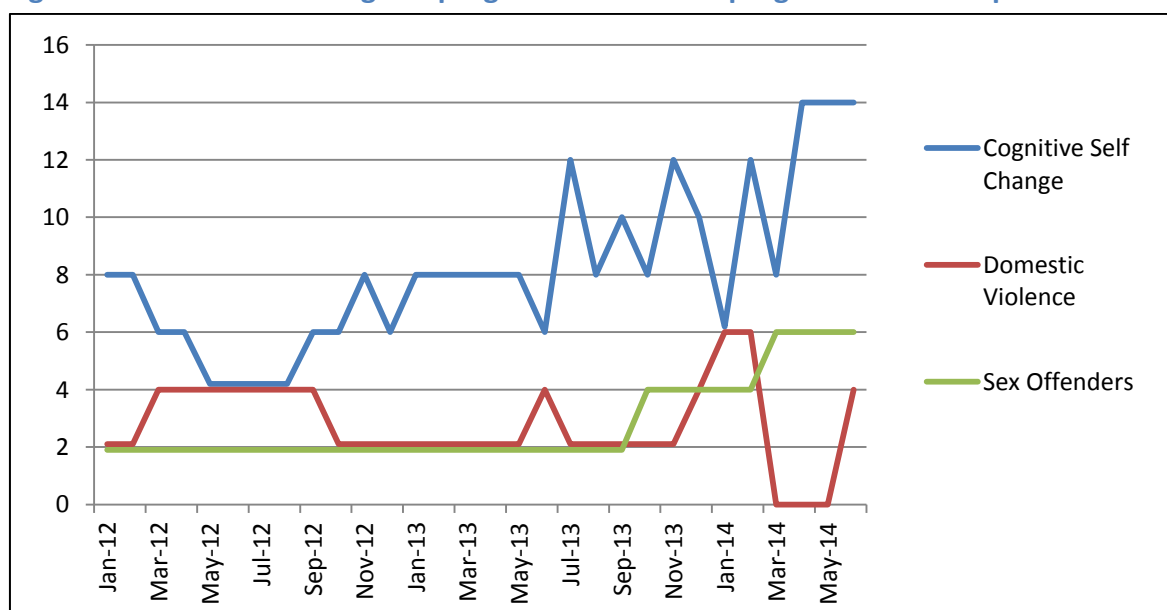
⁷³ Using an average of 180 sentenced detainees per year, excluding those in the Transitional Release Centre (TRC), Crisis Support Unit (CSU), Therapeutic Community (TC) and Management Unit (MU)

- between 17 (9 per cent) and 26 (14 per cent) detainees have participated in the Cognitive Self-Change Program, which is far less than the predicted 90 per cent on the Cognitive Self-Change Program; and
- between 6 (3 per cent) and 16 (9 per cent) detainees have participated in the Adult Sex Offender Program, which is a little less than the predicted 10 per cent of sentenced detainees on sex offender programs.

5.64 Participation in the Adult Sex Offender Program is around the level originally envisaged (9 versus 10 per cent of all sentenced detainees). However there are far fewer participants in the Cognitive Self-Change Program than was originally envisaged (26 versus 90 per cent). Also, while the Cognitive Self-Change program has been validated as suitable for violent offenders, there has not been any delivery of programs specifically designed for violent offenders in the period 2012 to 2014, with the exception of domestic abuse offenders. Violent offenders were identified as a priority group for a specialised program in the 2007 delivery strategy.

5.65 In the last 18 months AMC Offender Services officers have implemented changes to criminogenic programs. This has resulted in the number of hours per group per week increasing for the Cognitive Self-Change program, the Domestic Abuse Program replacing the family violence Self-Change program, a Cognitive Self-Change variant specifically for sex offenders being introduced, and an increased emphasis on targeting detainees presenting the greatest risk of reoffending. These changes respond to the recommendations in the Birgden program review (2013) and an Australian Institute of Criminology review⁷⁴ (2012) of family violence programs in the ACT.

Figure 5-6 Three criminogenic programs: number of programmed hours per week



Source: Audit Office estimates from ACTCS attendance records and program timetables 2012-14, all attendees (male and female)

⁷⁴ Cussen and Lyneham, *ACT Family Violence Intervention Program*, Australian Institute of Criminology, 2012

5.66 While some changes have already been implemented to program delivery, Birgden's *Review of Program Delivery in ACT Corrective Services* (2013) identifies the need for other program improvements which have not yet been fully addressed by ACTCS. ACTCS officers advise these are 'work-in-progress':

- the replacement or review of the 2003 Adult Sex Offender Program; and
- the need for a specific, high intensity program for violent offenders.

Other therapeutic programs

5.67 Between five and ten percent of sentenced detainees at any point in time are participating in the full-time, four-month Solaris Therapeutic Community (refer to paragraph 5.167). This is an intensive therapeutic program. In addition to the Therapeutic Community, program timetables for the years 2012 to 2014 indicate that 44 per cent of program time is dedicated to the three main criminogenic programs. Programs that focus on substance abuse (i.e. alcohol and drugs) account for 33 per cent of timetabled program time, while programs that focus on other aspects of a detainee's criminogenic needs, general wellbeing and motivation account for the remaining 23 per cent. Other criminogenic, non criminogenic and motivational programs accommodate greater numbers of remand detainees and are run with or by non-ACTCS providers such as Directions ACT, the AMC Chaplaincy and the Salvation Army.

5.68 This audit did not conduct further analysis of program provision or participation for therapeutic programs, other than the three aforementioned criminogenic programs, due to:

- the audit method which was to focus on those programs that accounted for the largest allocation of detainee time;
- the scope of the audit excluding detailed examination of programs and services relating to substance abuse. However, summary information is provided on the Solaris Therapeutic Community in paragraphs 5.167 to 5.173; and
- the absence of summary data for many programs and services.

5.69 Similarly, there is a wide range of services provided by external partner agencies and organisations and these were not analysed in this audit. Summary data about provision levels, quality, purpose or outcome for these is limited. Partners provide advice and services to detainees relating to finance, family and marital matters, future accommodation employment and education. The best available information on activity levels comes from visits coordination data (refer to paragraph 5.134) but this is limited to the last 18 months.

Employment

5.70 According to the Ministerial statement to the Legislative Assembly on 24 August 2004, employment in the AMC would be initially designed to meet the 'domestic needs' of the

AMC, such as catering and cleaning. Chapter two (paragraph 2.103) identifies that there has been no development of an employment plan, or a prison industries plan for the AMC. The 2007 delivery strategy and the *Industries Plan* (2008), developed prior to the opening of the AMC, address employment but in a limited way.

5.71 The Productivity Commission's *Report on Government Services* (2011, 2012, 2013, 2014, and 2015) present data that shows there have been high levels of employment in the AMC but that the level fell below the Australian average in 2013-14. The data indicates AMC employment levels have been achieved though service industries (i.e. domestic services). There is no business enterprise or commercial industry to generate detainee employment in the AMC. Work release has been limited to between one and six Transitional Release Centre accommodated detainees in the past two years (refer to paragraph 5.159).

5.72 In other jurisdictions there is a substantial proportion of employment in prison-based commercial industries. The 2015 *Report on Government Services* states (Section 8.18):

Nationally in 2013-14, 77.1 per cent of the eligible prisoner population was employed. Most prisoners were employed in service industries (45.9 per cent) or in commercial industries (30.3 per cent), with only a small percentage (0.9 per cent) on work release.

5.73 The *Industries Plan* (2008) estimated that sentenced detainees would be available for purposeful activity for 40 hours a week (30 hours during the week and 10 hours at weekends) comprising 44 per cent AMC-based service employment, 8 per cent education and 7 per cent criminogenic program participation. A further 43 per cent of time was identified in the plan as being potentially available for employment in prison industries. These prison industries have not been developed in the AMC.

5.74 While there is no employment plan for the AMC detainee population, there are a number of standards developed in or adopted by other jurisdictions that illustrate the range of purposes employment in prison may achieve. These include improving detainees longer term prospects of employment after release and maintaining good order in the prison e.g.:

- 'Conditions shall be created enabling prisoners to undertake purposeful remunerated employment which will facilitate their integration into the country's labour market and permit them to contribute to their own financial support and to that of their families' (*A Human Rights approach to prison management*, Andrew Coyle, 2009 citing basic principles of the treatment of prisoners, Principle 8); and
- 'Prisoner employment and remuneration is well published, designed to improve behaviour and is administered fairly, transparently and consistently' *Healthy Prisons Handbook* (Queensland Corrective Services, Queensland Government, November, 2007, Standard 23).

5.75 What the high level of participation in employment in the AMC as reported in the *Report on Government Services* means in terms of the 'structured day' of detainees was analysed in this audit. Of particular interest were the following questions:

- How many detainees are employed out of the total detainee population?

- How many hours a day of employment activity are undertaken in a 'structured day'?
- What was the quality of the work undertaken in terms of skill levels, learning and development opportunity? and
- Was work allocated fairly?

