



Inspector of
Custodial Services

Inspector of Custodial Services

Inspection of the
Residential Facilities and
the Compulsory Drug
Treatment Correctional
Centre



Inspector of Custodial Services

Produced by Inspector of Custodial Services

Level 3, 50 Phillip Street
Sydney NSW 2000

P: 02 8061 9331

W: www.custodialinspector.justice.nsw.gov.au

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Foreword

The inspection of residential facilities reflects a departure from the secure correctional centres that constitute the bulk of the work of my office. The common feature of these facilities, and the Compulsory Drug Treatment Correctional Centre (CDTCC), is that they are not operated by the custodial corrections division of Corrective Services NSW (CSNSW), although the CDTCC is a secure correctional facility. Whilst some facilities accommodate individuals who are still in custody, several of these facilities accommodate people who have not been imprisoned.

Section 3(1) of the *Inspector of Custodial Services Act 2012* (NSW) defines 'custodial centre' as including transitional centres and residential facilities so it was clear these facilities were intended to be captured in the regime of independent inspection. After some initial uncertainty about my jurisdiction, which was quickly resolved, my team enjoyed full access to, and cooperation from, the inspected facilities.

The inspected facilities are specialised and each makes a targeted contribution to the rehabilitation and reintegration of offenders in NSW. Moreover, each is unique. This can be largely attributed to the history of each facility: why it was established; where it was established; the services to be delivered; and its target group of offenders and/or residents.

Three of the facilities are located in and around Sydney, one in a regional area and one in a remote location. Two were established with reference to the needs of Aboriginal people, and four to meet the needs of women. The critical need to support people to manage their alcohol and other drug dependency issues was relevant to most facilities.

The vital role each centre can play in either diverting people from custody, providing rehabilitation services or supporting reintegration into the community cannot be underestimated. The differences and challenges encountered at each individual centre is mainly a consequence of their size, geography and relative isolation from one another. The recommendations in this report are aimed at supporting these facilities to achieve their intended purpose and enhance their operations. It was therefore encouraging to learn during our consultation process that CSNSW has already commenced implementing some of our recommendations, including reviews of the Balund-a and Miruma residential programs and of the guidelines that govern the Bolwara Transitional Centre and the Parramatta Transitional Centre.

Fiona Rafter
Inspector of Custodial Services
January 2020

Acknowledgements

The Inspector would like to acknowledge the assistance and input of staff, residents and Elders at the inspected correctional facilities. The Inspector also acknowledges the assistance provided by Community Corrections staff, the Aboriginal Strategy and Policy Unit, Brush Farm Corrective Services Academy, the Inmate Classification and Placement division, the Electronic Monitoring and External Monitoring Group, the Justice Health and Forensic Mental Health Network, the NSW Drug Court and Official Visitors. The Inspector would also like to acknowledge the assistance provided by Steve Lugnan during the inspection of Balund-a residential program.

Glossary of terms

Aboriginal	'Aboriginal' when used in this report is inclusive of Aboriginal and Torres Strait Islander people.
AOD	Alcohol and other drug/s
AVL suite	Audio-visual link for communication between an offender and their legal representative or a court. They can also be used for virtual family and social visits.
Balund-a	Balund-a Residential Diversionary Program
Bangkok Rules	The United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders
BTC	Bolwara Transitional Centre
CDTCC	Compulsory Drug Treatment Correctional Centre
CDTP	Compulsory Drug Treatment Program
CDTO	Compulsory Drug Treatment Order
CSNSW	Corrective Services New South Wales
Custodial centre	The <i>Inspector of Custodial Services Act 2012</i> defines a custodial centre as a correctional centre, a residential facility, a transitional centre or a juvenile justice centre.
CSI	Corrective Services Industries
EEMG	Electronic and External Monitoring Group, which includes the CSNSW Work Release Program unit
EQUIPS program	Explore, Question, Understand, Investigate, Practice and Succeed program
Facilities	'Facilities' when used in this report includes the custodial centres inspected in this series.
ICS	Inspector of Custodial Services
ICS Act	<i>Inspector of Custodial Services Act 2012</i>
JH&FMHN	Justice Health & Forensic Mental Health Network
Mandela Rules	The United Nations Standard Minimum Rules for the Treatment of Prisoners
Miruma	Miruma Residential Diversionary Program
Nunyara	Nunyara Community Offender Support Program
Offender	A person who has been found guilty of an offence and is subject to an order of deferral of sentence, community supervision, imprisonment or compulsory drug treatment detention.
OST	Opioid substitution treatment
Parklea	Parklea Correctional Centre
Participant	An offender engaged in the CDTP at the Compulsory Drug Treatment Correctional Centre
Pathways	Criminal Conduct and Substance Abuse Treatment program – Pathways to Responsible Living
PTC	Parramatta Transitional Centre
RAPO	Regional Aboriginal Programs Officer
Resident	An offender residing at a transitional centre or a residential facility
RUSH	Real Understanding of Self-Help program
SORC	Serious Offenders Review Council

Executive Summary

The rehabilitation and reintegration of offenders is a core correctional objective and closely linked to the reduction of reoffending and the enhancement of community safety. In NSW it is enshrined as a primary objective of the *Crimes (Administration of Sentences) Act 1999* 'to provide for the rehabilitation of offenders with a view to their reintegration into the general community'.¹ In addition to addressing offending behaviours, rehabilitation and reintegration efforts seek to address sources of wider social and economic exclusion. Barriers to social and economic inclusion are faced disproportionately by offenders. As a population they frequently experience social disadvantage, including poverty, homelessness, low rates of educational attainment and literacy, unemployment, poor physical and mental health, and substance use problems.²

In accordance with section 6 of the *Inspector of Custodial Services Act 2012* (ICS Act), the office of the Inspector of Custodial Services conducted inspections of six 'custodial centres'³ between September and October 2018, all of which have a primary rehabilitation and reintegration objective.

The inspected facilities assist offenders by providing better access to stable accommodation, education and training programs, employment pathways, health and wellbeing services and drug treatment and support programs.

The Compulsory Drug Treatment Correctional Centre (CDTCC) provides intensive drug treatment and reintegration support to men whose offending is connected to their substance use. Participants are supported to progress from closed detention to community supervision.

Bolwara Transitional Centre (BTC) and Parramatta Transitional Centre (PTC) offer support to women to successfully transition from custody to the community. BTC's focus is on Aboriginal women with histories of substance use. PTC supports women serving longer sentences and can accommodate children residing with their mother.

Miruma and Balund-a residential programs offer an intensive residential placement that effectively diverts an offender away from custody at either pre-conviction, pre-sentence or post-sentence. Miruma is available to women with coexisting mental health and alcohol and other drug issues. Balund-a offers a longer term program to men with a particular focus on providing a culturally responsive and supportive program to Aboriginal residents.

Nunyara Community Offender Support Program offers short term placements to men who are subject to community supervision orders. Its primary focus is on assisting residents to identify and secure accommodation in the community.

The inspection found these facilities provide a vital and specialised contribution by Corrective Services New South Wales (CSNSW) to the rehabilitation and reintegration of offenders in NSW. They offer critical support in a context where access is often limited, to offenders who face significant barriers to social inclusion. Three of the facilities were established to assist offenders with substance use issues and histories. They constitute an essential part of CSNSW's strategy to reduce reoffending. Improvements and enhancements to their operations offer a means to strengthen the output of this strategy. The recommendations in this report are aimed at enhancing the important contribution made by each of the inspected facilities to reducing recidivism in NSW by providing specialised rehabilitation and reintegration programs for offenders.

One of the key challenges faced by these facilities is their relative isolation from one another and from the

1 *Crimes (Administration of Sentences) Act 1999* s 2A(1)(d).

2 NSW Legislative Council, *Select Committee on the Increase in Prisoner Population*, (Final Report, 2001) 19-27; UK Social Exclusion Unit, *Reducing Re-offending by Ex-prisoners*, (2002) 5-7; Tamara Walsh, 'Is Corrections Correcting? An examination of Prisoner Rehabilitation Policy and Practice in Queensland' (2006) 39(1) *Australian and New Zealand Journal of Criminology*, 115.

3 With the exception of the CDTCC, none of the inspected facilities is a secure custodial setting. However, s 3(1) of the ICS Act defines 'custodial centre' as including correctional centres, transitional centres and residential facilities.

mainstream custodial and community corrections functions. Changes in CSNSW's organisational priorities, structure and resourcing have impacted on the capacity of these facilities to meet the objectives for which they were established. The inspection found that programs delivered within some of these facilities were not subject to regular evaluations that offer insight for continuous improvement. The inspection also found that some policies and procedures were out of date and inconsistent with broader agency approaches. In the case of the transitional centres (BTC and PTC) this had translated to confusion around the provision of health services to residents. Although still technically in custody, residents are considered ineligible for some health services provided by the Justice Health & Forensic Mental Health Network (JH&FMHN). Greater organisational support and clarity of purpose would benefit the operation of these facilities and, in turn, enhance the rehabilitation and reintegration outcomes for their residents and participants.

Staff at the inspected facilities demonstrated a genuine commitment to the rehabilitation and reintegration of offenders in residence and to enhancing operations at their facility. Notwithstanding the expectation that they provide intensive, therapeutic case management and supervision of offenders with specific needs, the availability of staff training was limited. Staff were keen to strengthen their capability in this regard. The provision of tailored training that appropriately recognises the specific needs of residents and the specialised services available at these facilities is required. The Inspector has also made recommendations to enhance the therapeutic value of case management models operating in each facility and to strengthen the responsiveness of each facility to the needs of its particular offender cohort.

With their common focus on reducing reoffending by supporting offenders to live lawfully and independently in the community, offenders are encouraged to access the majority of criminogenic, wellbeing, education and work-readiness programs from community-based service providers. This assists with establishing continuity of service between custody and community. The links between CSNSW and community service providers is therefore critical to the availability of specialised and individualised reintegration plans for residents. The Inspector has made a number of recommendations to increase and enhance access to criminogenic, health and wellbeing, education and work-readiness programs and services at individual facilities.

The inspection team observed that assisting residents to identify and secure accommodation in the community was a challenge common to all facilities. It was observed to be particularly intractable at Nunyara where several residents were waiting for residential aged care placements. The existing networks that these facilities maintain offer significant value to those participants and residents who are linked in during the program and continue to access after completion. Resourcing allocation to these facilities and prioritisation within these facilities need to reflect the importance of maintaining and expanding networks of community service providers for the continued success of the programs.

Geographic location was identified as a determinative factor for strong linkages with community service providers. Proximity to public transport routes and access to a range of programs and services in the community impacts a facility's capacity to aid offenders to rehabilitate and reintegrate into the community. Consideration needs to be given to the ideal location for programs of this nature into the future.

With the exception of Balund-a and some infrastructure at the CDTCC and BTC, none of the facilities was purpose built. Despite this the inspection team found that management and staff had tried to maximise the benefits at each physical site. Existing security infrastructure, heritage controls and ongoing maintenance requirements proved challenging at most facilities. The Inspector has recommended maintenance that is aligned with the rehabilitation and reintegration objectives of the programs is regularly undertaken at each facility.

Aside from Miruma, which was operating at its capacity with 11 residents, the facilities inspected were operating at between 47% and 85% capacity. This was found to be partly attributable to a lack of awareness about the programs with offenders, sentencing courts, legal practitioners and CSNSW staff. In the case of the CDTCC, there were also practical challenges in arranging for the timely transfer of offenders

from their place of custody to Parklea Correctional Centre for a sufficient period of time to enable a suitability assessment to be completed.

The transitional centres faced particular challenges to operating at capacity as women must be sentenced and classified as minimum security risk to be eligible for a transitional placement. Less than 5% of women in custody are sentenced and classified to Category 1 security risk and of this group, only 7% are Aboriginal, despite Aboriginal women comprising over a third of the female population in custody.⁴ As a consequence, the inspection team observed competing demands for this small group of minimum security women to be placed in the reintegration home detention scheme,⁵ work release programs,⁶ independent living units attached to correctional centres and transitional centre placements. This combined with delays in processing applications by correctional centre managers had left the transitional centres underutilised despite the recognised need for pre-release support for women offenders. The Inspector is concerned there are systemic structural impediments in the women's classification system that may be preventing women, particularly Aboriginal women, from being appropriately classified according to the risk they pose.

It is important for residents and participants to prepare financially for a return to independent living in the community and the management of personal finances was a case management focus at each facility. CSNSW requires inmates at all of the inspected facilities to contribute to their accommodation costs if they are working or in receipt of Centrelink benefits. However, the cost and allowance structures of these programs varied considerably. Some variation is explained by whether or not an offender is in custody, and whether they are eligible for Centrelink benefits. Where income is received by residents and participants at the inspected facilities deductions are made to cover the cost of accommodation and food. It is not always clear how this cost is calculated and in some cases it exceeded the maximum threshold set by Ministerial Direction for inmates. While only some of the facilities inspected accommodate inmates, to whom the Ministerial Direction would apply, it is recommended that the cost structures of all are reviewed.

Two of the facilities inspected (Balund-a and BTC) were established to provide rehabilitation and reintegration services to Aboriginal offenders. Culturally safe and appropriate diversionary and pre-release programs that address the needs of Aboriginal offenders is critical to addressing the over-representation of Aboriginal people in custody in NSW, particularly Aboriginal women. The cultural component of Balund-a's program managed by Elders is unique and valuable. Resident engagement in cultural activities represented its own educational and wellbeing value, as well as supporting resident engagement with other educational and criminogenic programs at Balund-a. The value of a continued partnership with the Elders at Balund-a cannot be overstated. At BTC the availability of local community-based services that are delivered by Aboriginal organisations with relevant experience and expertise is a key strength of the transitional program. Despite the considerable needs of Aboriginal offenders for access to culturally responsive services and programs both Balunda and BTC were underutilised. The Inspector has recommended that the programs are reviewed to address the low rate of referrals to the programs and the high rate of placement termination.

4 Information provided by Corrective Services NSW on 14 February 2019.

5 Reintegration home detention is a transition program enabling eligible offenders to be electronically monitored in home detention during the final six months of their non-parole period. Further information available at <<http://www.paroleauthority.nsw.gov.au/Pages/Reintegration-home-detention.aspx>>.

6 The CSNSW work release program allows selected minimum security inmates to access employment in the community while they are in custody.

Recommendations

Systemic recommendations

Organisational structure and governance

1. The Inspector recommends that CSNSW review the delegations, policies and procedures at the inspected facilities to ensure they are relevant and consistent with current legislation.
2. The Inspector recommends that CSNSW and JH&FMHN review the terms of the service agreement to clarify and ensure the provision of health services to residents at Bolwara Transitional Centre and Parramatta Transitional Centre.
3. The Inspector recommends that CSNSW periodically review the purpose and effectiveness of the residential facilities.
4. The Inspector recommends that CSNSW develop measures of success for each transitional centre and residential facility that is consistent with its specific purpose.

Staff training

5. The Inspector recommends that CSNSW analyse the training needs of staff in transitional centres and residential facilities, and provide training accordingly.

Reintegration support

6. The Inspector recommends that CSNSW ensure the current case management of offenders across these facilities is individualised.
7. The Inspector recommends that CSNSW identify, maintain and expand linkages with community-based partners in reintegrative support.
8. The Inspector recommends that CSNSW maximise employment pathways at the transitional centres.

Accommodation and Infrastructure

9. The Inspector recommends that regular maintenance is undertaken at the residential facilities and transitional centres.

Utilisation

10. The Inspector recommends that CSNSW increase the capacity utilisation of the inspected facilities by informing stakeholders of their purpose and operation.
11. The Inspector recommends that CSNSW review the eligibility requirements for entry to BTC and the administration of the women's classification system to ensure that Aboriginal women can readily access the program.

Resident costs

12. The Inspector recommends that CSNSW review the costs to offenders across the facilities.

Facility specific recommendations

Compulsory Drug Treatment Correctional Centre (CDTCC)

13. The Inspector recommends that CSNSW expedite eligibility and suitability assessments at the CDTCC.
14. The Inspector recommends that CSNSW facilitate purposeful activities during waiting periods for the commencement of RUSH in Stage 1 at the CDTCC.

15. The Inspector recommends that CSNSW increase the availability of educational and training offerings at the CDTCC and maximise the use of existing resources to support the therapeutic objectives of the Compulsory Drug Treatment Program.
16. The Inspector recommends that CSNSW provide work-readiness activities at the CDTCC and refer participants to the work release program early where they have identified employment as a priority.
17. The Inspector recommends that CSNSW consider implementing a community projects team at the CDTCC to provide a work program for those participants not employed externally.
18. The Inspector recommends that CSNSW review the CDTCC's case management and support framework to strengthen the therapeutic community environment in Stage 2.
19. The Inspector recommends that CSNSW review the practice of placing participants who have been regressed for breaches of the rules in the same area as newly arrived Stage 1 participants and consider alternative placement options.
20. The Inspector recommends that CSNSW consider constructing a camera cell/s at the CDTCC for the temporary observation of participants.
21. The Inspector recommends that CSNSW amend the CDTCC's Standard Operating Procedure – Searching Participants to ensure that strip searching practice is governed in accordance with statutory and state-wide policy provisions.

Bolwara Transitional Centre (BTC)

22. The Inspector recommends that CSNSW review the induction process at BTC to ensure it is culturally appropriate and accessible to residents.
23. The Inspector recommends that CSNSW increase access to community-based and onsite activities, programs and services for residents at BTC.
24. The Inspector recommends that CSNSW provide working, internet-enabled computers at BTC for use by residents.
25. The Inspector recommends that CSNSW consider establishing a funded visiting Elder position or positions at BTC.
26. The Inspector recommends that CSNSW prioritise the recruitment and retention of Aboriginal staff members and consider establishing identified positions at BTC.

Parramatta Transitional Centre (PTC)

27. The Inspector recommends that CSNSW conduct a Work Health and Safety audit of the PTC premises.
28. The Inspector recommends that CSNSW is allocated sufficient budget for minor capital works at PTC to account for the additional costs of repairs and upgrades associated with the heritage site.
29. The Inspector recommends that CSNSW provide working internet-enabled computers at PTC for use by residents.

Miruma Residential Program (Miruma)

30. The Inspector recommends that CSNSW consider expanding the capacity of the Miruma program to address demand.
31. The Inspector recommends that CSNSW coordinate year-round access to programs and activities for residents at Miruma.
32. The Inspector recommends that CSNSW facilitate access at Miruma to a community-based AOD clinician.

33. The Inspector recommends that CSNSW maximise the use of existing infrastructure and outdoor spaces on the Miruma site to better serve the function of the program.

Balund-a Residential Program (Balund-a)

34. The Inspector recommends that CSNSW coordinate year-round access to programs, education (including distance education) and activities for residents at Balund-a.
35. The Inspector recommends that CSNSW support and strengthen the continued involvement of Elders at Balund-a.
36. The Inspector recommends that CSNSW support residents at Balund-a to attend funerals in the community.
37. The Inspector recommends that CSNSW explore alternative shopping options for Balund-a residents that offer lower costs for residents.
38. The Inspector recommends that CSNSW provide working internet-enabled computers at Balund-a for use by residents.
39. The Inspector recommends that CSNSW maximise the use of the Balund-a site and its farm as a source of education, training and activities for residents, and expand opportunities to involve residents in site improvement projects.
40. The Inspector recommends that CSNSW provide information at induction to Balund-a residents about their progression through the program, drug testing procedures and the supporting case management framework.
41. The Inspector recommends that CSNSW consider establishing an identified AOD counsellor position at Balund-a.
42. The Inspector recommends that CSNSW review the practice of placing residents who have been regressed for breaches of the rules in the same area as newly arrived residents and consider alternative placement options.
43. The Inspector recommends that CSNSW use the existing audio-visual link (AVL) suite to facilitate family visits for residents at Balund-a.

Nunyara Community Offender Support Program (Nunyara)

44. The Inspector recommends that CSNSW review the application of sanctions at Nunyara to ensure they are proportionate.
45. The Inspector recommends that CSNSW identify and secure, through partnerships with government and non-government organisations, suitable accommodation for aged and infirm offenders subject to community supervision.
46. The Inspector recommends that CSNSW allocate the whole of the originally occupied site to Nunyara to increase its capacity and provide greater opportunities for onsite activities.
47. The Inspector recommends that CSNSW develop and implement a prescribed training program for staff at Nunyara to manage the increasingly complex and diverse needs of its residents, including aged care considerations.

Other

48. The Inspector recommends that this report is made public immediately upon being tabled in NSW Parliament, in accordance with section 16(2) of the *Inspector of Custodial Services Act 2012* (NSW).

1 Introduction

The office of the Inspector of Custodial Services was established by the *Inspector of Custodial Services Act 2012* (the ICS Act) in October 2013. The mandate of the office is to provide independent scrutiny of the conditions, treatment and outcomes for adults and young people in custody, and to promote excellence in staff professional practice.

Section 6 of the ICS Act sets out the principal functions of the Inspector as follows:

- inspect each custodial centre (other than juvenile justice centres and juvenile correctional centres) at least once every 5 years
- inspect each juvenile justice centre and juvenile correctional centre at least once every 3 years
- examine and review any custodial service at any time
- report to Parliament on each such inspection, examination or review
- report to Parliament on any particular issue or general matter relating to the functions of the Inspector if, in the Inspector's opinion, it is in the interest of any person or in the public interest to do so
- report to Parliament on any particular issue or general matter relating to the functions of the inspector if requested to do so by the Minister
- include in any report such advice or recommendations as the Inspector thinks appropriate (including advice or recommendations relating to the efficiency, economy and proper administration of custodial centres and custodial services)
- oversee Official Visitor programs conducted under the *Crimes (Administration of Sentences) Act 1999* and the *Children (Detention Centres) Act 1987*
- advise, train and assist Official Visitors in the exercise of the functions conferred or imposed on them under those Acts
- such other functions as may be conferred or imposed on the Inspector under this or any other Act.

The Inspector also has a responsibility to ensure that ethical and professional practice is observed across the custodial environment in NSW.

1.1 Scope

In consultation with Corrective Services NSW (CSNSW), six custodial centres were selected for inspection:

- Compulsory Drug Treatment Correctional Centre (CDTCC)
- Bolwara Transitional Centre (BTC)
- Parramatta Transitional Centre (PTC)
- Miruma Residential Diversionary Program (Miruma)
- Balund-a Residential Diversionary Program (Balund-a)
- Nunyara Community Offender Support Program (Nunyara).

With the exception of the CDTCC, none of these facilities is a secure custodial setting. However, section 3(1) of the ICS Act defines 'custodial centre' as including correctional centres, transitional centres and residential facilities.

The inspection was conducted with particular reference to:

- a. the role of transitional centres in aiding offenders to reintegrate into the community;
- b. the role of residential facilities in aiding offenders to reintegrate into the community;
- c. the role of the CDTCC in aiding offenders to rehabilitate and reintegrate into the community;
- d. relevant standards, legislation, policies and procedures; and
- e. any other related matter.

1.2 Methodology

An inspection team conducted an onsite visit to each facility. Semi-structured interviews were conducted with individual residents or participants, discussions were held informally with groups, and meetings with representative committees were conducted where such committees existed. The inspection team also conducted semi-structured interviews with a range of staff occupying various levels of seniority across these facilities.

Supporting information and input was obtained from CSNSW and Justice Health and Forensic Mental Health Network (JH&FMHN) concerning both the general operations of the facilities and the thematic focus of the inspection.

2 Reintegration and rehabilitation

2.1 A foundational correctional objective

The terms 'rehabilitation' and 'reintegration' are widely used in a range of different contexts. In the context of criminal justice they refer to 'a process, intervention or programme to enable individuals to overcome previous difficulties linked to their offending so that they can become law abiding and useful members of the wider community'.⁷

The rehabilitation and reintegration of offenders is recognised as fundamental to the correctional objective of enhancing community safety. In NSW, one of the objectives of the *Crimes (Administration of Sentences) Act 1999* is 'to provide for the rehabilitation of offenders with a view to their reintegration into the general community'.⁸

The rehabilitation and reintegration of offenders is embedded in the Guiding Principles for Corrections in Australia as one of five outcomes intended to inform correctional practice.⁹ In the United Nations Standard Minimum Rules on the Treatment of Prisoners (the Mandela Rules), the link between reducing reoffending, community safety, and the rehabilitation and reintegration of offenders is emphasised.¹⁰ The United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders (the Bangkok Rules) echo the Mandela Rules and emphasise the importance of gender-responsive rehabilitation and reintegration programs within correctional regimes.¹¹

In the context of correctional regimes, rehabilitation includes the provision of specific criminogenic programs targeting offending behaviours as well as programs that support an offender's social and economic integration. The Guiding Principles for Corrections in Australia require that a correctional regime's rehabilitation and reintegration efforts be:

- integrated and coordinated from commencement of sentence to after release
- holistic and structured
- trauma-informed and sensitive to the needs of victims
- responsive to the needs of particular groups including Aboriginal and Torres Strait Islander offenders and women offenders
- informed by employability issues
- supportive of the maintenance of family and social relationships
- able to offer opportunities to engage in community work and projects
- provided in consultation with relevant community stakeholders.¹²

2.2 Why is rehabilitation and reintegration important?

The overwhelming majority of offenders serving custodial sentences will be returned to the community. As a population, offenders frequently experience social disadvantage including poverty, homelessness, low rates of educational attainment and literacy, unemployment, poor physical and mental health, and substance use

7 Yvonne Jewkes and Jamie Bennett, 'Dictionary of Prisons and Punishment' (2008) *Routledge Oxford* 243.

8 *Crimes (Administration of Sentences) Act 1999* s 2A(1)(d).

9 Corrective Services Administrators' Council, *Guiding Principles for Corrections in Australia* (2018) 23-26.

10 *United Nations Standard Minimum Rules on the Treatment of Prisoners*, Rules 4, 5, 25, 59, 88-90, 96, 102, 106-108.

11 *United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders*, Rules 4, 12-13, 15, 26, 28-29, 40-41, 43, 45-47, 55, 57-58, 60, 62, 67, 69.

12 Corrective Services Administrators' Council, *Guiding Principles for Corrections in Australia* (2018) 23-26.

problems.¹³ Incarceration can amplify this experience of social marginalisation and generate a considerable barrier to successful social integration.¹⁴ It follows that providing supervised treatment and support to offenders reduces the effects of this institutionalisation associated with custodial sentences and highlights the link between support for social reintegration and community safety.

2.2.1 Housing and homelessness

One third of Australian prisoners are homeless before they enter prison and an even higher percentage (54%) exit into homelessness.¹⁵ Exiting custody into homelessness is associated with a high rate of reimprisonment.¹⁶ Research has also found that those who have periods of homelessness interspersed with custodial sentences may experience repeated homelessness and incarceration as a type of serial institutionalisation.¹⁷ Supporting offenders to identify and secure stable accommodation is a fundamental element to any strategy aimed at social integration and reducing reoffending.

2.2.2. Educational attainment

In comparison to the general population, lower levels of formal educational attainment and higher rates of learning difficulty and disability are experienced by prisoners in Australia. In 2018, data collected from a sample of inmates entering Australian prisons indicated that only 19% had completed the equivalent of Year 12 and 33% had not completed Year 10. Aboriginal inmates reflected lower levels of schooling attainment than non-Aboriginal inmates.¹⁸ Increasing offender access to formal education and training, and educational programs to assist with life skills such as parenting, self care, and financial literacy is a strategy that is used to support diversionary and post-release social integration strategies.

2.2.3 Employment

Securing employment on release from custody is a challenge for offenders, who as a population already face difficulties in securing and maintaining employment. In the 2018 National Prisoner Health Data Collection, 54% of surveyed inmates entering Australian prisons were unemployed immediately prior to incarceration and only 22% of those discharged reported having paid employment that would commence within a fortnight of their release from custody.¹⁹ Employment can alleviate financial stress and improve a person's material conditions in addition to the social connections that it nurtures.

2.2.4 Health and substance use

Offenders have poorer health compared with the broader population.²⁰ Responses by incarcerated people across NSW correctional centres to the *Network Patient Health Survey* conducted by JH&FMHN in 2015 indicated:

- 20.7% had been diagnosed with Hepatitis C

13 NSW Legislative Council, *Select Committee on the Increase in Prisoner Population*, (Final Report, 2001) 19-27; UK Social Exclusion Unit, *Reducing Re-offending by Ex-prisoners* (Final Report, 2002) 5-7; Walsh Tamara, 'Is Corrections Correcting? An examination of Prisoner Rehabilitation Policy and Practice in Queensland' (2006) 39(1) *Australian and New Zealand Journal of Criminology* 115.