Participation rates in employment

Report on Government Services-based analysis

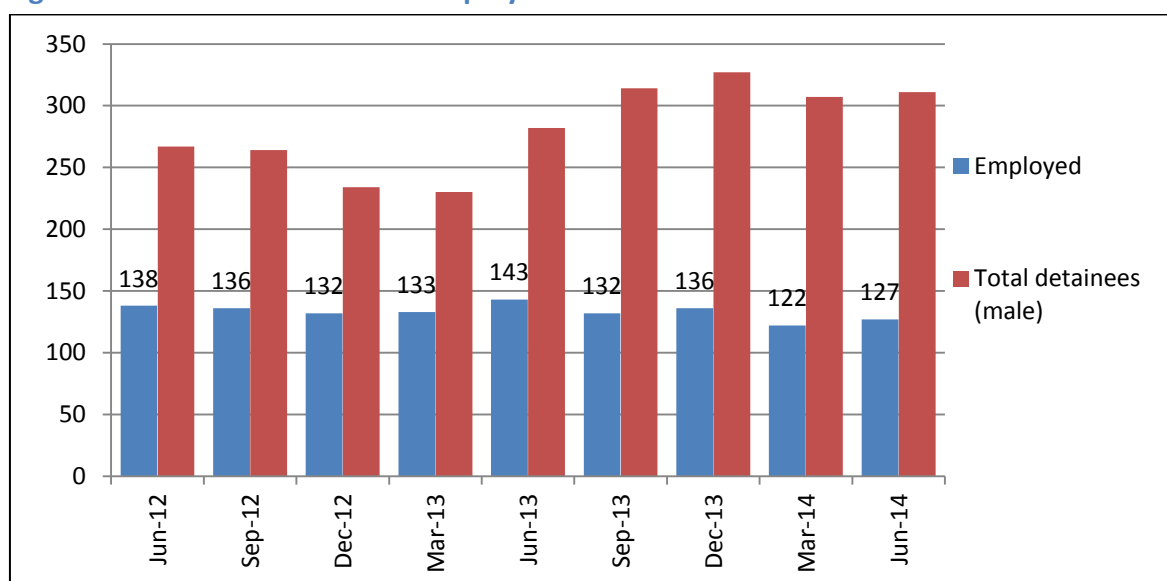
- 5.76 The Productivity Commission's *Report on Government Services* (2011, 2012, 2013, 2014, and 2015) reports participation in employment in the AMC according to the number of detainees who are eligible to work. The *Report on Government Services* for 2011 to 2014 identified high, but reducing, levels of participation in employment at the AMC over time compared to the Australian average (refer to 3.29) despite the lack of commercial industries and the increasing number of detainees on-hand.
- 5.77 Guidelines on how to collect data for the *Report on Government Services* stated that remandees who choose not to work should be excluded from the calculation, as should be detainees on full time education programs, or detainees whose circumstances prevent them from working.
- 5.78 Detainees in the AMC are not required to work but most do if work is available. Some ACTCS officers and detainees commented that work opportunities were too limited, in both quantity and skills development. The limits to work opportunities were examined in this audit.
- 5.79 Financial records indicate that the total gratuities paid per week was around \$10 000 (2013-14), the majority of which was due to employment gratuities. AMC management reports, and Justice and Community Safety Directorate budget submissions to Cabinet in 2012-13 and 2013-14, indicate that the budget for gratuities came under pressure for much of the last three years. One budget submission was successful (2013-14) and one was not (2012-13).
- 5.80 At least four of the monthly employment reports in 2013-14 provided to AMC managers identified that budget constraint was a factor in providing employment to detainees. For example:
- ... we continue to experience a steady increase in detainee numbers resulting in increased pressure on the detainee employment budget and overall unemployment numbers. Current employment levels are exceeding budget allocation each week. We are endeavouring to fill essential jobs only in order to reduce expenditure and continue to utilise our waiting list for vacancies for employment wherever possible. (Employment Report, November 2013)
- 5.81 The Justice and Community Safety Directorate budget proposals and management reports indicate that the budget for detainee employment gratuities has been a limitation on the number of employment positions for detainees. Other factors include the capacity of the

AMC to accommodate meaningful employment positions and the suitability of a detainee for a position.

- 5.82 How the ACTCS calculated ACT figures for prisoner employment that are reported in the *Report on Government Services* were examined in this audit and discussed with ACTCS officers.
- 5.83 The Audit Office's interpretation of the guidance in the National Corrections Advisory Group *Data Collection Manual 2013-14* varied from that applied by ACTCS officers, in relation to exclusions.
- 5.84 Specifically, ACTCS utilises in its calculations the data in the AMC 'Detainee employment locations' spreadsheet, one column of which counts detainees 'Not available' for work. This column may contain 25 to 30 per cent of all detainees. Guidance permits remandees who choose not to work, or those with very short periods of imprisonment (remandee or sentenced) to be excluded from the prison employment calculation. However, while the 'Not available' column includes these two exclusion categories it also includes other reasons for not being employed. ACTCS officers indicated some detainees in this column do not yet have work but would wish to work, and have either not yet applied or who have applied and are on a waiting list. Accordingly more detainees should be categorised as 'not employed' and fewer as 'not available for work'.
- 5.85 Detainees who are available and waiting for work have been recorded as unavailable for work in data used for the *Report on Government Services*. Accordingly AMC detainee participation in employment is likely to be overstated in the *Report on Government Services*.
- 5.86 This risk may be addressed in the short-term by reviewing how detainees are coded in the 'Detainee employment locations' spreadsheet, and in the long-term, and by improved Corrective Services information management systems.

Whole AMC population-based analysis

- 5.87 The weekly employment locations spreadsheets maintained by ACTC officers assist in the tracking of AMC detainee entitlements to gratuities. It is possible to use this information to establish the percentage of all the detainees within the AMC in employment. This is a simpler method as it eliminates the need to have in place systems that ensure that the *Report on Government Services* exclusion categories are correctly applied.
- 5.88 According to weekly employment locations spreadsheets the total male detainee population increased from 267 to 311 between June 2012 and June 2014. However during this period the number of those employed remained relatively stable at between 122 and 143 male detainees. This resulted in the percentage of detainees in employment declining from 52 to 41 per cent (refer to Figure 5-7).

Figure 5-7 Male detainees in employment

Source: ACTCS Employment locations spreadsheets using one week sample per quarter

5.89 In June 2014 the percentage of male detainees with employment had declined to 41 per cent of the total detainee population. The other 59 per cent of detainees were not employed because:

- they were in custody for a short stay (refer to paragraph 2.156 regarding ‘churn’) and working was impracticable;
- they chose not to work and had not applied;
- they had applied and were on a waiting list for work;
- they had failed to uphold general or specific obligations for employment;
- they were in programs for a substantial proportion of their available time; or
- their circumstances did not permit working (e.g. they were temporarily accommodated in the Management Unit or the Crisis Support Unit).

5.90 Information was not available to discern which factors are the most significant in affecting the reduction in the percentage of detainees in employment in the AMC. Fewer than one in two (41 per cent) participated in work in the quarter to June 2014. It is probable that the unavailability of work was a significant contributing factor.

Quantity of work and the ‘structured day’

5.91 There is no comprehensive employment plan. However there is an employment policy⁷⁵ and a remuneration policy.⁷⁶ These are notifiable instruments that state:

⁷⁵ Corrections Management (Prisoner Employment) Policy 2009 NI2009-149

⁷⁶ Corrections Management (Prisoner Remuneration) Policy 2009 NI2009-153

All sentenced prisoners will be encouraged to actively participate in approved work programs or to seek employment as vacancies arise (NI2009-149 page 1)

Prisoners must receive remuneration for participating in approved programs and employment (NI2009-153 page 1)

This policy is inclusive of all approved prison employment, criminogenic programs and vocational education and training courses, modules and certificates available at the Alexander Maconochie Centre (NI2009-153 page 1)

This policy provides for any combination of these approved program activities to be undertaken as having equal merit and rehabilitative value in relation to an approved Prisoner Rehabilitation Plan [i.e. case plan] (NI2009-153 page 1)

- 5.92 In ACTCS, there is no diary system that facilitates identifying each detainee's participation in the full range of activities and programs. Records used for the payment of employment gratuities provide an account of detainees' employment hours. They also provide an account of detainees' participation in education and programs, if they are not in employment.
- 5.93 The detainee employment locations spreadsheet identifies the hours allocated for those in employment. This shows employment gratuities are paid to detainees who are allocated work for between 30 and 42 hours work a week. However, ACTCS officers identified that only some of the positions require clocking on and off or any form of timesheet, not all work is supervised, the hours of a shift may be substantially longer than required to perform the work.
- 5.94 In the ACT Human Rights and Discrimination Commissioner's report on *The conditions of detention of women at the Alexander Maconochie Centre* (April 2014), it is stated:
- ... most positions available to women, such as cleaning, bins and grounds maintenance are self-directed, without set working hours or supervision, and do not provide the discipline of structured work equivalent to employment outside the prison.
- 5.95 There is no comprehensive record system to collect data (in hours) on the work undertaken by a detainee. It is therefore not possible to determine the contribution employment makes to 'purposeful activity' in a detainee's 'structured day'. However, it is very likely to be significantly fewer hours than the hours assigned to employment for detainees.

Quality of work

- 5.96 A range of detainee employee duty statements were considered in this audit. ACTCS officers discussed how AMC domestic service employment differs from employment in the labour market outside the prison. The following observations were made by ACTCS officers:
- many of the positions in AMC domestic services are in sectors that do not offer significant opportunity for self-development, for example, cleaning, sweeping, emptying bins, or serving food;
 - for many employment positions there is little opportunity to develop marketable skills;

- the quantity and quality of the output of work is self policing in that a detainee will, for example, clean to an acceptable level according to the views of the detainees who use the area that is cleaned; and
- while duty statements include mandatory training for most roles, including a number of workplace health and safety units, these are necessary but not sufficient in themselves to secure employment on release.

5.97 ACTCS officers outlined plans for improving the relevance and attractiveness of the range of employment opportunities available to detainees, including the possibility of developing prison industries. A new managerial position was established at the AMC during 2014 which will seek to explore opportunities to develop community and business enterprise employment and potentially more employment maintaining AMC facilities. No written employment plan has been developed. ACTCS officers were in the process of considering the practicalities of some new employment opportunities, but these had not been costed or committed to.

5.98 The range of employment opportunities at the AMC is limited, and has mainly been in work that contributes to the running of the prison. Employment as a means of developing detainees' skills ready for employment post-release has been very limited. Although ACTCS officers are considering how to diversify employment opportunities, this needs to be progressed quickly and reflected in an employment plan. Without such a plan there is a risk that needed employment opportunities to assist detainees' rehabilitation will not be realised.

The fairness of allocation

5.99 ACTCS officers advised that employment and remuneration policies adopted during the first two years of the operation of the AMC were in need of a review and that this is currently underway. Officers stated that the review is in response to the need to create a fair and manageable work allocation system, and that a new policy should:

- make it easier to provide the 'right opportunities to the right people' i.e. a detainee's skill levels, aptitude and motivation will be considered in determining employment opportunities;
- ensure that access to higher rates of pay is accompanied by the achievement of appropriate milestones;
- respect parity across duties in the AMC; and
- reduce the effect of 'first-come, first-served' informal waiting lists operated by the detainees themselves and 'grandfather' agreements.