14 Chris Cunneen et al, *Penal Culture and Hyperincarceration: The Revival of the Prison* (Ashgate Publishing Ltd, 2013) 16; John Irwin and Barbara Owen, 'Harm and the Contemporary Prison' in Alison Lieblich and Shadd Maruna (eds), *The Effects of Imprisonment* (Routledge Oxford, 2005) 94, 114-115.

15 Australian Institute of Health and Welfare, *The Health of Australia's Prisoners 2018*, (Final Report, 30 May 2018) 22, 24.

16 Eileen Baldry, Desmond McDonnell, Peter Maplestone and Manu Peters, 'Ex-Inmates, Homelessness and the State in Australia' (2006) 39(1) *The Australian and New Zealand Journal of Criminology* 24.

17 Eileen Baldry, Desmond McDonnell, Peter Maplestone and Manu Peters 'Ex-prisoners and Accommodation: What bearing do different forms of housing have on social reintegration?' (Final Report No 46, Australian Housing and Urban Research Institute, August 2003) 12, 28-29.

18 Australian Institute of Health and Welfare, *The Health of Australia's Prisoners 2018* (Final Report, 30 May 2018) 16-17.

19 Australian Institute of Health and Welfare, *The Health of Australia's Prisoners 2018* (Final Report, 30 May 2018) 18-19.

20 Australian Institute of Health and Welfare, *The Health of Australia's Prisoners 2018* (Final Report, 30 May 2018) 4; Royal Australian College of General Practitioners, *Standards for Health Services in Australian Prisons* (First edition, April 2011) 2-3; Justice Health & Forensic Mental Health Network, *2016-2017 Year In Review*, (2017) 14.

- 15.6% had been diagnosed with high blood pressure
- 67.1% of men and 63.3% of women indicated hazardous levels of drinking prior to custody
- 62.9% of participants had received at least one mental health diagnosis
- 17.8% had previously attempted suicide.²¹

While offenders have complex and significant health needs, many have minimal regular contact with health services outside of periods of incarceration. Supporting offenders to engage community-based services for mental health, disordered substance use, disability and chronic illness is an important strategy for addressing structural disadvantages that are associated with offender populations and with higher rates of reoffending.

2.3 Correctional facilities inspected

Each inspected facility was established with a distinct purpose to meet the needs of a specific cohort of offenders. Notwithstanding these differences all facilities incorporate a program of increasing community access. They share an objective of supporting offenders to live independently and lawfully in the community. Residents and participants manage their own schedules and finances and are expected to arrange their own travel to access services and programs in the community.

2.3.1 Compulsory Drug Treatment Correctional Centre

The CDTCC is located inside the Parklea Correctional Complex and accommodates men who are subject to Compulsory Drug Treatment Orders (CDTO) and participating in the Compulsory Drug Treatment Program (CDTP).²² It is operated by CSNSW in partnership with the NSW Drug Court and JH&FMHN.

Intensive treatment and reintegration support are provided for drug dependent men whose offending is connected to their substance use. Participants are supported to progress from closed detention to community supervision.

2.3.2 Transitional centres

A transitional centre is defined by the *Crimes (Administration of Sentences) Act 1999* as a 'premises managed or approved by the Commissioner for the purpose of accommodating certain inmates prior to their release from custody'.²³ The use of residential facilities is approved for this purpose.²⁴ The design of the transitional programs is to assist women to successfully exit custody with an emphasis on reducing reoffending. BTC's focus is on Aboriginal women with histories of substance use. PTC supports women serving longer sentences and has capacity to accommodate children residing with their mothers.

21 Justice Health & Forensic Mental Health Network, *2015 Network Patient Health Survey Report* (Final Report, 2017) 13-14.

22 A Compulsory Drug Treatment Order is made under s 18C of the *Drug Court Act 1998*.

23 *Crimes (Administration of Sentences) Act 1999* s 3.

24 *Crimes (Administration of Sentences) Act 1999* s 236M.

The provision of gender-responsive services to 'ease [...] transition from prison [...], to reduce stigma and to re-establish contact with their families at the earliest stage' is stipulated in the Bangkok Rules.²⁵ The role of transitional centres was also emphasised in CSNSW's 2014 Strategy for providing programs and services to women offenders, which prioritised:

1. engaging with other government and non-government agencies to enhance successful reintegration of women on their release from the criminal justice system
2. maintaining transitional centres for women to enhance community integration
3. providing timely advice to courts and other sentencing authorities so that women offenders have increased access to existing diversionary and pre-release programs.²⁶

2.3.3 Residential facilities

In addition to transitional placements, the use of residential facilities is approved for accommodating offenders who are subject to community-based orders.²⁷ Residents at Balund-a, Miruma and Nunyara are not in custody and are in effect being diverted away from prison through their placements. While 'diversion' was traditionally conceptualised as an intervention that diverted a person away from the criminal justice system in its entirety, the concept has since expanded to include interventions which may divert people to a more therapeutic and less punitive criminal justice response.²⁸ While these diversionary interventions may increase involvement with the criminal justice system initially, as is the case with the intensive supervision and support offered in Balund-a and Miruma, the aim is to ultimately reduce this involvement through reducing reoffending.

Diversionary interventions can be delivered at many different points in the criminal justice process including pre-charge, pre-conviction, pre-sentence and post-sentence.²⁹ The programs at Balund-a and Miruma are delivered to offenders at either pre-conviction, pre-sentence or post-sentence. Miruma offers an intensive program to women with coexisting mental health and alcohol and other drug (AOD) issues. Balund-a offers a longer term program to men with a particular focus on providing a culturally responsive and supportive program to Aboriginal residents. Nunyara offers short term placements to men released from custody. Its primary focus is on supporting residents to identify and secure accommodation in the community.

25 *United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders*, Rules 45 and 46.

26 Corrective Services NSW, *Recognising gender difference: A strategy for the program and service provision to women offenders* (May 2014).

27 *Crimes (Administration of Sentences) Act 1999* s 236M.

28 Joy Wundersitz, 'Criminal Justice Responses to Drug and Drug-related Offending: Are they Working?' (Technical and Background Paper No 25, Australian Institute of Criminology, May 2017) 31. <<https://aic.gov.au/publications/tbp/tbp025>>.

29 Elizabeth Richardson and Bernadette McSherry, 'Diversion Down Under – Programs for Offenders with Mental Illnesses in Australia' (2010) 33 *International Journal of Law and Psychiatry* 250.

3 Overview of findings across the inspected facilities

3.1 Organisational structure and governance

Since the establishment of each of the inspected facilities CSNSW has implemented several shifts in strategic and operational priorities and undertaken organisational restructures.

PTC and BTC are currently operated by CSNSW's community corrections division but have historically been operated by the custodial corrections division and the offender management and operations division.³⁰

Nunyara was established in 2008 and by mid-2009 community offender support programs were also established at Kempsey, Windsor, Emu Plains and Campbelltown.³¹ Of these, Nunyara is the only community offender support program that remains in operation.³² Nunyara was originally established to accommodate 80 offenders but in late 2015 half of its site was repurposed as accommodation for offenders undertaking work release from the Metropolitan Special Programs Centre.

Balund-a was opened in 2009 as a residential diversionary program for male and female Aboriginal offenders but has since reduced its program offering to male offenders and is not using the entire site at Tabulam.³³ Approximately 25% of the accommodation infrastructure at Balund-a is not in use.

Miruma opened in 2011 and was modelled closely on the Biyani residential diversionary program for female offenders operating in North Parramatta.³⁴ Biyani was closed in 2014 and Miruma is now the only residential diversionary facility offering a program to female offenders in NSW.³⁵

The exception to this is the CDTCC, which has experienced relative stability without significant change since its establishment in 2006. The unique terms under which the CDTCC was established and operates has insulated it from the broader organisational restructures and budgetary reviews within CSNSW and JH&FMHN.

The inspection team observed that changes to the programs have presented challenges for some facilities in maintaining the integrity of their original objectives. The inspection team heard concerns from some staff about whether the facilities they worked in would exist into the future. This was especially so where facilities established with similar functions had been closed around them. The inspection found these facilities provide a vital and specialised contribution by CSNSW to its aim of reducing reoffending. It is therefore important that CSNSW periodically reviews the purpose, objectives, and eligibility criteria of these facilities to ensure they are supported to achieve their strategic objectives.

Programs must be evaluated to understand how they are working and to examine the extent to which they are meeting their intended objectives. The information that is produced through evaluation and review can inform the enhancement of a program's existing strengths and offer insight into areas that need improvement. Only two of the facilities had been subject to any formal evaluation or review at the time of inspection. The program delivered in the CDTCC was evaluated by the NSW Bureau of Crime Statistics and Research between 2006 and 2009.³⁶ It was reviewed again by CSNSW in May 2013.³⁷ The PTC was

30 Corrective Services NSW, *Annual Report 2002/03* (Report, October 2003) 5, 32; Corrective Services NSW, *Annual Report 2008/09* (Report, 8 October 2009) 6.

31 Corrective Services NSW, *Annual Report 2008/09* (Report, 8 October 2009) 158.

32 The community offender support program at Campbelltown was closed in 2013 and reopened in 2014 as an integrated support centre for offenders subject to community supervision.

33 Judicial Commission of New South Wales 'The Balund-a Diversionary Program: A Second Chance by the River' (2010) 22(7) *Judicial Officers Bulletin* 56.

34 Department of Attorney General and Justice, *Annual Report 2010/11: A Just and Safe Society* (Report, 31 October 2011) 98.

35 Lenny Roth, 'Reducing Adult Reoffending' (Briefing Paper No 2/205, NSW Parliamentary Research Service, 2015) 23.

36 Joula Dekker, Kate O'Brien and Nadine Smith, 'An Evaluation of the Compulsory Drug Treatment Program (CDTP)' (NSW Bureau of Crime Statistics and Research Report, 2010).

37 Section 106Z of the *Crimes (Administration of Sentences) Act 1999* provides for the Minister to arrange a review of the CDTP and the governing statutory framework.

evaluated by CSNSW in 2001, five years after its establishment, and has not been formally reviewed since then.³⁸ CSNSW has confirmed that the Balund-a and Miruma programs are currently under review and that recommendations arising from a review of the Nunyara program were received by CSNSW in October 2019.³⁹

With the exception of the CDTCC, the inspection team was unable to identify the performance measures used to monitor how centres were achieving rehabilitation and reintegration outcomes. It is important that CSNSW measures the value of these programs to understand how they contribute to reducing reoffending and how this contribution can be strengthened and improved.

While the majority of the facilities inspected were managed within the community corrections portfolio, they operated in relative isolation from one another. This isolation has resulted in ad-hoc processes and missed opportunities to share resources and expertise between the inspected facilities. The inspection team found that not all had current management plans or standard operating procedures to support their function. Many of the residential facilities operated under out-dated procedures that had not been reviewed for several years and included references to repealed legislative provisions. The transitional centres are residential facilities that accommodate women under custodial sentence who may, on occasion, be subject to correctional centre security measures such as strip searching and the application of restraints. It is imperative that residential facility officers who are expected to conduct the functions of correctional officers hold lawful authority to do so that is consistent with the *Crimes (Administration of Sentences) Act 1999*. The inspection found instruments of delegation also required review. CSNSW has commenced reviews of standard operating procedures for BTC, PTC and confirmed that broader reviews of delegations, policies and procedures for the residential facilities are forthcoming.⁴⁰

Residents were generally expected to access community-based health services, which is consistent with the reintegration programs of these facilities. However, the inspection found that inadequate consideration was given to the availability of health services to transitional centre residents who remain under custodial sentence and may not have access to any source of external income. JH&FMHN and CSNSW are currently reviewing the provision of health services to residents at transitional centres.⁴¹

The functions of residential facility officers at transitional centres and the fact that residents are under sentence raised questions about whether the current alignment of PTC and BTC with the community corrections division is the best fit. While it is important to retain the distinction between a transitional centre placement and a custodial placement, there is potential benefit from closer alignment with case management and classification to facilitate progression from custody to a transitional setting.

Recommendation 1: The Inspector recommends that CSNSW review the delegations, policies and procedures at the inspected facilities to ensure they are relevant and consistent with current legislation.

Recommendation 2: The Inspector recommends that CSNSW and JH&FMHN review the terms of the service agreement to clarify and ensure the provision of health services to residents at Bolwara Transitional Centre and Parramatta Transitional Centre.

Recommendation 3: The Inspector recommends that CSNSW periodically review the purpose and effectiveness of the residential facilities.

Recommendation 4: The Inspector recommends that CSNSW develop measures of success for each transitional centre and residential facility that is consistent with its specific purpose.

38 Inga Jacobsson, 'Evaluation of the Parramatta Transitional Centre' (Corporate Planning and Development Unit, Corrective Services NSW 2001).

39 Information provided by Corrective Services NSW on 15 November 2019.

40 Information provided by Corrective Services NSW on 15 November 2019.

41 Information provided by Corrective Services NSW on 15 November 2019; Information provided by Justice Health and Forensic Mental Health Network NSW on 14 November 2019.

3.2 Staffing capability

The inspection team observed high levels of commitment by staff across the facilities to the objectives of rehabilitation and reintegration and to the progress of individual residents and participants.

With the exception of the CDTCC, the inspected facilities are not staffed by custodial officers or community corrections officers. The structured training programs for custodial or community corrections officers of between eight and 10 weeks in duration are not available to staff in the residential facilities and transitional centres. Aside from the mandatory induction module and the online security awareness tutorial, the availability of training was sporadic and without sufficient reference to the objectives of the program, or the needs of offenders and staff.

Residential facility officers are required to exercise some of the same functions as a correctional officer in a correctional centre, such as searching, drug testing, and in some cases, applying restraints and strip searching. Despite this, they are not required to complete any structured and tailored training program. CSNSW has indicated that training for transitional centre staff is being developed with greater reference to the training package already required for custodial officers.⁴²

The objective of each facility is to provide intensive supervision and support to offenders. These are specialist services targeting offender groups with distinct and complex needs. Staff members responsible for the delivery of these services need access to commensurate training and professional support.

Recommendation 5: The Inspector recommends that CSNSW analyse the training needs of staff in transitional centres and residential facilities, and provide training accordingly.