5.100 ACTCS officers acknowledge that the allocation of employment and the progress detainees make within positions need to be more efficient and fairer. They have identified current shortcomings and are developing a new employment policy and procedures.

Vocational education and training programs

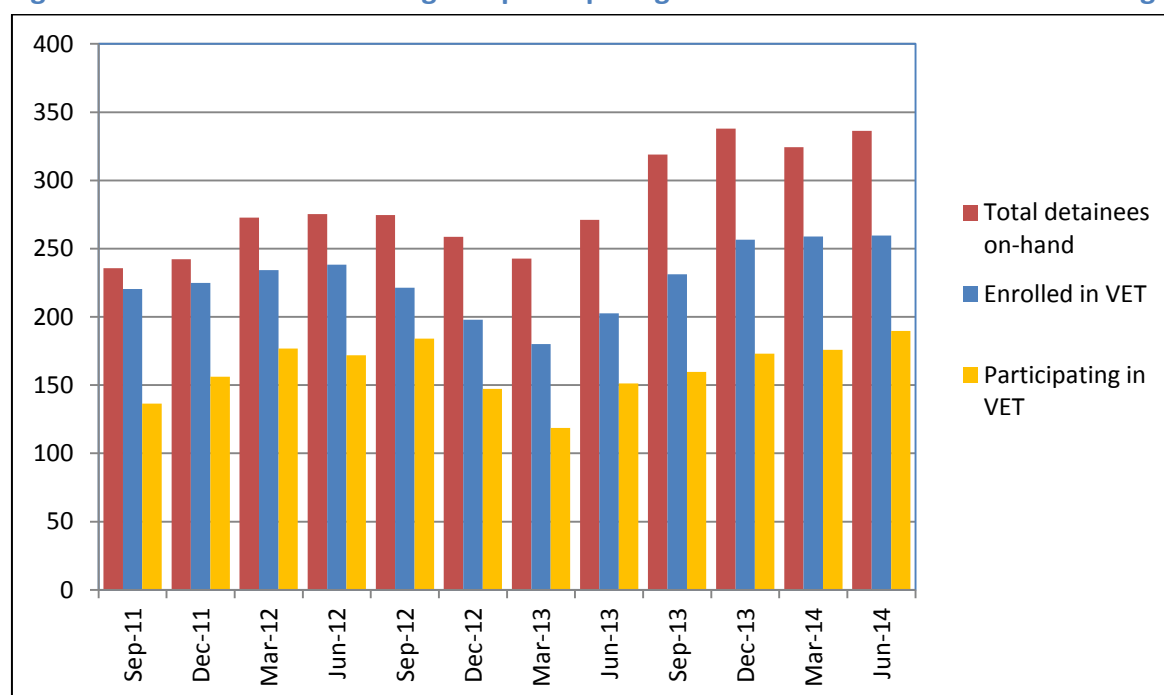
- 5.101 Education planning undertaken from 2004 to 2007 led to the establishment of contracted service delivery with the not-for-profit provider, Auswide Colleges (refer to 2.113 to 2.115).
- 5.102 The Productivity Commission's *Report on Government Services* annually reports education enrolment rates for detainees for each jurisdiction. The ACT's performance has been exceptionally high, with each year's outcome (2009-10 to 2013-14) being above 80 per cent compared to Australian averages of below 40 per cent (refer to paragraph 3.30).
- 5.103 However, there is a risk of overreliance on the Productivity Commission's *Report on Government Services* 'number of prisoners in education courses' measure to inform an understanding of the extent of education activity in the AMC. It has limitations as discussed in paragraphs 3.31 and 5.115.
- 5.104 The Hamburger Review (2011) commented on the high levels of participation in education in the AMC in 2009-10. However the report stated (page 258) that this includes 'compulsory programs'.
- 5.105 The Hamburger Review states:
- ... after further discussion about detainee participation rates with the Auswide projects manager at AMC (at time of site visits) and with other staff, the reality is that over the course of the past year only about 50 per cent of detainees enrolled in vocational educational courses actually attend.
- 5.106 Changes in education program provision and participation rates as stated in the Hamburger Review (2011) were analysed in this audit. Specifically, enrolment and participation rates were analysed, including the effect of these on a detainee's 'structured day'. How enrolment and participation compare to what had been planned in the 2007 delivery strategy was also determined.

Participation rates

- 5.107 AMC Offender Services officers do not compile and report data on detainee education participation rates. Auswide Colleges, the education service provider up until November 2014, produced monthly reports⁷⁷ for AMC Offender Services officers which include detainee enrolment and course by course hours of participation. These reports were used in this audit to estimate quarterly enrolment⁷⁸ and participation rates compared to the total detainee population. Figure 5-8 shows detainee enrolment and participation levels in vocational education and training.

⁷⁷ The Audit Office compiled data using June 2011 to June 2014 Auswide reports. All the activity reported on during this period was under the new contractual system whereby a 90 hour a week block of activity was provided, for a set fee.

⁷⁸ This enrolment rate uses a different method to that adopted for the *Report on Government Services*

Figure 5-8 Detainees enrolling and participating in vocational education and training

Source: Audit Office quarterly data based on Auswide monthly education participation reports provided to ACTCS

5.108 Enrolments in vocational education and training declined relative to the detainee population from 94 per cent in the quarter ending September 2011 to 74 per cent in the quarter ending June 2014. Furthermore, participation rates were significantly lower than enrolments. In the quarter ending September 2011 participation was 62 per cent of those enrolled and in the quarter ending June 2014 it was 72 per cent. Over the three-year period, participation rates varied between 62 and 83 per cent of those enrolled. This is an improvement on the finding in the Hamburger Review (2011) that there was an estimated 50 percent reduction between enrolment and attendance (i.e. participation).

Initial planning assumptions: detainee participation

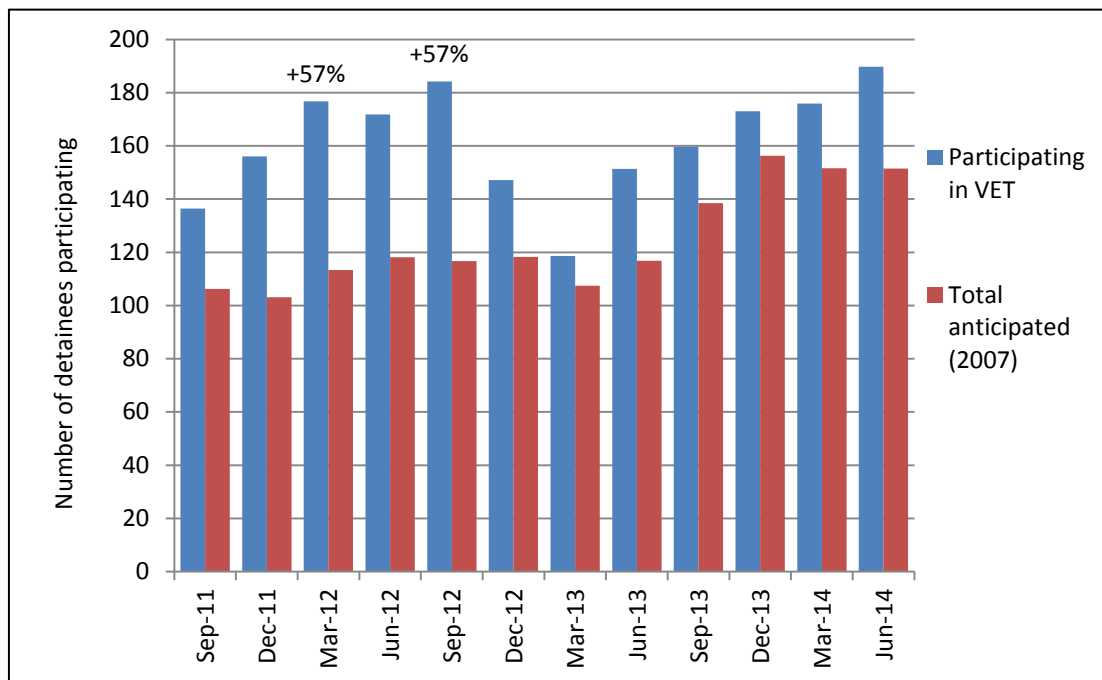
5.109 The 2007 delivery strategy anticipated minimum participation rates (and not enrolment rates) after two years of operation for the two main detainee cohorts:

- remandees, 20 per cent participation; and
- sentenced, 50 to 60 per cent participation.

5.110 These participation levels were applied to the AMC population on-hand for the 2011-12, 2012-13 and 2013-14 years (refer to Figure 5-9). This facilitates a comparison of the numbers of detainees envisaged to be participating in education⁷⁹ with the number of detainees actually participating in one or more sessions of education per month between July 2011 and June 2014.

⁷⁹ According to the 2007 Delivery Strategy, adjusted for actual detainee numbers on-hand

Figure 5-9 Numbers of detainees participating in vocational education and training compared to anticipated participation rates based on the 2007 delivery strategy



Source: Audit Office quarterly data based on Auswide monthly education participation reports provided to ACTCS

5.111 Estimates derived from using education reports (July 2011 to June 2014) indicate that the numbers of detainees participating in one or more vocational education and training session per month were higher, sometimes substantially higher (up to 57 per cent), than the level anticipated in the 2007 delivery strategy.

Initial planning assumptions: vocational education and training as part of the 'structured day'

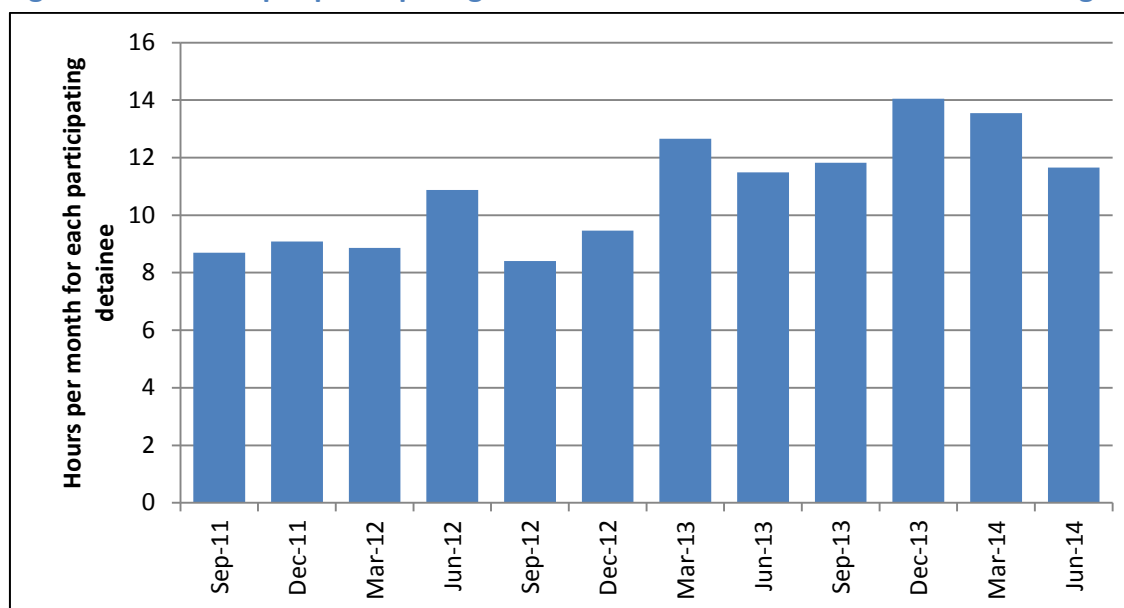
5.112 The number of hours of detainee participation in vocational education and training was calculated in order to assess the contribution education makes to a detainee's 'structured day'. Figure 5-10 is based on an assessment of detainee hours from the Auswide Colleges monthly reports. It shows that for those detainees who participated in vocational education and training, that is, between half and two thirds of all detainees, they each participated for an average of between 9 and 14 hours per month. There was a gradual increase in the number of hours between September 2011 and June 2014.

5.113 Averaging this for the whole detainee population⁸⁰ of the AMC in the last three years (rather than the half to two thirds of all detainees who participated at any one time), a high estimate is that each detainee spent around two hours a week in education. Taking account of 'churn' (refer to paragraph 2.156), that is that a proportion of the detainee

⁸⁰ But excluding those in the Therapeutic Community (ave. 9) and Transitional Release Centre (ave. 13) as there are longer term accommodation areas where the provision of prison-based education is limited

population serve short custodial sentences and so may be less likely to participate in education beyond enrolment and induction, this figure may be substantially lower.

Figure 5-10 Hours per participating detainee in vocational education and training



Source: Audit Office estimates based on Auswide monthly education participation reports provided to ACTCS

- 5.114 Original planning estimates in the 2007 delivery strategy anticipated that detainees would participate in education for between three and five hours a day (or 15 to 25 hours per week). Actual participation rates for the period July 2011 to June 2014, at an average of two hours a week, were significantly below the original planning estimates of 15 to 25 hours per week.

Education contract monthly reporting

- 5.115 As discussed in paragraph 3.31, the *Report on Government Services* prisoner education measure does not assist in developing an understanding of whether detainees continue with education after enrolment, whether participation is brief or extensive, or the nature or outcome of a program of education. This limitation is also referred to in the *Data Quality Information* annex of the *Report on Government Services* (Annex page 8, 2015 report):

The education participation rates should be interpreted with caution as the indicator does not assess participation relative to prisoner needs, or measure successful completion of education.

- 5.116 The education services contract in place for the period 15 January 2008 to 30 June 2014 aimed to achieve high levels of AMC detainee participation. The monthly Auswide Colleges reports during this period use the *Report on Government Services* definition of 'education participation', that is, 'enrolment' only. The Auswide Colleges reports cannot be used to confirm the achievement of high levels of AMC detainee participation in education.

Other contractual activity and outcomes

5.117 Since March 2009, Auswide Colleges and from November 2014, Campbell Page have provided activity such as detainee induction to education, learning needs assessment, individual learning planning and enrolment, and accreditation and certification of learning outcomes.

5.118 ACTCS officers advised that changes to the induction program in 2011 included a stronger focus on literacy and numeracy assessment. The 2011 contract required literacy and numeracy learning goals to be embedded in all vocational education and training. The monthly reports prepared by Auswide Colleges for AMC Offender Services identify:

From July 1, 2011 the education and training priorities were revised, with emphasis being placed on Australian Core Skills Framework (ACSF - Foundation Skills) assessment and consequent enrolment in General Education – Certificate in General Education for Adults (CGEA) being used to improve prisoner's language, literacy and numeracy (LLN) skills. LLN has had a further added emphasis with all VET courses containing embedded LLN performance criteria.

5.119 It is not possible to determine improvements in detainee achievement in numeracy and literacy as the education provider's monthly reports only report the completion of vocational or educational courses and units and not improvements in numeracy and literacy.

5.120 The monthly reports do provide information on learning outcomes for each month. During the 2012-13 and 2013-14 years the monthly reports show that about 60 per cent of those participating in any given month achieve some form of formal outcome. These are principally completed units, and also include statements of participation and attainment, and full certificates.⁸¹

5.121 Reports identify, and ACTCS officers confirmed, that the provision of training and education in a prison setting is particularly challenging, compared to that in the community. This is due to:

- the ability to specialise. There are 4.5 FTE teaching staff providing learning opportunities across a very broad range of subjects;
- the need to timetable education provision taking into account the different security and protection classifications of detainees. Although detainees of different security classifications may undertake the same studies, they may need to be separated due to their classifications;
- criminal justice system-determined matters, such as length of sentence, parole period, or whether an appeal has been lodged;
- the very different need for securing and safely using resources, such as tools, compared with what would be done in a community setting;

⁸¹ Mainly Australian Qualifications Framework (AQF) accredited units and full certificates by sector: pre-certificate level 1, secondary school, vocational education and training, and higher education sectors

- the need to subordinate the provision of education to maintaining good order. This means disruptions and difficulties in attending the education block can adversely affect learning;
- the need to balance efficiency with equity, that is, the need to ensure detainees whose circumstances make attending the education block impossible are not unduly disadvantaged. This means some detainees receive tuition in cell blocks and cottages, in the Crisis Support Unit, the Therapeutic Community cottage or the Transitional Release Centre. This is often on a one-to-one basis; and
- the diverse client group, including detainees with intellectual disability, from non-English speaking backgrounds, and those with different prior education attainment levels.

5.122 The contract with Auswide Colleges specified that it 'will continue to increase its scope in accordance with trends in skill shortages to meet the needs of prisoners and the ACT labour market' and 'will offer courses equitable to those available in the community, within the limitations imposed by the secure facility'. It is not possible to establish the extent to which these two objectives have been met from Auswide Colleges monthly reports.

Recreation, leisure and other activity

5.123 Management information on the participation of detainees in recreation and leisure activities in the AMC is very limited. However, ACTCS officers described, and provided documentary evidence of a wide range of activities that reflect the intentions set out in the 2007 delivery strategy:

- library newsletters and timetables outline a range of outdoor and indoor sports activities and competitions that are provided;
- the education service provider integrates some unaccredited recreational activities into accredited programs even though the emphasis of their work is on accredited learning;
- a gym and a barber shop have been provided in the industry skills centre shed; and
- timetabled access to the arts and craft room, and the library is provided.

5.124 The Hamburger Review (2011) stated (refer to paragraph 2.122) that there was 'limited access to recreation activities'. This is still an issue according to detainees and is acknowledged by ACTCS officers.

5.125 ACTCS officers advised that:

- programmed recreation and leisure activities are the first to be sacrificed if there are staffing shortages, and these are affected by disruptions due to lockdowns and medical escorts;

- there is a lack of continuity in staffing arrangements to coordinate and sufficiently facilitate engagement in recreation and leisure programs;
- other than in the arts room, there is a lack of hobbies and crafts space and other workshop facilities; and
- there is limited opportunity for physical education activity and access to the oval.

5.126 The monthly library reports indicate that many detainees use this service. There is a book distribution system for detainees who cannot access the library, and as with other activities, access to the library can be restricted according to security classifications. Even so, there are reported to be between 15 and 25 detainees using the library in each afternoon session. The library service stocks around 4 000 items, and processes about 500 loans a month. Some of the detainees interviewed for the audit made very favourable observations about the library and chaplaincy (refer to Table 5-2).

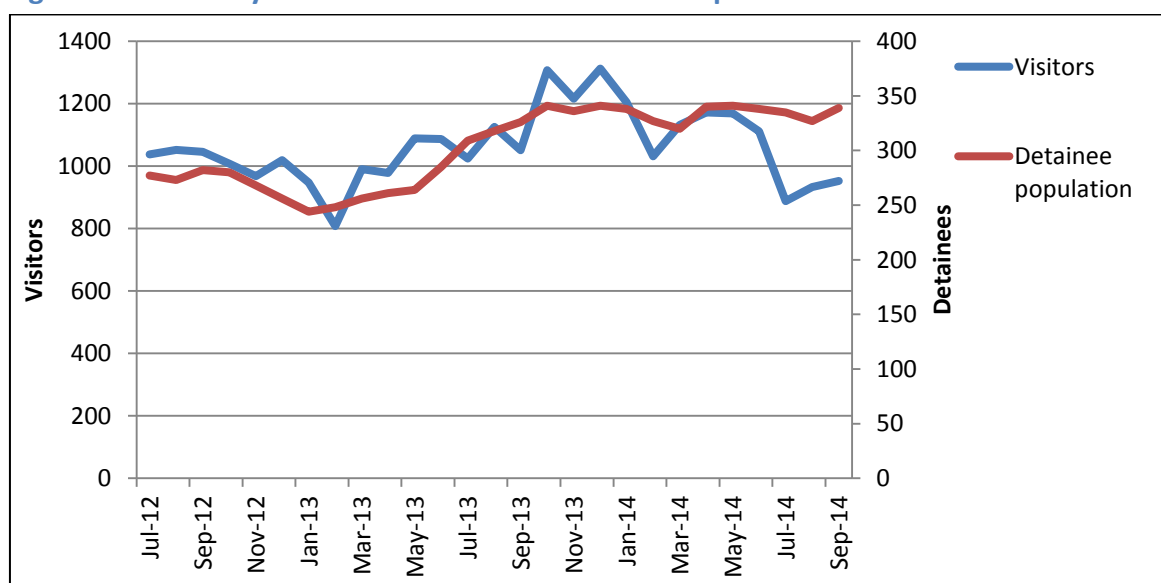
5.127 There is a lack of management information on the participation of detainees in recreation and leisure activities in the AMC. This means that it is not possible to determine whether expectations, as set out in AMC plans, or whether detainees' needs and interests, are being met. The views of detainees, officers and other stakeholders indicate that while access to recreation activities can be limited, library services were well used and highly regarded.