3.3 Reintegration support

The *Crimes (Administration of Sentences) Regulation 2014* provides for programs that:

- a) offer the inmate an opportunity to develop skills, behaviours and attitudes that lessen the likelihood of the inmate reoffending, or
- b) contribute to the inmate living in society after release from custody, or
- c) promote the health, safety and wellbeing of the inmate.⁴³

Within the broader correctional regime, each of the facilities functions as a program in and of itself as well as facilitating access to specific criminogenic, wellbeing, education and work-readiness programs to offenders in residence. With the exception of Stage 1 in the CDTCC, the facilities rely heavily on community-based service providers to deliver services and programs.⁴⁴ Linking offenders with relevant and specialised community service providers that remain available to offenders after the conclusion of their placements is an important reintegration support strategy.⁴⁵ Efforts to provide continuity of service and support by connecting residents with services in the communities they intend to reside in after release is to be commended.

It is also important that reintegration programs are designed to respond to an offender's individual circumstances and needs. It is for this reason that sustained and targeted partnerships with community service providers should be prioritised by CSNSW and appropriately resourced.

Offender interest in formal educational programs varied between inspected facilities and was contingent on an offender's individual circumstances and priorities. Education and vocational training was generally accessed through TAFE NSW or community colleges, with limited educational offerings onsite. Although good access to educational offerings was generally observed, consideration needs to be given to overcoming barriers to access that are specific to particular facilities. For example, due to Balund-a's remote

42 Information provided by Corrective Services NSW on 15 November 2019.

43 *Crimes (Administration of Sentences) Regulation 2014* cl 60(1).

44 The CDTCC delivers intensive therapeutic and criminogenic programs to offenders in the first stage of closed detention.

45 Maria Borzycki and Eileen Baldry, 'Promoting Integration: The Provision of Prisoner Post-Release Services' (Trends and Issues in Crime and Criminal Justice No 262, Australian Institute of Criminology, September 2003) 4.

location there was a lack of available service providers to deliver education and training programs. Providing internet-enabled computers and reliable internet access onsite may offer means by which to improve access to education for Balund-a residents.

Securing employment was an important resettlement goal for many residents and participants.⁴⁶ While community-based paid employment was an option, very few residents and participants had secured paid employment. Several contributing factors were identified by staff and residents:

- The duration of a placement did not allow sufficient time to focus on employment.
- Assisting individual residents to identify potential employers was resource intensive.
- Other resettlement factors such as housing or debt reduction were prioritised by residents over employment.
- A physical, intellectual or psychiatric condition prevented a resident from engaging in paid employment.
- Work opportunities near to the facility were limited and public transport was inaccessible.
- Residents at PTC and BTC were deemed ineligible for assistance from job network providers because they were ineligible for Centrelink benefits.

Residents at the CDTCC and the transitional centres are eligible to participate in CSNSW’s work release program for approved minimum security inmates, where offenders are matched to potential external employers. Drawing on the expertise and knowledge in the work release program may strengthen the employment pathways for residents and participants in these facilities.

Recommendation 6: The Inspector recommends that CSNSW ensure the current case management and support of offenders across these facilities is individualised.

Recommendation 7: The Inspector recommends that CSNSW identify, maintain and expand linkages with community-based partners in reintegrative support.

Recommendation 8: The Inspector recommends that CSNSW maximise employment pathways at the transitional centres.

3.4 Accommodation and physical infrastructure

A core objective of these facilities is to support offenders to live independently and lawfully in the community. Each of the inspected facilities is defined in part by the fact it is not a correctional centre. Whether providing diversion from secure custody or assisting a resident to re-enter the community following a custodial sentence, there is an acknowledgement that the rehabilitation and reintegration objectives of these facilities are better served outside of a traditional custodial environment. The table below sets out the range of environmental features in these locations.

	CDTCC ⁴⁷	PTC	BTC	Nunyara	Miruma	Balund-a
On a correctional complex	Yes	No	Yes	Yes	Yes	No
Accommodation	Cell block	Residential	Residential	Cell block	Residential	Residential
Secured perimeter	Yes	No	No	No	No	No

The physical environment is an important element in each of these facilities. It can enable or hinder the therapeutic value of a program, its capacity to offer a physical transition between custody and the

⁴⁶ Except for Nunyara, access to the community was staged so employment tended to be available only once some progress in the program had been made by the offender.

⁴⁷ Stages 1 and 2 of the CDTP are completed by a participant in the CDTCC and Stage 3 is completed in the community under supervision.

community, and to offer a clear diversionary pathway from custody. The facilities occupied a range of locations with varied orientations, layouts and total area. Very few occupy sites that were purposefully designed to provide community-based placements. Regular maintenance was also a concern for a number of facilities, especially those occupying heritage registered sites.

Recommendation 9: The Inspector recommends that regular maintenance is undertaken at the residential facilities and transitional centres.

3.5 Utilisation

Several facilities were operating under capacity. The following table sets out the maximum capacity of each facility, the operational capacity reported by management of each facility and the number of residents at each facility on inspection.

Centre	Maximum capacity	Current operational capacity	Number of offenders at inspection	Capacity utilisation
CDTCC ⁴⁸	70	70	41	58.6%
BTC	16	16	11	68.8%
PTC	20	20	13	65%
Miruma	11	11	11	100%
Balund-a	75	40	34	85%
Nunyara	45	45	21	46.7%

Efforts to raise awareness about the purpose and operation of these facilities with stakeholders including offenders, sentencing courts, legal practitioners, community organisations and other CSNSW staff were inconsistent.

Transitional centres faced additional barriers to operating at full capacity. In 2017 the BTC had an average residency rate of 94%. This rate decreased to 86% in the period January–June 2018. In the latter half of 2018, this was reduced further to 67%.⁴⁹ At the PTC the rate of residency in 2017 ranged from 60% to 75%. In early 2018 this rate increased to 85% but was reduced to 60–65% in the period June–December 2018.⁵⁰ The inspection found the low numbers of sentenced women classified to Category 1, in combination with the range of programs that target this particular cohort, has led to fewer women in the transitional centres. At 1 February 2019 only 40 of the 959 women in custody in NSW were classified Category 1 and sentenced. This proportion is consistent with the average over the period February 2018–February 2019.⁵¹ The inspection found that reintegration home detention scheme, work release program and independent living units in correctional centres compete with the transitional centres for women classified as Category 1.⁵²

An additional challenge for BTC is that there are very few Aboriginal women classified to Category 1. At 1 February 2019 only 7% of Category 1 sentenced women were Aboriginal, despite Aboriginal women making

48 The maximum capacity at the CDTCC reflects only Stages 1 and 2 because Stage 3 participants reside in the community.

49 Information provided by Corrective Services NSW on 28 February 2019.

50 Information provided by Corrective Services NSW on 12 March 2019.

51 Information provided by Corrective Services NSW on 14 February 2019.

52 Reintegration home detention is a transition program enabling eligible offenders to be electronically monitored in home detention during the final six months of their non-parole period. <<http://www.paroleauthority.nsw.gov.au/Pages/Reintegration-home-detention.aspx>>. The work release program allows selected minimum security inmates to access employment in the community while they are in custody. Independent living units within correctional centres offer privileges and greater responsibilities for inmates and are used to incentivise positive institutional conduct and progression to the lowest security classification.

up 33.68% of the female population in custody.⁵³ While admission to BTC is open to Category 1 and Category 2 women, they must still be assessed as eligible to progress to Category 1 within a month of their commencement at BTC. Consideration needs to be given to whether there are structural impediments in the women's classification system that may be preventing women, and particularly Aboriginal women, from being appropriately classified according to the risk they pose.

Recommendation 10: The Inspector recommends that CSNSW increase the capacity utilisation of the inspected facilities by informing stakeholders of their purpose and operation.

Recommendation 11: The Inspector recommends that CSNSW review the eligibility requirements for entry to BTC and the administration of the women's classification system to ensure that Aboriginal women can readily access the program.

3.6 Resident costs

It is important for residents and participants to prepare financially for a return to independent living in the community. Accordingly, CSNSW requires contributions by resident and participants who are employed or in receipt of Centrelink benefits. The cost of participating in the programs varied according to the profile of the facility and its residents or participants. The table below reflects the various costs of participation and any monetary allowances available to residents and participants:

Facility	Eligible for Centrelink benefit	Weekly cost to offender if employed or in receipt of Centrelink benefits	Other costs incurred by offender	Weekly program allowance to offender if not employed
CDTCC	In Stage 3 only	15% of income	- Community travel - Health care and medication in Stage 3	\$17.76–\$48.81 ⁵⁴
PTC	No	15% of income	- Community travel - Health care - Medication if employed	\$18.73–\$23 ⁵⁵
BTC	No	25% of income	- Community travel - Health care - Medication if employed	\$22.80
Balund-a	Yes	25% of income	- Community travel - Health care and medication	N/A
Miruma	Yes	\$75	- Community travel - Health care and medication - Refundable deposits for keys and medication	N/A
Nunyara	Yes	\$75 or 25% of income (whichever is higher)	- Community travel - Health care and medication	N/A

⁵³ Information provided by Corrective Services NSW on 14 February 2019.

⁵⁴ The range reflects the varied costs incurred by a participant between Stages 1 and 2 of the CDTCC. Participants do not receive an allowance in Stage 3.

⁵⁵ If a resident is engaged in neither educational program nor work, they receive \$18.73. If a resident is engaged in educational programs or voluntary work, they receive the higher allowance of \$23 to reflect additional costs of travel that are incurred.

Some variations between facilities reflect the different status of offenders in residence. For example, it is appropriate that a program allowance is offered to those offenders in Stages 1 and 2 of the CDTCC and in transitional placements at PTC and BTC because they are in custody and ineligible to receive Centrelink benefits. If these offenders are not engaged in paid employment, they may have no source of income to manage the costs of accessing the range of necessary support services and programs in the community. In contrast, residents at Nunyara, Balund-a and Miruma are not in custody and so remain eligible for Centrelink benefits.

The basis for the inconsistency in costs for residents and participants is unclear. Deductions from earnings are only authorised under section 7A of the *Crimes (Administration of Sentences) Act 1999* for contributing to the costs of administering an inmate's work release position, travel fares and their imprisonment during the employment period. The contribution amount was set by a Ministerial Direction on 22 October 2014 at 15% of an offender's net salary.⁵⁶ This 15% contribution rate was also embedded in CSNSW's Offender Classification and Case Management Policy and Procedures Manual - 20.4 Work Release/ Educational and Vocational Training. The Ministerial Direction applies to 'inmates' and therefore is strictly only enforceable at CDTCC, PTC and BTC. However, the basis for the calculation of varying charges to residents, and the departure from the Ministerial limit set on offender contributions remain unclear.

Recommendation 12: The Inspector recommends that CSNSW review the costs to offenders across the facilities.

56 Corrective Services NSW 'Changes to external work release contributions' (Assistant Commissioner's Memorandum No. 2014/20, 10 November 2014).

4 Compulsory Drug Treatment Correctional Centre

4.1 Overview

The CDTCC was established in 2006 under the *Compulsory Drug Treatment Correctional Centre Act 2004*, which amended the *Drug Court Act 1998*, the *Crimes (Sentencing Procedure) Act 1999* and the *Crimes (Administration of Sentences) Act 1999*. The original purpose of the CDTCC was to provide treatment, rehabilitation and reintegration for male offenders whose repeated offending is linked to severe substance use disorders:

The program sits at the end of the continuum of drug diversion programs in NSW aimed at breaking the drug-crime cycle. Eligible offenders to the program will be sent to a special correctional facility dedicated to abstinence-based treatment, rehabilitation and education. There will be intensive judicial case management of these offenders, in close partnership with the correctional authorities as well as health and other service providers. The compulsory drug treatment program will build on the productive justice and health systems linkages already established for programs such as the Drug Court program. Offenders will be gradually reintegrated back into the community and targeted with support after completion of their program and even beyond parole. The aim is to achieve better outcomes for the State's most desperately entrenched criminal addicts by assisting them to become drug free and crime free, to take personal responsibility, and to achieve a more productive lifestyle.⁵⁷

In partnership with the NSW Drug Court and JH&FMHN, CSNSW administers the Compulsory Drug Treatment Program (CDTP) at the CDTCC, which is located within the Parklea Correctional Complex. The objects of the Program are set out in section 106B of the *Crimes (Administration of Sentences) Act 1999*:

- a) to provide a comprehensive program of compulsory treatment and rehabilitation under judicial supervision for drug dependent persons who repeatedly resort to criminal activity to support that dependency, and
- b) to effectively treat those persons for drug dependency, eliminating their illicit drug use while in the program and reducing the likelihood of relapse on release, and
- c) to promote the reintegration of those persons into the community, and
- d) to prevent and reduce crime by reducing those persons' need to resort to criminal activity to support their dependency.

The CDTP comprises 3 progressive stages of drug treatment and rehabilitation that incentivises successful progression with increasing personal freedom and responsibilities, and associated access to the community.

Stage 1	Closed detention for a minimum of 6 months with a focus on intensive therapeutic treatment
Stage 2	Semi-open detention for a minimum of 6 months in which a participant transitions to accessing therapeutic services in the community and addresses accommodation and income needs arising in Stage 3
Stage 3	Community-based supervised custody for at least the remainder of the non-parole period where the participant is living unassisted full-time in the community

⁵⁷ NSW, *Parliamentary Debates*, Legislative Council, 12 May 2004, 8769.