Involvement of the wider community in the lives of detainees

5.128 Paragraph 2.127 mentions the ACT Government's emphasis on the importance of maintaining detainees' connection with the local community. This is set out in briefings (2002), statements of the operating philosophy for the AMC (2004 to 2007) and in the 2007 delivery strategy.

Encouraging and facilitating family and friends' visits

5.129 The number of family and friends' visits to detainees is reported on a monthly basis. Visitor numbers and detainee numbers on-hand are shown in Figure 5-11.

Figure 5-11 Family and friends' visitors to detainees per month

Source: AMC visitor data from monthly management reports, ACTCS

5.130 Figure 5-11 shows that over the course of the last two years, visitor numbers through the AMC visitors' centre have been in the range of 800 and 1 320 visits per month. Increases and decreases in visitor numbers broadly follow the change in detainee numbers on-hand.

5.131 From July 2012 to September 2014, the ratio of average visits per detainee per month has been between three and four visits per detainee per month. Visits usually take place in one to two hour slots (averaging just over one-and-a-half hours).

Community engagement and partner organisations' involvement

5.132 The Hamburger Review (2011) examined 'support for inclusion of community organisations in the AMC's mix of programs to facilitate enhanced continuity of service and support for detainees post release', and was inconclusive regarding the effectiveness of arrangements.

5.133 ACTCS officers advised that since the termination of the Community Reference Group in 2010 (refer to paragraph 2.135), liaison and coordination between partners and the ACT Government is achieved through a number of program-specific arrangements such as groups that oversee the delivery of Extended Throughcare, or through alcohol and drugs partnerships.

5.134 Following comments from service delivery partners about the challenges in gaining access to detainees, in July 2011 ACTCS developed a coordination function for partnership activity. AMC Offender Services now coordinates agency, community services and partnership organisation visits.

5.135 Visitor data for 2013-14 indicates that:

- around 350 partner organisations or service provider visits are requested a month, of which around 210 (62 per cent of the 350) take place for a population of 309 to 338 detainees on-hand over the period;
- these visits involve between 60 and 70 organisations;
- about 44 per cent of visits that take place relate to assistance and counselling for individual detainees; and
- of the visits that fail to take place, 57 per cent are due to detainees not attending for reasons stated as 'refusal to attend' or 'unable to get up'.

5.136 ACTCS officers advised that it was not possible to analyse partner organisation visit data prior to the 2013-14 year as it was not collected. Visit lengths are unknown, but may reflect the length of friends and family visitor slots. However, 2013-14 data is enabling AMC Offender Services to examine service coverage with respect to specific areas, such as alcohol and drugs services, to target resources and to quickly identify problems if visits fail to take place. ACTCS officers advised that as a result of the central coordination of visits is that more visits from partner organisations are being facilitated.

5.137 For example, visiting organisations include a number that provide generalist counselling services. Based on the number of visits recorded by AMC Offender Services, AMC detainees received the externally provided counselling sessions shown in Table 5-3 from 1 July 2013 and 30 June 2014. The Hamburger Review (2011) commented on the limitations to counselling services (refer to paragraph 2.88).

Table 5-3 Counselling sessions provided to AMC detainees by external agencies – 1 July 2013 to 30 June 2014

Month – 2013	Number of counselling sessions	Month – 2014	Number of counselling sessions
July	43	January	72
August	54	February	105
September	64	March	79
October	66	April	70
November	60	May	82
December	40	June	14

Source: Audit Office analysis of ACTCS data

5.138 There was a general increase in counselling sessions provided by external partner agencies over 2013–14. The sharp fall in June 2014 may have been due to the unexpected absence of the staff member responsible for organising these visits. It is not possible from the data available to assess if more detainees received counselling or if the same, or fewer, detainees received more counselling services.

5.139 Family and friends' visits facilitated by the AMC visitors' centre account for an average of six hours in visiting slots per detainee per month (one-and-a-half hours per week).

Separately, visiting service providers account for less than one visit per month per detainee. Coordinated by the AMC Offender Services, the complex task of managing large numbers of service provider requests for visits is now being more actively managed. The level of visits overall, from family and friends and service providers, does not account for a substantial amount of time in the 'structured day' of a detainee.

The 'structured day'

5.140 The extent to which the hours of program participation, visits and work in the last three years have been able to provide the 'structured day', of 'continuous engagement in purposeful activity' as outlined in 2007 delivery strategy (refer to paragraph 2.137) was assessed.

5.141 The extent of this challenge has already been explored in the ACT Human Rights and Discrimination Commissioner's report⁸² on the conditions of detention of women in the AMC:

... it is apparent that it is not feasible within existing resources to provide a sufficiently structured day for detainees through education courses and programs alone. Although a range of employment is available to detainees at the AMC, very few of these jobs provide sufficient hours or equivalence to outside employment to provide routine to the day. A structured day where detainees who wish to be employed are expected to rise, dress and leave their accommodation at a designated time to participate in meaningful work, as well as undertaking programs and education, would provide greater opportunities for rehabilitation ...

5.142 ACTCS officers, detainees (refer to Table 5-4) and other stakeholders made similar comments during this audit about the male detainees' lack of a 'structured day' in the AMC.

⁸² *Human Rights Audit on the Conditions of Detention of Women at the Alexander Maconochie Centre*, ACT Human Rights and Discrimination Commissioner, April 2014. Para 7.5.25

Table 5-4 Detainee comments on their daily routine

Sample comments from detainees – verbatim and paraphrased
<ul style="list-style-type: none"> - <i>He stated he is always bored. 'It is like groundhog day'. The only things to do are work out and play cards</i> - <i>'Five years in, the employment structure and training should have been being enhanced and broadened, instead of taking an axe to it due to the shortfall of funds'</i> - <i>Does his own thing, own time 'too many musters'</i> - <i>He works in the kitchen and goes to work each morning. He used to work in the back of the kitchen but now works the registers 4 days per week</i> - <i>He said he resides in 'a yard with 40 blokes and there are 4 jobs'. He thinks there needs to be more opportunity for employment.</i> - <i>There needs to be more time out-of-cells and less musters.</i> - <i>There needs to be more work and industries – perhaps a work crew. If you could get a job 'this place would be better'</i> - <i>He thinks some of the detainees just are stuck in their own headspace and cannot change.</i> - <i>Out-of-cells from 10 to 12 and 4 to 7 daily but lose time out-of-cells for extra lockdowns or officers being late on shift etc. He does nothing all day long. Does not go to programs, does not engage with others. Reads. Some detainees play games if they can get them but he does not.</i> - <i>He stated that work was better in NSW and that the living conditions were better than AMC as well.</i> - <i>Other jails have had a better routine. At AMC, 'everyday is a guess'</i> - <i>'For the majority of inmates who do not have a solid employment schedule, the daily and weekly routine is a plethora of free time punctuated by one education timeslot and one cognitive-behavioural course per week'</i>

Source: Detainee interviews and survey comments 1 to 30 September, 2014

- 5.143 While ACTCS officers maintain records of participation per program, there is no individual detainee diary system to identify what constitutes a particular detainee's 'structured day'.
- 5.144 Detainees' participation in activities that were planned for in the 2007 delivery strategy as the major components of the structured day were analysed in this audit. While this was done, it is recognised that a detainee's day may also involve them engaging in informal recreation, and for other activities: musters, buy-ups, meals, and health-related activities such as dental and medical appointments.
- 5.145 The 2007 delivery strategy proposed a daily routine with approximately six hours of scheduled activities per day, five days a week for each detainee. However, fewer than one in two male detainees is in employment and for those who are, the time spent in work is indeterminate. Regardless of whether or not a detainee is working, their 'structured day' generally comprises no more than one hour a week on average in therapeutic programs and only approximately two hours a week is spent with family and other visitors; and an average of two hours a week is spent in education. Accordingly, detainees who do not

work, on average only spend five hours per week involved in the three main activities of education, therapeutic programs and visits per week. This is significantly less time than the 30 hours envisaged in the 2007 delivery strategy. There is a risk that detainees become bored in the absence of sufficient 'purposeful activity', and that this undermines rehabilitative efforts.

- 5.146 However ACTCS officers advised that there was significantly more structure for their day for specific cohorts. For example, for detainees in the Solaris Therapeutic Community program, in the Conservation and Land Management (CALM) program (see paragraph 4.100) and for those accommodated in the Crisis Support Unit most of their 'out-of-cell' time during the day is structured.
- 5.147 ACTCS officers stated that the implementation of the structured day as outlined in the 2007 delivery strategy has not proved practicable since compelling detainee participation is inconsistent with the AMC operating philosophy. In addition, the design of the AMC requires a large number of daily movements to maintain detainee separation and segregation and this affects the efficient running of programs. While the new buildings under construction may alleviate this to some degree, there is a need to consider what can be achieved with respect to a 'structured day' and 'purposeful activity' in the light of the broad operational experience gained in running formal and informal programs over the first five years of the AMC. This needs to be articulated in written policy.

Pre-release planning and Extended Throughcare

- 5.148 As stated in paragraph 3.108, entry to the Extended Throughcare program is based on voluntary participation prior to detainees being released. ACTCS officers identified that of the 229 detainees released to Extended Throughcare in 2013-14, 34 of these returned to custody during the year. An evaluation of Extended Throughcare is to be undertaken by December 2015.
- 5.149 Detainees may not participate in Extended Throughcare for a number of reasons, including if they are serving short custodial sentences. However, ACTCS officers advised that there is a range of pre-release support provided through the case planning process for all detainees regardless of whether the detainee elects to participate in Extended Throughcare. During 2014, two pre-release case managers were appointed to provide pre-release support. The extent of pre-release activity was not considered in this audit.

Rehabilitation for specific groups in the AMC

- 5.150 The male detainee population accounts for 94 to 96 per cent of the detainee population in the AMC. For the purpose of assessing the long-term rehabilitation of the male population the following separately accommodated groups were considered:
- the Transitional Release Centre (an open prison), for up to 15 male detainees, outside the fence;

- the Solaris Therapeutic Community, for up to 24 males detainees, inside the fence; and
- remanded detainees, generally accommodated separately, as required by legislation.⁸³

5.151 Rehabilitation was not examined for :

- female detainees. The Human Rights audit on the conditions of detention of women at the Alexander Maconochie Centre by the ACT Human Rights and Discrimination Commissioner (April 2014) provides a recent and detailed account of rehabilitation activity for women in the AMC;
- Crisis Support and Management Units, as these are designed as short term accommodation.

Transitional Release Centre

5.152 The 2007 delivery strategy (page 52) stated:

An important component of the transitional release stage will be attendance at work, vocational training, education or other approved activities, in the community.

5.153 The assumptions underpinning planning for therapeutic programs and education in the 2007 delivery strategy included accommodating up to 60 low security risk detainees in a transitional release centre 'outside the fence'. These detainees were assumed to have significantly better prospects of a successful reintegration into the community, through participation in activities and services provided by the community, compared with only receiving services 'inside the fence'. A system of authorised leave and the identification of sponsors who vouch for detainees' whereabouts when away from the AMC has been implemented. ACTCS officers advised that this leave system operates in the Transitional Release Centre, but that under certain circumstances this also operates for minimum risk detainees inside the fence as part of pre-release preparation.

5.154 Initial assumptions were that an average of 55 minimum security detainees of the total 239 detainees would be accommodated in the Transitional Release Centre, representing a 92 per cent (55/60) utilisation rate for the Transitional Release Centre.

5.155 The operations of the Transitional Release Centre were discussed with ACTCS officers and a review of Transitional Release Centre monthly management reports undertaken to determine the extent to which assumptions in the 2007 delivery strategy were achieved. Of particular interest were:

- the scale of the detainee population that enters and progresses through the Transitional Release Centre; and
- participation levels by Transitional Release Centre detainees in therapeutic programs, education and employment.

⁸³ *Corrections Management Act 2007* (s44). Section 44 (4) makes provision for exceptions to this.

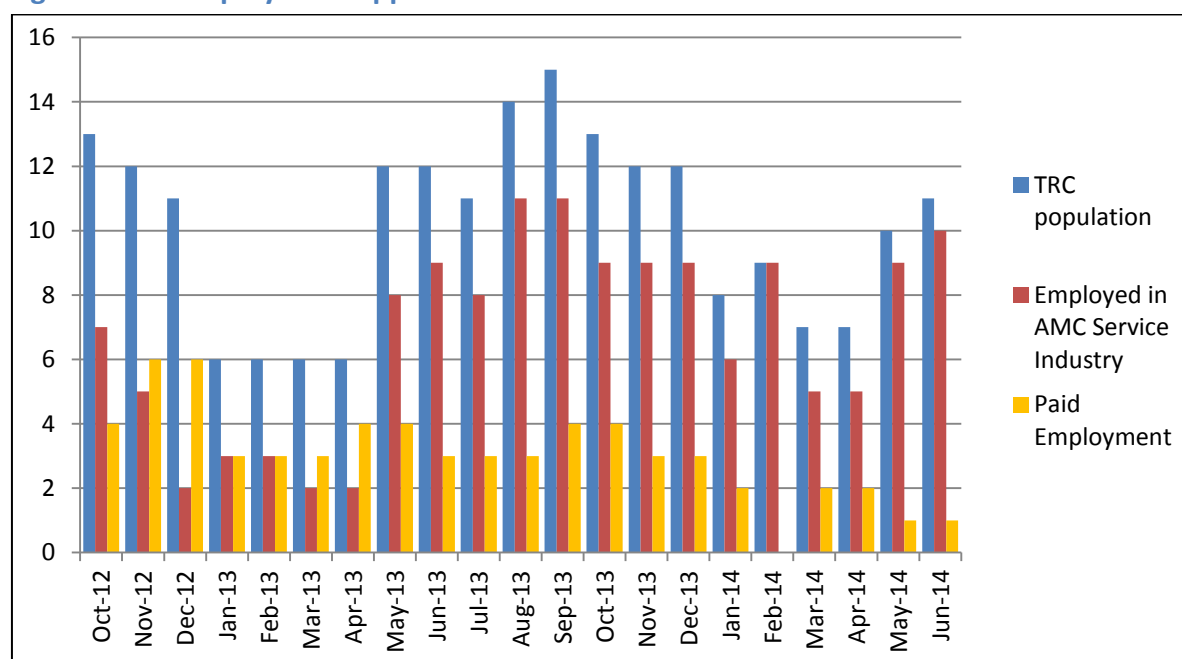
Accommodation levels in the Transitional Release Centre

- 5.156 The AMC General Manager approves applications for the Transitional Release Centre. Detainees who are accepted have invariably been assessed as being a low escape risk. Detainees remain in the Transitional Release Centre for three to six months, and normally for no more than a year.
- 5.157 Transitional Release Centre monthly reports identify that the number of beds in the centre is 15, with an average occupancy level of 67 per cent between October 2012 and June 2014, and an average of 18 detainees a year being released into the community. This means a far greater proportion of detainees remain inside the fence than was originally envisaged since assumptions were that a third of sentenced detainees would be accommodated in the proposed 60 bed Transitional Release Centre at any one time.
- 5.158 Only 25 per cent (15 of 60) of the originally planned places in the Transitional Release Centre were provided when the AMC opened in 2008. ACTCS officers advised that due to the larger number of higher risk sentenced detainees that have eventuated (refer to paragraph 2.148), a 60 bed Transitional Release Centre, had it been built, is unlikely to have reached even 50 per cent utilisation. The actual utilisation rate of the Transitional Release Centre, as built with 15 beds, has been 67 per cent in the period October 2012 to June 2014 which is lower than the 92 per cent rate anticipated in the 2007 delivery strategy for a 60 bed centre (refer to paragraph 5.153).

Employment prospects

- 5.159 ACTCS officers advised that while paid employment in the community was an important aim, in practice it presented challenges. These include detainees travelling to employment, obtaining a sponsor to vouch for their whereabouts and restrictive labour market conditions. As a result, on average only about one in five⁸⁴ detainees in the Transitional Release Centre was employed in the community during 2013-14 (refer to Figure 5-12).
- 5.160 Those Transitional Release Centre detainees who are not employed in the community are offered employment in AMC domestic industries. As a result, nearly all Transitional Release Centre detainees are employed in either the community or AMC Domestic industries. However the range of AMC domestic industries available 'outside the fence' to Transitional Release Centre detainees is more limited than the range of AMC domestic industries available to detainees 'inside the fence'.
- 5.161 Of those detainees released from the Transitional Release Centre between October 2012 and June 2014, an average of 18 a year, about half left the AMC with a job already secured. Only one detainee who left the Transitional Release Centre with employment has returned to custody in the 21 months to June 2014.

⁸⁴ Based on data for Figure 5-12 for the period July 2013 to June 2014. Using monthly counts, there were 28 detainees in employment in the community of a total of 129 (i.e. 21.7 per cent).

Figure 5-12 Employment opportunities for detainees in the Transitional Release Centre

Source: Monthly data provided on the Therapeutic Community to AMC management, ACTCS

Educational opportunities

- 5.162 Detainees accommodated in the Transitional Release Centre are not able to access the education programs provided 'inside the fence'. Auswide Colleges, the education service provider (2009 to 2014), maintained some very basic support to Transitional Release Centre detainees.
- 5.163 ACTCS officers identified difficulties in securing educational opportunities for Transitional Release Centre detainees in the community. The potential difficulty identified by ACTCS officers is that Transitional Release Centre detainees may be required to be escorted⁸⁵ and this is a duty that educational providers are usually unwilling to undertake. Very few Transitional Release Centre detainees participate in education in the community. For example, there was only one instance of an application or granting of leave to attend education in May and June 2014.

Therapeutic programs

- 5.164 Transitional Release Centre detainees do not access therapeutic programs 'inside the fence'. However, there is support given to Transitional Release Centre accommodated detainees in the Transitional Release Centre. For example, Solaris Therapeutic Community support (refer to paragraph 5.167) is continued in the Transitional Release Centre. Relationships Australia provides guidance and counselling. In addition detainees may

⁸⁵ Corrections Management (Transitional Release) Policy 2010 NI2010-576 identifies that the Education / Work Experience Leave may be escorted or unescorted. The decision as to escort requirements will be made by the Superintendent.

continue some therapeutic programs begun in the AMC in the community and may access programs in the community that are not available 'inside the fence'.

- 5.165 Transitional Release Centre detainee access to therapeutic programs in the community is well managed, as was intended in the 2007 delivery strategy. Transitional Release Centre detainees have substantially better participation rates than detainees 'inside the fence':
- up to 90 per cent of Transitional Release Centre detainees participating in therapeutic programs if not working in the community; and
 - for those participating in programs, a higher number of hours are likely to be achieved, (four hours a week per detainee in June 2014).
- 5.166 Twenty five per cent (15) of the places originally planned (60) have been provided in the Transitional Release Centre. However, a larger proportion of detainees have eventuated that are classified as a higher security risk. They are not suitable for an open prison. For detainees in the Transitional Release Centre opportunities are more limited than inside the fence regarding education, and in part depending on labour market conditions, for employment too. However, therapeutic program opportunities are greater and participation rates are higher.