Across Stages 1 and 2 of the CDTP, up to 70 participants can be accommodated at the CDTCC and during Stage 3 participants are supervised by CDTCC staff in the community. When the inspection team visited CDTCC it was under capacity:

	Actual	Capacity
Stage 1	24	35
Stage 2	17	35
Stage 3	13	30

Approximately one third of participants entering the CDTP successfully complete the program.⁵⁸ In the two-year period 2017–2018, 72 Compulsory Drug Treatment Orders (CDTO) were made and 33 CDTOs were revoked.⁵⁹ A CDTO may be revoked by the NSW Drug Court in a range of circumstances not limited to where the:

- participant has failed to comply with the order
- non-parole period of the participant’s sentence expires during Stages 1 or 2
- participant is no longer an ‘eligible convicted offender’
- participant is assessed as unlikely to make further progress in the CDTP.⁶⁰

In the event a CDTO is revoked, the participant is returned to custody to serve the remainder of the sentence by way of full-time detention.⁶¹

4.2 Offender eligibility

Eligibility for entry to the CDTP is set out in the *Drug Court Act 1998*. A person is deemed by a sentencing court to be an ‘eligible convicted offender’ if they meet the following criteria:

- have been sentenced to imprisonment for between 18 months and 6 years⁶²
- have a long term drug dependency that is related to the offence⁶³
- have not been convicted of certain offences⁶⁴
- reside in the greater Sydney geographical area⁶⁵
- are aged 18 years and above and male.⁶⁶

If an offender is deemed an eligible convicted offender a referral is made by the sentencing court to the NSW Drug Court for further assessment.⁶⁷ The NSW Drug Court considers the offender’s drug dependency history and offending circumstances. Consideration is also given to whether an offender’s mental health will allow them to participate actively and without a risk of violence.⁶⁸ Further information is sought by the NSW Drug Court in the form of an assessment by a multidisciplinary team from the CDTCC (including CSNSW and JH&FMHN staff) around the following factors:

58 Information provided by Corrective Services NSW on 5 February 2019. Successful completion of the CDTP is defined as release to parole following completion of Stages 1, 2 and 3 or program participation until the expiration of sentence.

59 Information provided by Corrective Services NSW on 5 February 2019.

60 *Crime (Administration of Sentences) Act 1999* s 106Q.

61 *Crime (Administration of Sentences) Act 1999* s 106S.

62 *Drug Court Act 1998* s 5A(1).

63 *Drug Court Act 1998* s 5A(1).

64 *Drug Court Act 1998* s 5A(2).

65 *Drug Court Regulation 2015* reg 5(a).

66 *Drug Court Regulation 2015* reg 5(b),(d).

67 *Drug Court Act 1998* ss 18B and 18BA outline the referral of ‘eligible convicted offenders’ to the NSW Drug Court by sentencing courts or the State Parole Authority. *Drug Court Regulation 2015* reg 9 prescribes the sentencing courts that may refer an ‘eligible convicted offender’ to the NSW Drug Court.

68 *Drug Court Act* s 5A(3).

- potential responsiveness to the CDTP
- history of drug treatment
- any previous offending involving violence
- any violent institutional behaviour
- likelihood that the offender will commit a domestic violence offence while in the community during Stage 3 of the CDTP.⁶⁹

If the NSW Drug Court is satisfied that the offender is both eligible and suitable for participation in the CDTP, a CDTO is made.⁷⁰

Staff identified the assessment process as contributing to CDTCC's low numbers. After the NSW Drug Court refers an offender for assessment, the offender must be transferred by CSNSW to Parklea Correctional Centre (Parklea).⁷¹ This relocation is to enable a face-to-face assessment by a CDTCC-based senior clinician and psychiatrist from JH&FMHN followed by a suitability assessment by a CDTCC-based case coordinator and custodial officer from CSNSW. Arranging these transfers in a timely fashion has been a challenge for the CDTCC. Discussions are underway with correctional centre management around NSW to ensure that this process is streamlined.⁷²

In early 2018, there was a backlog of suitability assessments (and associated reports) for the NSW Drug Court. This issue appears to have been addressed through the allocation of specific staffing resources to coordinate the assessment process. The CDTCC is also developing information for stakeholders involved in the referral of offenders. This information will inform judicial officers, legal practitioners and advocates about the criteria for placement in the CDTP to increase the number of eligible and suitable referrals made.

At the time of the inspection a new process had been implemented to keep offenders at Parklea for 6 weeks to minimise the circumstances where an offender would be transferred from Parklea to another correctional centre before the assessment process is completed.

Recommendation 13: The Inspector recommends that CSNSW expedite eligibility and suitability assessments at the CDTCC.

4.3 Stage 1

Once a CDTO is made, the participant enters Stage 1 of the CDTP. The initial 3 weeks following reception at CDTCC is focused on the development of a personal plan which must be approved by the NSW Drug Court.⁷³

The personal plan is developed by the participant and their CSNSW case coordinator with input from CSNSW and JH&FMHN management at CDTCC. It details a participant's goals and needs in respect of their drug use and offending, conditions for their participation in the program, individualised rewards for meeting these conditions and sanctions for noncompliance. The plan is revised at the completion of each stage and variation requires approval by the NSW Drug Court.⁷⁴

69 *Drug Court Act* s 18E.

70 *Crimes (Sentencing Procedure) Act 1999* s 5A.

71 *Crimes (Administration of Sentences) Act 1999* s 23.

72 Information provided by Corrective Services NSW on 15 November 2019.

73 *Crimes (Administration of Sentences) Act 1999* s 106F(1)-(2).

74 *Crimes (Administration of Sentences) Act 1999* ss 106F-106J.

The structure of a day in Stage 1 is outlined below:

Time	Activity
6.30am	Landings are unlocked.
8.00am–9.00am	Medication is issued to participants who require it and drug testing is conducted.
9.00am–11.30am	Therapeutic programs, education or other organised activities are facilitated.
11.30am–12.30pm	Lunch
12.30pm–4.00pm	Therapeutic programs, education or other organised activities are facilitated.
5.00pm or 7.00pm	Lock-in at 5.00pm in winter and at 7.00pm in summer.

Stage 1 requires participation in the following two co-facilitated therapeutic group programs:

1. The Real Understanding of Self-Help (RUSH) program is a skills-based treatment program that addresses antisocial attitudes and beliefs, low self control, impulsivity and poor interpersonal skills.⁷⁵ At the CDTCC the RUSH Program was delivered over 23 x two-hour sessions scheduled three times per week. The initial offering of RUSH at the CDTCC is designed to enhance participants' treatment readiness.
2. The Criminal Conduct and Substance Abuse Treatment: Strategies for Self-improvement and Change - Pathways to Responsible Living (Pathways) is a high intensity cognitive-behavioural program to address drug and alcohol dependence and offending. Pathways consist of 50 x two-hour sessions delivered three times per week.

The therapeutic benefits of group therapy are well documented. It can operate as a source of interpersonal connection, peer support and stabilisation. The culture of recovery that is nurtured within the group can also strengthen participants' engagement with their treatment.⁷⁶ As distinct from many therapeutic group program offerings within mainstream correctional centres, the CDTCC runs both RUSH and Pathways in a closed group setting, which means that the membership of the group is fixed upon commencement of the program. The therapeutic benefit is found in the establishment of the group's culture of recovery and open communication. In an open group setting where participants may enter and leave the group at different times, there is a risk that this culture is disrupted by shifting group dynamics. Several participants reported their experience of the therapeutic programs as intense, challenging and rewarding.

While participant accounts of the therapeutic programs were generally positive, there were concerns raised about the impact of the closed group model on waiting times in Stage 1. The first three weeks of a participant's experience in Stage 1 are focused on developing the personal plan and addressing any outstanding health needs. While educational activities may be offered during this period, RUSH is not offered to a participant before the fourth week. Four weeks is not a lengthy period but some participants must wait several months for a RUSH group to fill and commence. According to the CDTCC's records the average time between the issue of a CDTO and the commencement of RUSH was 47 days with the longest wait time in the 2017-2018 period 132 days. Taking into account that there may be up to 2 days between the issue of a CDTO and reception of a participant at the CDTCC, the average wait time for RUSH to commence was still approximately 6.5 weeks. CSNSW has advised that increased referrals have recently been received into the CDTP and this has reduced the waiting times for RUSH groups to commence.⁷⁷ It is important that participants are occupied by education and other meaningful activities during this period to mitigate the risk of drug use and other issues at the CDTCC.

At the time of the inspection the following schedule was in place for Stage 1:

⁷⁵ Corrective Services NSW, *Compendium of Offender Behaviour Change Programs in New South Wales* (June 2016) 90.

⁷⁶ Center for Substance Abuse Treatment, 'Substance Abuse Treatment: Group Therapy' (Treatment Improvement Protocol Series, No 41, US Substance Abuse and Mental Health Services Administration, 2005) <<https://www.ncbi.nlm.nih.gov/books/NBK64206/>>.

⁷⁷ Information provided by Corrective Services NSW on 15 November 2019.

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning	Foundation Skills 9.00am–11.30am	Therapeutic group 10.00am–12.00pm	Therapeutic group 10.00am–12.00pm	Therapeutic group 10.00am–12.00pm	Foundation Skills 9.00am–11.30am Financial Independence 10.00am–11.00am
Afternoon	Foundation Skills 1.00pm–3.00pm	Café Skills 12.30pm–4.30pm (23 October–27 November 2018)	NA meeting 1.30pm–3.30pm	Café Skills 12.30pm–4.30pm (27 September–6 November 2018)	Foundation Skills 1.00pm–3.00pm

Under CSNSW's Approved Statewide Vocational Training Delivery Plan, the following courses were approved for delivery at the CDTCC during the period 1 July–31 December 2018:

- 2 x Café skills course
- 1 x First aid
- 1 x Grounds maintenance
- 2 x Hygiene
- 1 x General construction induction
- 1 x General workplace health and safety.

Except for the General Workplace Health and Safety course, all of the above were delivered during the period 1 July–31 December 2018.

As a result of CSNSW's education reforms, the CDTCC has been allocated 10 hours per week of delivery of Foundation Skills Programs (incorporating language, literacy and numeracy) in 2018. The change to educational services has reduced participant access to educational support that specifically compliments and reinforces the therapeutic environment at the CDTCC. Previously the onsite teaching staff based at the CDTCC offered contextualised literacy support, including music education, support to complete homework in the therapeutic program, and support to create resumes and navigate employment applications. Notwithstanding the CDTCC has a music room and instruments, there was no music education for participants at the time of inspection. Research findings from the United States, Canada, New Zealand and the UK indicate that participation in arts programs in prison can strengthen participants' communication skills, encourage pro-social interpersonal interactions, raise self-esteem and support new understandings of a sense of self.⁷⁸ In turn they are valuable in rehabilitation and in reducing recidivism.

The case management framework in operation at the CDTCC is centred on assessment, treatment and management of the participant.⁷⁹ While these aspects require input and involvement from the participant, JH&FMHN staff, custodial officers, program staff and community corrections staff, the appointment of a case coordinator enables centralised coordination of treatment and supervision. The inspection team

⁷⁸ Lyn Tett et al, 'Learning, Rehabilitation and the Arts in Prisons: a Scottish Case Study' (2012) 44(2) *Studies in the Education of Adults* 173.

⁷⁹ Corrective Services NSW, *Case Management Guidelines CDTCC* (draft, February 2018) 10.

obtained positive accounts from participants about the availability of, and support from, case coordinators and other staff during Stage 1.

Participants and staff also identified the structured rewards system as a positive feature of the program Stage 1. It emphasises:

- active involvement by the participant in the development of their treatment and management plan
- individualised positive rewards over negative sanctions
- immediate application of rewards or sanctions.⁸⁰

There are 21 levels spaced across five tiers in the rewards schedule. Participants commence on Level 1 in their fourth week and if their progress is confirmed at the weekly review meeting with their case coordinator and a custodial officer, they progress to the next level. These meetings are an opportunity for discussion with the participant about their experience during the week and for reflection on pro-social behaviour or any negative behaviour recorded in a participant's case notes. In addition to this individualised rewards framework, there are also collective rewards available for example when Stage 1 collectively achieves a week without an instance of substance use.

In addition to the rewards schedule, the CDTCC has a Substance Use Sanctions Matrix that is applied in the case that substance use by a participant is identified. This matrix sets out the sanctions applicable for identified substance use, which is distinguished as being either 'admitted' to by the participant or 'non-admitted'. Admitting to drug use involves a participant being honest and informing staff before being selected for urinalysis. In addition to completing treatment programs, and complying with case plan objectives, a participant must be drug free for six weeks before progressing to Stage 2 of the CDTP.

Participants reported that the Stage 1 rewards and sanctions framework reflected consistency, fairness and transparency at the CDTCC.

Recommendation 14: The Inspector recommends that CSNSW facilitate purposeful activities during waiting periods for the commencement of RUSH in Stage 1 at the CDTCC.

Recommendation 15: The Inspector recommends that CSNSW increase the availability of educational and training offerings at the CDTCC and maximise the use of existing resources to support the therapeutic objectives of the Compulsory Drug Treatment Program.

4.4 Stage 2

The progression to Stage 2 of the CDTP involves the participant's physical relocation to a separate but adjacent area of the CDTCC as well as a new regime involving incremental access to the community during the day and residence in a secure unit overnight. The NSW Drug Court is required to make a community supervision order to enable a participant's conditional absence from the CDTCC.⁸¹

80 Corrective Services NSW, *Case Management Guidelines CDTCC* (draft, February 2018) 16.

81 *Crimes (Administration of Sentences) Act 1999* s 106O.

The structure of a day in Stage 2 is outlined below:

Time	Activity
6.00am ⁸²	Participants are unlocked from their landings.
7.00am	Medication is issued to participants who require it and drug testing is conducted
4.30am–8.30pm	Participants attend pre-approved appointments for community-based work and other programs
9.00pm	Participants are locked in to their landings

A participant's Stage 2 personal plan sets out their engagement in education, therapeutic support, employment and social connection in the community. Weekly schedules are submitted by participants for CDTCC approval. Compliance with an approved schedule is monitored via GPS ankle bracelets worn by participants in Stage 2. Participants in paid employment are liable for the cost of the bracelet (\$42 per week).

The inspection team spoke with a number of participants who indicated they were, or had been, involved in the following community-based activities during Stage 2:

- voluntary work with local community organisations
- attending weekly appointments at the job network agency
- attending addiction support group meetings
- attending individual counselling
- attending religious gatherings
- visits to family during approved social leave
- completing education and training courses including scaffolding, panel beating and spray painting.

The social leave schedule offers an increasing allocation of weekly leave for employment related activities, visiting approved family and friends or accessing recreational and sporting activities. These entitlements are confirmed at the weekly review meeting attended by the participant and their case coordinator as a reward for pro-social behaviour and compliance with conditions of the Plan. Under the Stage 2 social leave schedule the allocation increases from 8 hours under the escort of CDTCC staff through to weekend leave after 21 weeks in Stage 2.

Participants are responsible for meeting costs associated with social leave and participation in therapeutic and educational activities during Stage 2. If participants are employed during Stage 2 they are also required to contribute 15% of their wage to the CDTCC towards the cost of their accommodation. Stage 2 participants who are not employed receive a weekly allowance of \$48.81.