The Solaris Therapeutic Community

- 5.167 The ACTCS website states that:

The Solaris Program is a therapeutic community model of treatment for substance misuse. It provides a structured environment where the participants in the community itself are used as the principle tool to bring about personal change. Participants are provided with individual support, interviews and educational and therapeutic sessions.

Participants are guided through the program which is structured and regulated. Within the support of the therapeutic community, participants are led by qualified staff to help them achieve the most from the program.

- 5.168 A recent review of prison-based drug treatment programs⁸⁶ from a meta-analysis of 66 independent assessments found:

... that such programs are modestly effective in reducing recidivism. These findings most strongly support the effectiveness of therapeutic communities, as these programs produced relatively consistent reductions in recidivism and drug use.

- 5.169 The Solaris Therapeutic Community program runs for four months during which time up to 24 sentenced detainees are able to reside in cottage accommodation. The program was reduced from six months to four, in response to the shorter sentence lengths being served by detainees, to enable program completion.
- 5.170 The program is co-funded by the ACT Government and Australian Government. Karralika Programs Inc, a not-for-profit organisation which has operated in the ACT for over 35

⁸⁶ Mitchell O, Wilson D, MacKenzie D: *The effectiveness of Incarceration-Based Drug Treatment on Criminal Behaviour* The Campbell Collaboration Nov 2012

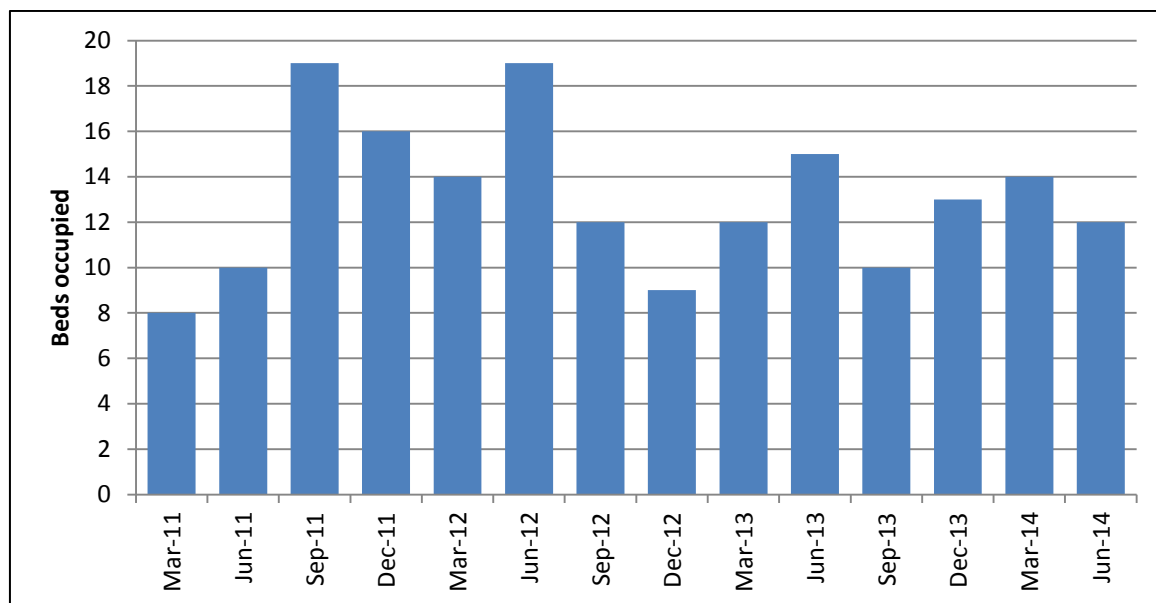
years, co-manages and co-facilitates the program with ACTCS. The program offers a structured day of purposeful activities including daily group and one-to-one therapeutic sessions. This provides a predictable routine of activity for most of the day.

5.171 The Hamburger Review (2011) reported that:

... the Therapeutic Cottage is an excellent model for encouraging participation in intervention programs and provides opportunities for positive peer support by other detainees and eventual throughcare progress to a transitional release cottage outside the perimeter of the correctional centre; and

... it is an excellent rehabilitation model but [with 8 participants] is currently underutilised.

Figure 5-13 Occupancy of the Therapeutic Community



Source: Monthly data provided by the Transitional Release Centre to AMC management

5.172 ACTCS data shows that occupancy in the Therapeutic Community program has increased above the levels observed by Hamburger (2011). For 13 of the 14 quarters between March 2011 and June 2014, the Therapeutic Community program had an average monthly occupancy higher (13 detainees) than the level of occupancy reported in Hamburger Review (8 detainees).

5.173 The Solaris Therapeutic Community program is well researched and evaluated. It was the subject of an internally conducted process review⁸⁷ (2009-11) and an externally conducted outcome study (2012).⁸⁸ The latter found a 38.9 per cent recidivism rate for ex-Solaris Therapeutic Community participants, compared to a 46.6 per cent rate reported for all AMC released ex-offenders for 2012-13.

⁸⁷ *Solaris Therapeutic Community: review report* (2009-2011) prepared by Karrilika inc in partnership with the ACT Corrective Services Agency (September 2012)

⁸⁸ *The Solaris Therapeutic Community: client outcome study*, Magor-Blatch Consulting, May 2012

Remanded detainees

5.174 Many remandees are in custody prior to conviction as well as prior to sentencing, and so may not have pleaded guilty or been found guilty. They may be wary of participating in some rehabilitation programs. Participation in criminogenic programs may require, or be interpreted as, an admission of guilt (refer to paragraph 5.56). Accordingly, motivation to undertake such programs is likely to be low for this group of detainees.

5.175 Furthermore unconvicted remandees may also expect different treatment to convicted and sentenced detainees. The *Corrections Management Act 2007* (s44) is explicit that the the director-general:

- must make a corrections policy or operating procedure providing for different treatment of convicted detainees and non-convicted detainees; and
- must ensure that convicted detainees are accommodated separately from non-convicted detainees; and
- may give directions for different accommodation of a non-convicted detainee if the director-general suspects, on reasonable grounds, that is necessary to ensure the safety of the detainee or anyone else.

5.176 A number of policies, such as the *Prisoner Remuneration Policy* (2009 NI153) outline different treatment for unconvicted versus convicted detainees. Others, such as the *Induction Policy* (2009 NI130), do not.

5.177 The 2007 delivery strategy identified distinct remandee needs and characteristics:

Remand programs therefore target assessment of presenting needs, visits – legal and other, welfare services and pro-social meaningful activities to keep them occupied for the benefit of the remandees and to assist in the maintenance and security and good order of the centre (page 46)

Health and Life Skills programs should be offered as well as basic education on a voluntary basis. To gain maximum benefit from these programs they should be educative and provide information as to the availability of services and supports within the community, preferably by visiting community agencies with which they can establish links. Programs upon commissioning will need to cater for 89 remandees (page 46).

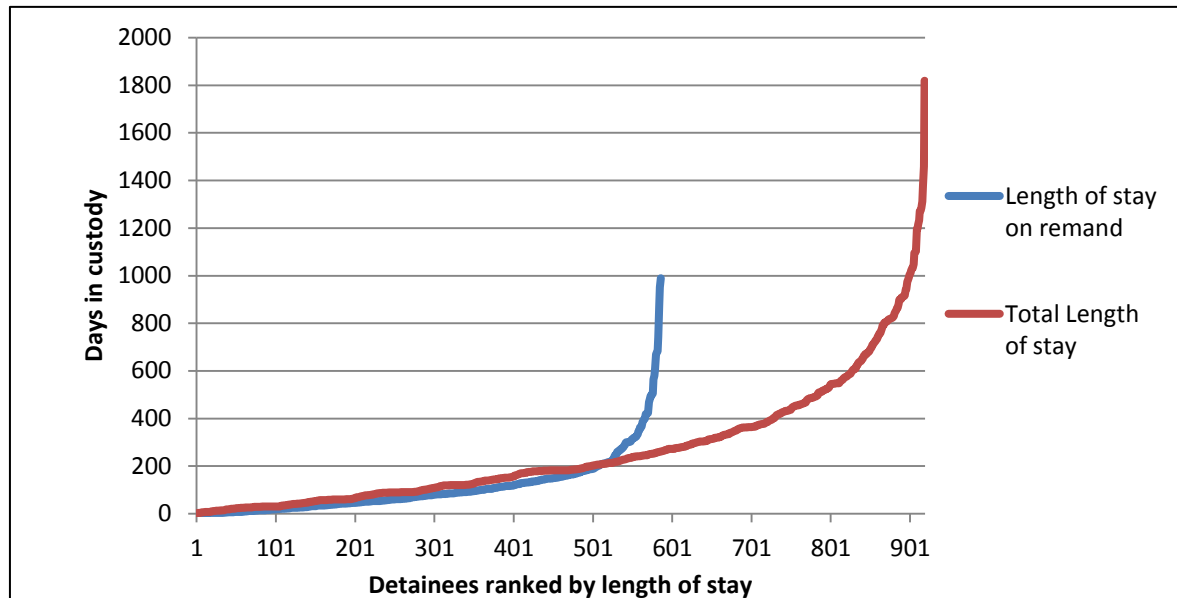
The service provided to remand prisoners may vary from that provided to sentenced prisoners due to their remand status and length of stay. However, programs available will include a cognitive skills component and offence specific programs as well as VET may be offered as appropriate (page 51)

Non-compulsory AMC employment opportunities for remand prisoners may be similar to those provided for sentenced prisoners, but would exclude Hospitality studies as the AMC kitchen would provide food for remand prisoners. While the library would also be manned by sentenced prisoners, General Education opportunities for remandees may be provided by other methods (page 51)

5.178 If remandees do not commence rehabilitation until they are convicted it may postpone rehabilitation for many months and in some circumstances, for years. Figure 5-14 is based on lengths of stay for ex-detainees who were released between March 2009 and July 2014. The data shows that for those remanded prior to serving a custodial sentence time spent