Securing employment was identified by Stage 2 participants and staff as a challenge. At the time of the inspection two out of the 17 participants in Stage 2 were employed.⁸³ As at 30 January 2019, one out of the ten Stage 2 participants was engaged in paid employment.

CSNSW's Electronic and External Monitoring Group (EEMG) is responsible for monitoring eligible inmates (including the CDTCC's Stage 2 participants) to work in paid external employment via CSNSW's work release program. This team has developed a network of employment sites in which electronic monitoring does not preclude employment opportunities. A strength of the work release program is its maintenance of an existing network of employers with positions already aligned with CSNSW security considerations and practices.

⁸² If a participant's work obligations require an earlier unlock this is facilitated.

⁸³ One of these two participants was in a work trial and had not secured employment.

Securing accommodation for Stage 3 is also a focus of Stage 2 case management. While some participants rely on accommodation provided by approved family or friends, other participants received assistance to secure accommodation from local community service providers. Stage 2 and 3 participants identified these community organisations as sources of vital support. The inspection team noted that many of the volunteering and paid employment opportunities in Stage 2 are also facilitated by these organisations, suggesting that the CDTCC's linkages with these organisations are crucial to the continued success of the CDTP.

Staff and participants identified the early part of Stage 2 with an elevated risk of drug use. The CDTCC has taken steps to address this by preserving continuity in case coordination through the transition from Stage 1 to Stage 2. Notwithstanding this positive initiative by the CDTCC, participants reported reduced contact with, and support from, case coordinators in Stage 2. The inspection team observed that in Stage 1 staff were readily visible in the accommodation area and had high levels of interaction with participants. Stage 2 involves leaving the CDTCC to travel to services and programs in the community and as a result the engagement between staff and participants is reduced. CSNSW has emphasised that this reduction of intensity in intervention from Stage 1 to Stage 2 is planned and supported to encourage greater engagement by the participant with community organisations and services. The practice of weekly community meetings continues from Stage 1 into Stage 2, however the focus of these meetings appeared to shift away from participant treatment and recovery and towards CDTCC routine and administration. CSNSW has agreed to reconfigure the Stage 2 community meetings to focus on recovery and peer support and has introduced a relapse prevention workbook to be used by the commencing Stage 2 group.⁸⁴

Recommendation 16: The Inspector recommends that CSNSW provide work-readiness activities at the CDTCC and refer participants to the work release program early where they have identified employment as a priority.

Recommendation 17: The Inspector recommends that CSNSW consider implementing a community projects team at the CDTCC to provide a work program for those participants not employed externally.

Recommendation 18: The Inspector recommends that CSNSW review the CDTCC's case management and support framework to strengthen the therapeutic community environment in Stage 2.

4.5 Stage 3

Once the NSW Drug Court has approved a Stage 2 participant's progression to Stage 3, a new personal plan is generated with input from the participant, and CDTCC and JH&FMHN staff. This must be approved by the NSW Drug Court and informs the community supervision order under which the participant is supervised during Stage 3.⁸⁵ The fortnightly reporting by the participant to the NSW Drug Court that commences part way through Stage 2 continues throughout Stage 3, until the non-parole period of the sentence is completed and the NSW Drug Court approves the participant's release to parole.

Access in Stage 2 to community-based services, programs and employment is consolidated in Stage 3 and participants are no longer subject to detention in the CDTCC. Instead they reside at approved accommodation in the community. Participants who are not employed in Stage 3 may be eligible for Centrelink benefits and no longer receive a program allowance.

⁸⁴ Information provided by Corrective Services NSW on 15 November 2019.

⁸⁵ *Crimes (Administration of Sentences) Act 1999* s 106O.

Electronic monitoring continues during the first month of Stage 3, after which time its use is reviewed on a case by case basis. Stage 3 participants are required to attend the CDTCC to:

- participate in monthly review meetings with their case coordinator
- undergo drug testing three times per week
- participate in the monthly Stage 3 community meetings.

Stage 3 participants are also allocated a CDTCC-based community corrections officer who conducts home visits and random drug testing in addition to the weekly urinalysis at the CDTCC.

Stage 3 participants identified the transition from Stage 2 to Stage 3 as challenging, especially where family support was unavailable. Securing accommodation was also identified as a particular challenge associated with Stage 3 because of the shortage of affordable private accommodation. Participants emphasised the importance of the support from staff at the CDTCC in resolving these challenges.

A participant's transition from Stage 3 to parole involves a transition from supervision by a CDTCC case coordinator to a community corrections officer. This transition reflects another point in the CDTP at which an elevated risk of substance use was reported by staff. Presently, there is no formalised communication or consultation between CDTCC staff and the community corrections office responsible for supervising a participant once they commence a parole order. Ideally a participant's case plan in Stage 3 of the CDTP should align with their community corrections case plan to maximise continuity.

4.6 Access to health care

The health centre is located in the administration building and provides services between 7.00am and 6.30pm seven days per week. It is staffed by a nurse unit manager, four registered nurses, one enrolled nurse who supports participant transition to community care, and one senior AOD clinician. The health centre has two clinical consulting rooms, one of which has telehealth facilities available. A dental clinic operates onsite and other allied health services are accessed through the optometry, physiotherapy and radiology clinics at Parklea.

Participants consistently reported the health service to be accessible and staffed by approachable, supportive and caring practitioners. The relationship between JH&FMHN and CSNSW was observed to be collaborative and constructive. This is important because the health needs of the participant cohort are complex and frequently characterised by a range of comorbidities or co-occurring illnesses with substance use disorders.⁸⁶ Health concerns are assessed and addressed without delay at the CDTCC. The timing of the commencement of therapeutic drug treatment and offending programs is designed to prioritise the assessment and treatment of any outstanding health needs.

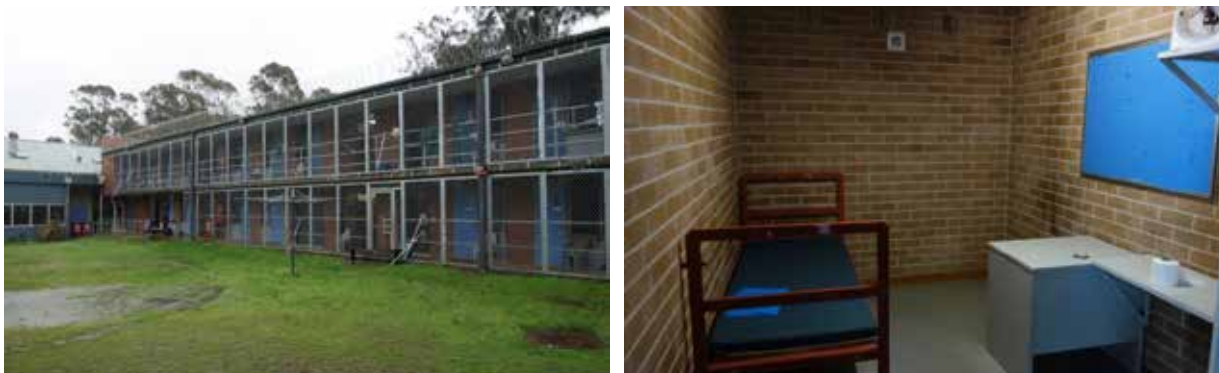
86 Maree Teesson and Heather Proudfoot (eds), *Comorbid mental disorders and substance use disorders: epidemiology, prevention and treatment* (National Drug and Alcohol Research Centre, University of New South Wales, 2003) 1; Kim T. Mueser, Douglas L. Noordsy and Robert E. Drake, 'Serious Mental Illness' in Kenneth J. Kenneth Sher (ed), *The Oxford Handbook of Substance Use and Substance Use Disorders: Volume 2* (Oxford University Press, 2014) DOI: 10.1093/oxfordhb/9780199381708.013.009.



Consulting rooms in the health centre at the CDTCC

4.7 Physical environment

The CDTCC has a secure perimeter fence. Stage 1 and Stage 2 accommodation areas are laid out at either side of a central building that accommodates programs rooms, administration offices and the health centre. Each area can accommodate 35 participants across two double-level blocks with individual cells.



Single cell accommodation was spread over two levels at the CDTCC

Individual cells include a single bed, desk, chair, shelving, television and fan. Cells inspected by the team did not have any windows. Small glass pane inserts in the cell doors allowed some light into the cells. While there were fixed vents in the rear walls of cells to allow for adequate ventilation, the lack of windows limited the availability of light.⁸⁷

Individual cells were identified as a positive feature by participants and staff, who referred to the benefits of time alone, especially in Stage 1, where participants engage in intensive therapeutic group sessions.

One landing in Stage 1 has several cells reserved to accommodate participants regressed from Stages 2 or 3 for breaching the rules of the CDTP. It is acknowledged that in its current layout at Parklea, the CDTCC doesn't allow alternative bed placements for participants regressed to Stage 1. CSNSW has indicated that it is able to manage newly arrived participants and regressed participants placed together.⁸⁸ However this placement practice is ill advised and may increase the risk of substance use in Stage 1.

87 Inspector of Custodial Services, *Inspection Standards for Adult Custodial Services in New South Wales* (August 2014) Standard 22.4 requires that 'windows in all cells must permit sufficient natural light to facilitate inmates reading and writing'.

88 Information provided by Corrective Services NSW on 15 November 2019.

The CDTCC does not currently have a safety cell with a camera allowing for observation. Capital and operational budget constraints were cited as a barrier to constructing an observation cell or cells at the CDTCC. If a participant requires observation they must be transferred to Parklea or to a medical facility. There are a range of circumstances in which the need for observation may arise, many of which may be appropriately assessed as requiring the transfer of a participant from the CDTCC to Parklea. However, some scenarios do not warrant an immediate return to Parklea or to a medical facility if a participant could be managed safely through temporary observation.

Each of the landings has a shared laundry, simple kitchenette facilities, and a bathroom. Participants are free to use these facilities. While the inspection team observed these facilities to be functional, some aspects were showing wear and tear and could be improved with more thorough and regular cleaning.

Adjacent to the Stage 1 accommodation area is the visits area. Visits are only available to Stage 1 participants because the expectation is that Stage 2 participants will conduct their social visits in the community. Stage 1 participants are permitted non-contact visits. The CDTCC's policy of non-contact visits in Stage 1 is in place to reduce pathways for drugs to enter the CDTCC. Adjacent to the Stage 2 accommodation area is the entry and exit by Stage 2 participants and a room designated for conducting searches and conducting urinalysis. Every Stage 2 participant is pat searched upon their return to the CDTCC and some are also strip searched. The inspection team observed a mirrored panel adhered to the floor and positioned between outlines designating the placement of feet. Staff advised that this was used as a visual aid during strip searches to increase visibility and ease of searching. This practice is stipulated in the CDTCC's Standard Operating Procedure – Searching Participants (SOP):

The use of visual aids such as mirror and/or torches is provided to correctional officers and may be utilised when conducting strip searches.⁸⁹

However, a review of the relevant statutory and procedural provisions concerning the powers of correctional officers to conduct strip searches did not identify references to the use of visual aids. In the absence of any clear authority to use visual aids, their use appears inconsistent with legislation and the need to respect a participant's dignity in undertaking searches.⁹⁰ Since the inspection of the CDTCC in October 2018, CSNSW has confirmed that the CDTCC's Standard Operating Procedure was withdrawn, the mirror was removed, and training for custodial staff at the CDTCC has included a focus on searching requirements.⁹¹

89 Corrective Services NSW, *Compulsory Drug Treatment Correctional Centre Standard Operating Procedure – Searching Participants No 15.068* (February 2017) 7.

90 Inspector of Custodial Services, *Inspection Standards for Adult Custodial Services in New South Wales* (August 2014) Standard 39.6; *United Nations Standard Minimum Rules for the Treatment of Prisoners*, Rules 50-53.

91 Information provided by Corrective Services NSW on 15 November 2019.

Both Stage 1 and Stage 2 areas had access to large communal kitchens.



Communal kitchen in Stage 1 at the CDTCC

Communal kitchen in Stage 2 at the CDTCC

Recreational spaces and equipment were available in both Stage 1 and Stage 2 and the inspection team observed that Stage 1 was appropriately equipped to account for the increased time that Stage 1 participants spent in the accommodation area. Stage 1 participants can access a music room with a range of instruments and some recording equipment, a combined library and recreation room with a billiards table, a gymnasium and games. Stage 1 participants also had access to green space behind and in front of the accommodation buildings. This incorporated a beach volleyball court in some disrepair, a vegetable garden and some picnic tables and chairs. Stage 2 participants had access to a gymnasium.



Music room in Stage 1 at the CDTCC



Indoor gym in Stage 2 at the CDTCC

The razor wire atop the perimeter fence, the cell blocks and the prison greens worn by participants in Stage 1 are all clear indicators that the CDTCC is a place of detention. However, modifications have been made to enhance the therapeutic value of the environment. Features of the regime at the CDTCC such as permitting participants to control the lock and unlock of their own cells within the secure landing encourage participants to assume autonomy over their daily routine. The inspection observed a recently painted and well-organised library and recreational room, which was designed and completed by Stage 1 participants. As a reward for their collective efforts, additional gym equipment was made available.

Recommendation 19: The Inspector recommends that CSNSW review the practice of placing participants who have been regressed for breaches of the rules in the same area as newly arrived Stage 1 participants and consider alternative placement options.

Recommendation 20: The Inspector recommends that CSNSW consider constructing a camera cell/s at the CDTCC for the temporary observation of participants.

Recommendation 21: The Inspector recommends that CSNSW amend the CDTCC's Standard Operating Procedure – Searching Participants to ensure that strip searching practice is governed in accordance with statutory and state-wide policy provisions.

4.8 Staffing and culture

The CDTCC was established as a partnership between CSNSW and JH&FMHN with judicial supervision of participants by the NSW Drug Court. The staffing profile includes:

- CSNSW psychologists, services and programs officers, an education planning officer and community corrections officers
- JH&FMHN nurses, a psychiatrist and an AOD clinician
- CSNSW custodial staff.

The partnership between JH&FMHN and CSNSW is effective and constructive. Multidisciplinary teams are constituted at the CDTCC to review participant progress. The judicial supervision of participants is also an important feature of the CDTP. While the NSW Drug Court does not intervene in the daily operation of the CDTCC, the benefit of its input and support was evident to the inspection team.

According to its original mandate, the CDTCC's success is contingent on its ability to offer a therapeutic community for participants.⁹² The central assumption underlying the model of a therapeutic community is that the community itself operates as a therapeutic tool. An alliance between staff and participants is required to enhance treatment readiness and staff need to be supportive, knowledgeable and skilled in their contribution to the therapeutic community.⁹³ The following cultural manifesto of the CDTCC is documented at the top of the Stages 1 and 2 Landing Representatives meeting agendas:

Against the models that underpin the CDTP all staff and participants are endeavouring to align the program and culture with the Human Rights and Therapeutic Jurisprudence framework. Therefore participants are to have a voice and be offered opportunities to be involved in decision making regarding their recovery treatment plan. Staff members are to role model pro-social behaviour, and interactions between themselves and participant. These interactions are to be mutually respectful. All are to work towards a drug-free environment.⁹⁴

Limitations commonly affecting a therapeutic community inside a secure custodial centre include the recognition of its value by custodial officers, and the implications of prison-wide security measures in response to incidents.⁹⁵ The inspection team observed neither of these issues at CDTCC.

In addition to the positive and professional interactions observed amongst staff, the inspection team was impressed with the integration between custodial and non-custodial staff at the CDTCC. There was an explicit awareness amongst custodial staff of their enabling function in establishing a positive social climate and participating in a therapeutic community.

92 Astrid Birgden, 'A Compulsory Drug Treatment Program for Offenders in Australia: Therapeutic Jurisprudence Implications' (2009) 9 *The Judicial Review* 305.

93 Astrid Birgden, 'A Compulsory Drug Treatment Program for Offenders in Australia: Therapeutic Jurisprudence Implications' (2009) 9 *The Judicial Review* 305.

94 Information provided by Corrective Services NSW on 9 October 2019.

95 David Kennard, 'The therapeutic community as an adaptable treatment modality across different settings' (2004) 75(3) *Psychiatric Quarterly* 303.

The flexibility afforded by staff was identified by participants as a positive and encouraging feature of the CDTP. The inspection team heard an account from one participant who was permitted to use the telephone after lock-in times to speak with his partner who was a shift worker. This flexibility indicates a genuine effort on the part of the CDTCC to provide an environment that is responsive to a participant's individual circumstances and consistent with a program of rehabilitation and reintegration.

5 Bolwara Transitional Centre

5.1 Overview

BTC was opened in 2002 adjacent to the Emu Plains Correctional Centre as an initiative of the 1999 NSW Drug Summit. It was established to provide a pre-release program in a community setting for women with AOD problems.⁹⁶ It also accommodated a Mothers and Children program from its establishment until approximately 2004.⁹⁷ BTC was established specifically to meet the needs of Aboriginal women leaving custody but non-Aboriginal women are also accepted to participate. The original stated aims of the program at BTC were to:

- ensure continuity of programs, services and employment for its residents from custody until release
- support reintegration into the community
- provide appropriate programs and services aimed at engagement, skills and knowledge about relapse prevention and living without a substance dependency
- offer pre-release programs which give women access to community networks emphasising family support and responsibility.⁹⁸

BTC has a capacity to accommodate 16 women and at the time of the inspection on 4 October 2018 there were 11 residents, two of whom were Aboriginal.

5.2 Offender eligibility

Case management teams, services and programs staff and the Manager, Aboriginal Programs, Inmate Classification and Case Management are responsible for identifying and referring offenders to the Manager of BTC for assessment. Offenders can also request an eligibility assessment for placement at BTC.⁹⁹

Eligibility to participate in the BTC program requires that the offender:

- has been assessed as medium to high risk of reoffending
- has a history of substance misuse or dependence
- holds Category 1 or 2 security classification
- has between 4 and 18 months of sentence left to serve.
- has no outstanding court matters.¹⁰⁰

Once a placement at BTC is approved an order is then made for a transfer of the inmate from their correctional centre to Emu Plains Correctional Centre. BTC staff collect new residents from Emu Plains Correctional Centre.

5.3 Program

Structure of transitional placement

Case management and support at BTC is focused on facilitating connections between each resident and relevant service providers in the community, securing accommodation for release, strengthening living skills and providing pathways to employment.

96 Corrective Services NSW, *Bolwara Transitional Centre Management Plan* (August 2001) 1.

97 Information provided by Corrective Services NSW on 28 February 2019.

98 Corrective Services NSW, *Bolwara Transitional Centre Management Plan* (August 2001) 4.

99 Corrective Services NSW, *Offender Classification and Case Management Policy and Procedures Manual 26.18 Bolwara Transitional Centre* (Version 1.2, May 2016) 4.

100 Corrective Services NSW, *Offender Classification and Case Management Policy and Procedures Manual 26.18 Bolwara Transitional Centre* (Version 1.2, May 2016) 3.

A resident's first two weeks at BTC (Phase 1) comprise an induction and orientation. An information pack is provided to residents, which includes a reception checklist, a welcome booklet, conditions, rules, a contract and a number of forms for completion by the resident.¹⁰¹ At BTC residents wear their own clothing instead of prison greens. BTC has established an arrangement with a local community organisation to provide newly arrived residents with clothing until residents can make additional purchases.

Residents can find the less structured environment of the residential facility initially challenging. It is for this reason that the induction process is a crucial phase of BTC's program. The induction documentation is comprehensive but difficult for some women to navigate. Induction resources should be culturally specific and appropriate for Aboriginal residents. Written material should be produced in plain English and consideration needs to be given to making resources available in formats other than text to cater for varied literacy needs and preferences. Orientation meetings between staff and new residents should be staggered to ensure that information is available across several sessions.

The majority of women commence a transitional placement at BTC with a Category 2 security classification. Phase 2 of the program has a prescribed duration of four weeks, during which residents are required to progress from Category 2 to Category 1 security classification. The prescribed duration of Phase 2 is approximately four weeks. During Phase 2 residents are escorted on any external movements outside of the transitional centre but are increasingly afforded the opportunity to demonstrate their ability to access and use community services independently.¹⁰² Once a resident can travel independently and safely into the community, they progress to Category 1 security classification and Phase 3 of BTC's program. In Phase 3 residents are subject to electronic monitoring and are eligible to leave BTC unaccompanied to attend appointments in the community.¹⁰³

At the time of inspection five residents held Category 2 classifications and six residents held Category 1 classifications. The average time taken to progress from Category 2 to Category 1 security classification was eight weeks.¹⁰⁴ The inspection team heard from residents that there were limited activities available onsite at BTC to occupy them while their Category 1 security classification was pending. Category 2 classified residents are only permitted to leave BTC under staff escort and while several community trips are scheduled in Phases 1 and 2 at BTC, these are contingent on staffing availability. Aside from weekly access to Victims Services' approved counselling and a life skills session facilitated by a local community organisation, there are no programs available onsite at BTC. If residents commence at BTC with only three months of their custodial sentence remaining, and have to wait up to eight weeks to access the community independently, the maximum value of the transitional placement is not realised.

In Phase 3, residents can access employment in the community, and day and weekend leave to participate in other approved activities. BTC's system of behavioural rewards and incentives is built around access to this community leave. Compliance with case plan objectives is rewarded with allocation of increased access to leave. Behaviours that are inconsistent with case plan objectives are managed through reductions in social leave allocation.

Weekly resident excursions are a way to strengthen positive community relations at BTC within the resident group and between residents and staff. They are of particular value to women in Phases 1 and 2 of their transitional placement. At the time of inspection, in October 2018, the most recently organised excursion had been during NAIDOC week in July 2018. Staff acknowledged that the practice of weekend excursions had ceased in response to a security incident and had never been reinstated.

101 Forms include a program contract, property agreements, a property management protocol and property indemnity form, a health protocol, a financial protocol and a privacy notice.

102 Corrective Services NSW, *Bolwara Transitional Centre Management Plan* (August 2015) 17.

103 Corrective Services NSW, *Bolwara Transitional Centre Management Plan* (August 2015) 17.

104 Information obtained from CSNSW 28 February 2019.

The structure of a day is outlined below:

Time	Activity
6.15am	Residents wake up.
7.30am	Medications are issued to residents and Phase 3 residents collect their daily leave passes.
10.00am	Residents receiving OST are transported to the Nepean Hospital to receive methadone.
12.00pm	Lunch is provided.
6.00pm	Residents return to their houses for the evening.

BTC is explicitly mandated to offer transitional support to women who have experienced substance use and addiction issues. This is reflected in the high rate of access by residents to AOD programs in 2018. This is also reflected in the security measures adopted around drug testing. Targeted urinalysis is conducted and residents are also breathalysed when they return to BTC from any travel in the community. Sanctions for substance use are determined on a case by case basis.

The success of BTC relies heavily on its relationship with community-based service providers. In 2018 residents at BTC accessed programs spanning AOD treatment and addiction support, individual and group counselling, parenting programs, anger management, self-esteem and domestic violence support programs.¹⁰⁵ Because BTC relies almost exclusively on community-based organisations to deliver programs and services to residents during a transitional placement, residents must be afforded sufficient flexibility to attend. Some offerings, for example addiction support group meetings, are almost exclusively scheduled in the evenings and the flexibility to return later to BTC should be assessed on a case by case basis.¹⁰⁶

Education, Training and Employment

The inspection found residents at BTC had good access to education and training programs. In 2018, 11 residents completed a traffic controller course or a general construction induction card course. Several residents also accessed the Deadly Yakka Indigenous work-readiness program. Numerous TAFE NSW programs were also accessed, including work-readiness support from Mt Druitt's Aboriginal Education and Training Unit and the Certificate IV AOD qualification.¹⁰⁷

While employment is a focus of a transitional placement, at the time of inspection there was only one resident in external paid employment and two residents in volunteer positions. In February 2019 there were three residents in external paid employment, however none of these residents was Aboriginal.¹⁰⁸ An encouraging initiative, scheduled to commence in 2019 is the Aboriginal Women's Employment and Training Hub attached to Emu Plains Correctional Centre. This hub will provide a range of services to Aboriginal women from Emu Plains Correctional Centre and from BTC including:

- employment and work-readiness training
- linkages with community organisations
- intensive case management.

It is important that BTC review and enhance its own efforts to expand on and avoid duplication of the employment hub program.

105 Information obtained from CSNSW 28 February 2019.

106 Narcotics Anonymous meetings are regularly held in the evenings <<https://www.na.org.au/multi/sydney-west-area/>>.

107 Information obtained from CSNSW 28 February 2019.

108 Information obtained from CSNSW 28 February 2019.

At the time of the inspection two residents were being paid to clean the Amber Laurel Correctional Centre at a rate of \$1.87 per hour with a maximum remuneration of \$30 per week per resident. The inspection team was concerned that these women were being paid inmate wages. Paid employment in the course of a transitional placement should occur in the community and return community wages. Since the inspection BTC has sought to negotiate higher rates for residents who are engaged as cleaners at Amber Laurel Correctional Centre.

Program finances

Residents receive a weekly program allowance of \$22.80 and are not required to contribute money towards their transitional placement unless they are in paid employment. Women who are employed do not receive the program allowance and must contribute 25% of their earnings towards their food and accommodation. The cleaning jobs at Amber Laurel Correctional Centre are not considered employment for the purposes of calculating contributions from residents.

Each resident is also allocated \$50 weekly for online grocery shopping. This amounts to a weekly allocation of \$200 to each house and requires careful meal planning and budgeting by residents. The meal plans are checked off against the shopping list by staff to confirm quantities, costs and that the menu plan is balanced and healthy. Residents reported that the range of food available to purchase was a welcome change from the custodial setting. The planning, budgeting and preparation of balanced nutritional weekly meals is an important element of the transitional placement.

Program offering to Aboriginal women

In addition to its primary role of supporting women with substance use and addiction issues transition out of custody, BTC has an explicit mandate to support Aboriginal women:

[...]It provides intensive programs and services access that are appropriate to the needs of Aboriginal women in particular, and is mindful of the dignity of all participants. It aims to enable women to successfully take up their post-release responsibilities. [...] In line with the Aboriginal Offender Strategic Plan, particular care is taken to encourage the participation of Aboriginal & Torres Strait women in the BTC, through the establishment of a culturally safe environment and culturally appropriate implementation of programs and services.¹⁰⁹

The availability of pre-release support that is designed for, and responsive to, the needs of Aboriginal women is an important strategy in reducing the rate of post-release homelessness and interrupting the cycle of re-incarceration disproportionately experienced by Aboriginal women.¹¹⁰ During the inspection the following features of the transitional placement at BTC were identified as specifically directed to Aboriginal women:

- Monthly visits to BTC are made by a CSNSW Regional Aboriginal Programs Officer (RAPO) to offer support to women.
- Aboriginal women can access Marrin Weejali Aboriginal Corporation for AOD assessment, counselling, and referral to health services and drug treatment programs.
- Aboriginal women can apply to participate in a cultural working group to maintain the Bundian Way Story Walk through Yuin Country.¹¹¹

While acknowledging the positive impact of these services and programs and the potential impact of the forthcoming training and employment hub, the inspection found that the program at BTC lacked a clear focus on the needs and experience of Aboriginal women. Staff and residents identified that securing stable

109 Corrective Services NSW, *Bolwara Transitional Centre Management Plan* (August 2015) 3-4.

110 Eileen Baldry and Ruth McCausland, 'Mother Seeking Safe Home: Aboriginal Women Post-release' (2009) 21(2) *Current Issues in Criminal Justice* 292.

111 The Bundian Way work camps are one week in duration and are scheduled annually.

post-release accommodation was a key challenge with only a few reliable community service providers of referral assistance and transitional housing. CSNSW needs to prioritise building partnerships with community organisations that deliver transitional support, including accommodation services, specifically to meet the needs of Aboriginal women. Consultation with, and input from, peak Aboriginal organisations and services that are focused on the needs of Aboriginal women is required.

Recommendation 22: The Inspector recommends that CSNSW review the induction process at BTC to ensure it is culturally appropriate and accessible to residents.

Recommendation 23: The Inspector recommends that CSNSW increase access to community-based and onsite activities, programs and services for residents at BTC.

5.4 Access to health care

There are no current guidelines governing the provision of health services to BTC residents and there is no provision of health care services onsite at BTC. Instead residents are expected to identify and access relevant health care providers in the community themselves. If residents need emergency hospital care they are taken to Nepean Hospital.