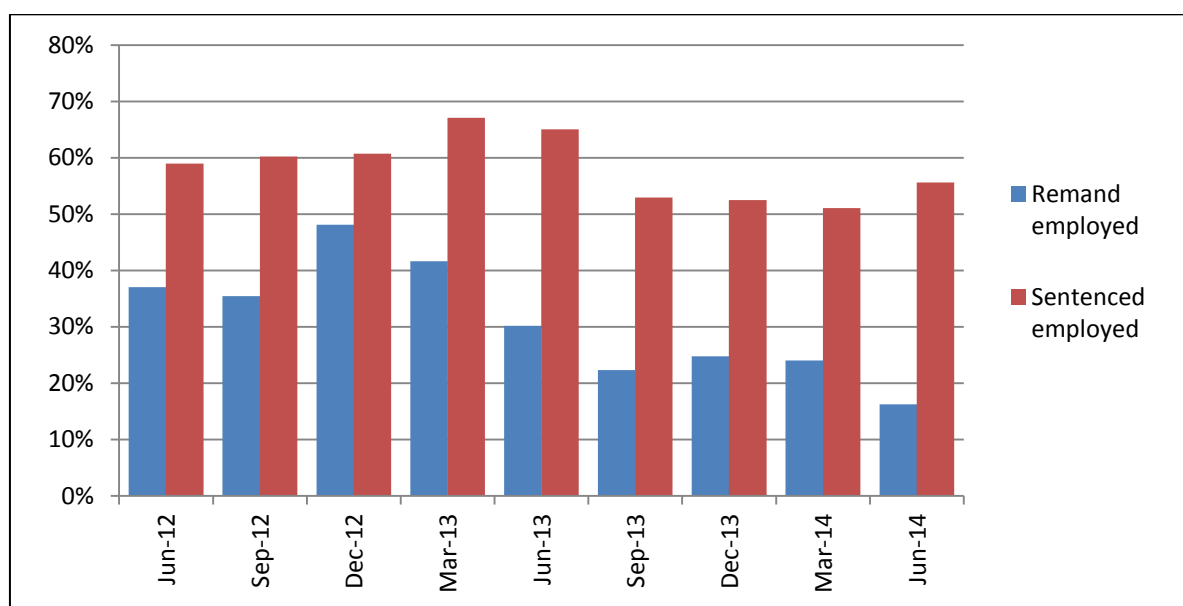
on remand is a substantial proportion of eventual sentence length. For example, it shows around 100 remandees were remanded in custody for between 200 and 1 000 days.

Figure 5-14 Remandees length of stay in the AMC



Source: ACTCS JOIST data (11 August 2014) from 919 episodes in AMC for male detainees, sentenced and released between 30 March 2009 to 30 June 2014

- 5.179 Case managers generally do not recommend remandees for the main three criminogenic programs (refer to paragraph 5.174). However an analysis of program timetables identifies that for motivational and other short programs such as those relating to anger management and substance abuse, in the period 2012 to 2014, program attendees have increasingly become a mixture of sentenced and remanded detainees, being grouped according to protection status.
- 5.180 There is no summary management information available on the extent to which remandees attend or participate in therapeutic programs compared with sentenced detainees. However, it is highly likely that the hours remandees participate in non offence-specific therapeutic programs are fewer than the hours sentenced detainees participate in all programs, including the longer criminogenic programs.
- 5.181 The remanded detainee population is increasingly disadvantaged with respect to employment. In the last quarter of 2013-14 only one in eight (16 per cent) of remandees was employed, compared to over half (56 per cent) of sentenced detainees. Two years earlier, 37 per cent of remandees and 59 per cent of sentenced detainees were employed.
- 5.182 As identified in paragraph 5.88, there has been a relatively stable number of employment opportunities in the period June 2012 to June 2014. As the number of detainees in the AMC has increased in this period, the remandee population has participated less and less in employment.

Figure 5-15 Percentage of remand and sentenced detainees in employment

Source: ACTCS Employment locations spreadsheets using one week sample per quarter

- 5.183 It is probable that remanded detainees have fewer opportunities available to them than sentenced detainees for being purposefully occupied in therapeutic and employment programs.
- 5.184 To participate in education and training, detainees may sign acceptable behaviour pledges. This facilitates the mixing of remandee and sentenced detainees. Auswide Colleges, the education contractor (2009-2014), provided blocks of education programs according to security classifications:
- Mainstream, eight hours of provision, for up to four different groups;
 - Protection, six hours of provision, for up to 4 four different groups; and
 - Strict Protection, eight hours of provision, for up to four different groups.
- 5.185 Accordingly, a remandee's status has little bearing on access to education. It is not possible to disaggregate the management information provided on a monthly basis to AMC Offender Services, to identify remand or sentenced status. Therefore it is not possible to identify participation rates for remanded versus sentenced detainees.

RECOMMENDATION 9

IMPROVING LEVEL OF SERVICE INVENTORY-REVISED (LSI-R) EFFECTIVENESS (CHAPTER 5)

Improvements should be made by ACTCS in its use of LSI-R assessments in the AMC. These should include:

- improving the reliability of LSI-R assessments through training and development of assessors, and supervisory quality assurance measures;

- b) using LSI-R assessment information effectively in case management planning and implementation; and
- c) recording LSI-R assessment scores in ACTCS information management systems.

RECOMMENDATION 10 THE 'STRUCTURED DAY' AND SUFFICIENT 'PURPOSEFUL ACTIVITY' (CHAPTER 5)

What constitutes a 'structured day' and sufficient 'purposeful activity' should be defined and articulated in ACTCS policy, based on:

- a) the operational experience of the first five years of providing rehabilitative activities and services at the AMC;
- b) the desirable scale and scope of formal and informal activities; and
- c) equity of access and opportunity, taking into account the specific requirements of cohorts within the AMC including remandees, those progressing through the Transitional Release Centre, and those accommodated in separate communities or units.

APPENDIX A: LSI-R RISK FACTORS

Level of Service Inventory-Revised (Andrews & Bonta 1995)

The LSI-R utilises 54 items, grouped into 10 sub-scales, to assess both static and dynamic factors of risk. Static factors are characteristics that tend not to change over time, such as age at first offence, whether the offender has previously been imprisoned and whether the offender experienced childhood abuse. Static factors, therefore, are generally not amenable to change through actions of the offender or correctional interventions. Conversely, dynamic factors are amenable to change:

Dynamic factors earn their name because these are offender characteristics that lead to recidivism and are malleable, such as having attitudes that encourage crime. Dynamic risk factors are also commonly referred to as *criminogenic needs*. The existence of dynamic risk factors is critical because “something” must be targeted and changed if a treatment intervention is going to be effective (Cullen & Smith 2011: 170).

Dynamic factors that have been demonstrated through meta-analyses to be robust indicators of risk include:

- antisocial attitudes and values
- antisocial peer associations
- personality factors (eg, lack of self-control, aggression, impulsivity)
- dysfunctional family/marital relationships
- substance abuse
- lack of education and employment skills
- poor use of leisure time.

Source: Extract from ‘The Utility of Assessed Risk as an Indicator of Effectiveness in Custodial Rehabilitation’, Australian Institute of Criminology, August 2014

APPENDIX B: ABBREVIATIONS AND GLOSSARY

ACTCS	ACT Corrective Services
AMC	Alexander Maconochie Centre
Convicted	A person found guilty of an offence
Cottages	Five-bed units housing detainees who live in a group setting, including a therapeutic community cottage
Detainee	A person held in custody in the prison
Detainees on hand	Number of offenders in the prison at a point in time
Design capacity	Total intended bed capacity of AMC according to its design and initial construction (excludes specialist accommodation)
Extended Throughcare	A pilot program of support provided to detainees leading up to their release from AMC and for up to 12 months post release
GLM	Good Lives Model of Offender Rehabilitation, developed by Tony Ward and colleagues. Its ethical core is that of human rights and it starts from the assumption that while offenders have obligations to respect other peoples' entitlements to well being and freedom, they are also entitled to the same considerations.
LSI-R	Level of Service Inventory – Revised. A theoretically based risk/need offender assessment that provides a probability estimate of an offender's risk of reoffending and informs rehabilitation planning
AMC Offender Services	Area of ACTCS responsible for providing rehabilitation services to detainees
Parole	The provisional release of a detainee before the completion of their maximum sentence period imprisonment. Conditions are attached which, if broken, can result in criminal charges.
Program integrity	Ensuring a program is delivered in the way in which it is designed to be delivered, including the eligibility of participants, achievement of aims, objectives and any competencies/testing required

Purposeful activity	Activities that have rehabilitative value
Recidivism	Repetition of offending behaviour. One measure is the rate at which ex-detainees are reconvicted and returned to prison within two years of release.
Rehabilitation	The process by which a detainee changes his/her attitudes and behaviours associated with their offending. One objective is to lessen the likelihood of reoffending upon release
Remanded	In custody on bail, awaiting trial, completion of trial or sentencing
Risk-Need-Responsivity model (RNR)	A model of correctional practice initially developed in the 1980s by Canadian academics and correctional administrators, which provides the foundation for much practice today. It proposes treatments proportionate to risk levels, responds to specific criminogenic needs, and adapts interventions to offender learning styles and motivations.
Sentence Administration Board	Considers <i>inter alia</i> release to parole and on licence and breaches of periodic detention, parole and licence
Sentenced	Punishment imposed by a court of law following conviction
Structured day	Designed to provide a routine for detainees that improves prospects for rehabilitation and maintaining good order, develops pro-social habits and life skills and assists Corrective Services in programming activities and services
Surge	Unexpected increase in detainee numbers in a prison, as distinct from seasonal variation which is within a predicted range
Throughcare	A case management approach by Corrective Services, with the concerted support of others, of an offender, from the community to prison and back to the community, involving all aspects of well being
Total capacity	All AMC accommodation available at a point in time
Utilisation	Prisoners on-hand versus prison design capacity
What works model	Analysis of rehabilitative programs and services according to their success rates in reducing reoffending. Asking the question ' <i>What works?</i> ' countered the relatively widespread belief that <i>nothing works</i> (Martinson, 1974)

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