Aboriginal residents can access the Greater Western Aboriginal Health Service for a range of primary health care services at no cost, including oral health services. On Mondays non-Aboriginal residents can access a community-based general practitioner at Emu Plains. Residents reported that the general practitioner was easy to access and that BTC staff were always available to provide escorts to Category 2 classified residents to attend medical appointments. Residents reported value in being able to exercise greater autonomy over their health care.

Discussions with JH&FMHN and BTC staff indicate some confusion exists around the scope of service provision by JH&FMHN to residents. Access to dental services for non-Aboriginal residents was identified as a particular issue by residents, staff and the Official Visitor.¹¹² Residents are expected to service the cost of their own oral health care but the cost of accessing dental services in the community is prohibitive if residents are not receiving income from employment or financial support from family. While residents can access a Medicare card, they are ineligible for a Health Care Concession Card under which they could access subsidised dental services and prescription medicines. The inspection team heard that BTC residents historically accessed JH&FMHN services at Emu Plains Correctional Centre via the dental hotline, but that recently this service has been refused because they are not inmates of that correctional centre.¹¹³ CSNSW and JH&FMHN need to implement an arrangement whereby access to health care for women at BTC is readily available and is not contingent upon securing external employment or another source of financial support.

5.5 Physical environment

BTC occupies a site adjacent to the Emu Plains Correctional Centre complex and offers accommodation in four single-level houses, two of which are wheelchair accessible.

¹¹² *Crimes (Administration of Sentences) Act 1999* s 228. Official Visitors are appointed by the Minister to visit correctional centres (including transitional centres) and provide an independent complaint resolution service to inmates.

¹¹³ Information provided by Corrective Services NSW on 28 February 2019.



The view from one house to another



BTC maintains a vegetable garden and chickens

Each house has four single bedrooms, and shared laundry, bathroom and kitchen facilities. The living areas of each house are air-conditioned. Accommodation was well designed, with facilities in good condition and working order. Residents reported that repairs and maintenance issues are resolved promptly.



Each house has a shared laundry and bathroom

Each bedroom contains a single bed, wardrobe, desk, chair and small bookcase. Residents are permitted to keep electrical items in their rooms, including televisions brought from secure custodial settings. For those residents who do not own a CSNSW-issued television, BTC hires them at a cost of \$5 per week.



Each house has a common living area and kitchen with individual bedrooms

The area surrounding the houses comprises manicured lawns, a vegetable garden, several fruit trees and a chicken coop, all of which are maintained by residents. These tasks form part of the routine cleaning and maintenance that is distributed amongst residents according to a weekly roster.

There is a small, enclosed space adjacent to one house which accommodates some exercise equipment and at the time of the inspection a resident who held fitness qualifications was running training sessions for other residents.

The multipurpose building accommodates staff offices and a staff kitchen oriented around a multipurpose space where residents gather for medication or for morning discussion. Resources that enable a resident to take more responsibility for their own reintegration program, such as internet-enabled computers, would be of great value to residents. In addition to being able to undertake accommodation searches, employment searching, planning weekly menus and transport routes, they may offer opportunities to expand the activities available to Category 1 security classified residents who are not permitted to leave BTC.

Recommendation 24: The Inspector recommends that CSNSW provide working, internet-enabled computers at BTC for use by residents.

5.6 Staffing and culture

The current staffing profile at BTC comprises a manager, administration officer, six permanent transitional centre workers and eight casual transitional centre workers.

BTC did not have any Aboriginal identified positions in its staffing profile. The absence of Aboriginal transitional centre workers in a transitional program aiming to be responsive and sensitive to the needs of Aboriginal women exiting custody is perplexing. Aboriginal staff members can bring valuable knowledge and community links to BTC, supporting the objectives of a transitional placement designed to support Aboriginal women from custody into the community.

The interactions between staff and residents were observed to be generally positive with residents encouraged to address staff by their first names. The case management and support provided by transitional centre workers would be further enhanced by providing tailored training to staff. Presently the only mandatory requirements attached to the role of transitional centre worker are a first aid certificate, a Working with Children check and completion of the online security awareness module and CSNSW induction. While the current manager has required her staff to undertake a number of relevant training modules offered online and in-person by Brush Farm Corrective Services Academy, these are not required by the transitional centre worker position.

It is concerning that a transitional centre worker who is expected to exercise several of the same functions as a correctional officer, such as strip searching and the use of force, is not required to undertake a program of structured training. Specialist skills and knowledge of gender-responsive case management, motivational interactions, Aboriginal cultural awareness, AOD issues, and trauma-informed practice are also relevant to the work of transitional centre workers at BTC and would enhance their contribution to the transitional program. It is also necessary for transitional centre workers to have delegated authority to exercise certain powers of correctional officers.

Recommendation 25: The Inspector recommends that CSNSW consider establishing a funded visiting Elder position or positions at BTC.

Recommendation 26: The Inspector recommends that CSNSW prioritise the recruitment and retention of Aboriginal staff members and consider establishing identified positions at BTC.

6 Parramatta Transitional Centre

6.1 Overview

PTC was established in 1996 following the 1994 Women's Action Plan recommendation to pilot a community-based transitional centre for minimum security female inmates in the Sydney metropolitan area.¹¹⁴

PTC's function is to support women in their transition from custody to the community during the pre-release phase of their custodial sentence. Its focus is 'empowerment, deinstitutionalisation and community reintegration.'¹¹⁵ PTC can accommodate up to 20 women. Up to five of these women can reside with their children. At the time of the inspection on 5 October 2018 there were 13 residents at PTC, two of whom had children residing with them.

The duration of the program is between six and 18 months. The average duration of placement during the period 1 January 2017–30 December 2018 was 12 months. Thirty inmates were received into placements at PTC between 1 January 2017 and 30 December 2018. In the same period 27 residents successfully completed their placements and one resident's placement was terminated.¹¹⁶ A transitional placement is completed once a resident's sentence expires or they are granted parole.

6.2 Offender eligibility

Case management teams and services and programs staff are responsible for identifying and referring offenders for assessment by the PTC Manager. Offenders can also request an assessment of their eligibility for placement at PTC.

Eligibility is assessed against criteria set out in CSNSW policy and procedure.¹¹⁷ An offender must:

- hold a Category 1 security classification
- not have outstanding court matters
- have at least six, and up to 18, months of their sentence left to serve (preference is given to women serving lengthy custodial sentences)
- not test positive for illicit drug or alcohol use and have a record of satisfactory institutional behaviour for the previous three-month period
- be eligible for unescorted day leave programs
- not be receiving opiate substitution treatment
- be suitable and verified for a mothers and children program.

If the offender is designated as a 'serious offender' additional criteria apply and their placement at PTC must be approved by the Serious Offenders Review Council (SORC).¹¹⁸

114 Corrective Services NSW, *The Women's Action Plan: A 3 Year Strategy for Female Inmates in NSW Correctional Facilities* (June 1994) 5 <<http://csa.intersearch.com.au/csajspui/bitstream/10627/633/1/Womens%20Action%20Plan%20June1994.pdf>>.

115 Corrective Services NSW, *Offender Classification and Case Management Policy and Procedures Manual 26.19 Parramatta Transitional Centre* (Version 1.1, December 2013) 2.

116 Information provided by Corrective Services NSW, 11 March 2019.

117 Corrective Services NSW, *Offender Classification and Case Management Policy and Procedures Manual 26.19 Parramatta Transitional Centre* (Version 1.1, December 2013) 2-3.

118 A serious offender is sentenced to at least 12 years in custody. A full definition of serious offender is located in the *Crimes (Administration of Sentences) Act 1999* s 3(1).

6.3 Program

Program structure

Residents attend fortnightly meetings with a case manager to identify and prioritise their goals for the transitional placement and post-release. Once established, the focus of case management at PTC is to support a resident to engage community-based programs, services and activities in line with these goals.

Residents consistently reported that PTC employed a flexible and individualised approach to case management and identified this was a strength of PTC's program. Induction to the program is delivered over a minimum of two weeks and initial orientation activities included escorted trips into the community. One resident recounted the adjustments that staff had made to her induction and orientation to account for the significant anxiety she experienced in adjusting to life in a community setting after a long period in secure custody.

Residents depart PTC from 4.45am to attend approved work and appointments in the community. Residents must be back in their houses at 9pm in winter and 10pm in summer. The length of the day is a constructive feature of PTC's regime. It enables flexibility for residents who are working or volunteering during the day to attend other community-based activities in the afternoon or evening in accordance with their case plan objectives.

The inspection team observed that several residents were accessing service providers in the areas they planned to live after release. Linking residents to their intended communities is a positive initiative that offers residents continuity and consistency after completion of the transitional placement at PTC.

House 2 accommodates residents with children. At the time of the inspection in October 2018 two residents had children residing with them at PTC in varied arrangements. A third resident was due to arrive at PTC the following week with two children. Weekend placements can be facilitated for working residents who have children below school age and shared caring arrangements in place. Alternatively, full-time care is facilitated where residents are working or volunteering during the week and can arrange child care through family or private child care options.

A resident must be employed, volunteering or completing education to be eligible for social leave. Access to social leave is staggered and allocations are determined in relation to the progress made by a resident towards their case plan objectives. A resident can access day leave in the final 12 months of their sentence. Once a resident has completed six day leave excursions successfully and has reached the final four months of their sentence, they may be eligible for weekend leave.

In addition to accessing social leave in the community, residents are encouraged to welcome visitors at PTC. Three-hour visit sessions are available on Saturdays and Sundays between 9.15am and 12.15pm or between 1.15pm and 4.15pm. The visits space is residential in character and the length of visits is a significant and positive departure from the visits process in secure custody. Some residents reflected that the visits arrangements at PTC had enabled stronger family and social connections since commencing their placement at PTC.



The visits area is outdoors but still protected from the elements

Securing suitable post-release accommodation is a priority and a challenge for residents. Advocacy by PTC staff and community service providers facilitate good access to post-release housing for residents who do not have access to private accommodation.

Education, training and employment

The success of a transitional placement at PTC relies heavily on its established network of local community service providers. In 2018 residents accessed a range of programs spanning individual and group counselling, parenting, domestic violence, work-readiness, addiction and financial literacy. PTC has developed a strong relationship with a local church organisation.¹¹⁹ Residents also use the local amenities for recreational and fitness activities. Many of the residents at PTC were engaged in education. During the 2017–18 period 12 residents enrolled in part-time or full-time educational programs offered by TAFE NSW, universities and local community colleges.

Residents receive considerable support and assistance from staff to seek employment. At the time of inspection eight out of 13 residents were in paid employment, four of whom were employed by Corrective Services Industries (CSI) and receiving community wages. CSNSW needs to be mindful of the reliance on CSI for employment. It is acknowledged that CSI plays an important role in providing employment to inmates while they are in custody and for those who may face barriers to securing employment after release. However, the capacity for an inmate to remain employed by CSI after they have left secure custody presents a risk that the identification and pursuit of alternative community-based employment is disincentivised. Employment that is external to CSNSW presents significant value during a transitional placement. This is because it serves PTC's aim of de-institutionalisation and provides greater post-release employment opportunities for residents.¹²⁰

As residents of transitional centres are still in custody, they do not qualify for Centrelink's employment benefits and so are deemed ineligible for the Commonwealth funded job network provider services. Staff identified this was a barrier to establishing employment pathways for residents. Engaging the services of the EEMG's work release program may be an opportunity to enhance the pathways to external employment for PTC residents.

¹¹⁹ In the 2017- 2018 period this church organisation delivered recreational and art activities in addition to onsite stress management, assertive communication and financial management courses to residents at PTC.

¹²⁰ Corrective Services Industries does not issue referee reports for employees in custody, which can disadvantage an applicant in competition for a job in the community.

Program finances

If residents are neither employed nor engaged in education they receive a weekly program allowance of \$18.73. If residents are engaged in education but not employed, they receive a weekly program allowance of \$23. Residents in paid employment contribute 15% of their earnings towards the cost of their placement at PTC. Residents are allocated \$53 per week for food with an additional allocation of \$20 per week for a child residing at PTC. Residents who are primary carers for children residing with them at PTC are also eligible for a parenting payment from Centrelink.

6.4 Access to health care

There are no current guidelines governing the provision of health services to PTC residents and there is no provision of health services onsite at PTC. Instead residents are able to access relevant health care providers in the community themselves. If residents need emergency hospital care they are taken to Westmead Hospital by ambulance.¹²¹

Residents are responsible for scheduling their own health appointments and accessing a local bulk-billing general practice. Resident prescriptions are dispensed by Long Bay Pharmacy or approval is given to attend a community pharmacy. Oral health care is also accessed in the community. If residents are unable to afford the cost of services and are eligible for public dental service, they are waitlisted at the Westmead Centre for Oral Health. It remains unclear whether PTC residents would qualify for NSW public oral health services because they are ineligible for a Health Care Concession Card on account of their status as inmates in custody.

Residents at PTC are only permitted to reside there on a temporary absence from their correctional centre of classification and do so as an inmate during their custodial sentence. CSNSW and JH&FMHN need to implement an arrangement whereby access to health care for women at PTC is readily available and is not contingent upon securing external employment or another source of financial support.

6.5 Physical environment

PTC occupies a site in North Parramatta. The location of PTC is an asset to the transitional program. Residents can access local community services by foot or using regular bus services. Train services running from Parramatta to the Sydney CBD are also accessible by bus or on foot. The accessibility of PTC to surrounding areas enables residents to strengthen their social and family support networks.

PTC comprises two accommodation houses and an administration building. The houses were built in 1902 to provide residences for the Governor and Deputy Governor of the decommissioned 'Parramatta Gaol'. The two accommodation houses are designated 'High heritage significance' and listed on the NSW State Heritage Register.¹²² While many residents reflected positively on their character-filled accommodation, their design does not permit each resident to occupy a single bedroom with a door. Each resident had access to a bed and clothes storage. While the majority of rooms are occupied by a single resident, the age and design of the buildings required dual occupancy in some rooms and some bedroom spaces were also thoroughfares.

¹²¹ *Crimes (Administration of Sentences) Act 1999* s 24.

¹²² NSW Office of Environment and Heritage, 'Parramatta Correctional Centre', *State Heritage Register* (Web Page) <<https://www.environment.nsw.gov.au/heritageapp/ViewHeritageItemDetails.aspx?ID=5000657>>.



Single bedroom



Shared bedroom and thoroughfare



Bedroom nook

One of the houses is designated for residents with children. The layout of this house and furniture had recently been reviewed to ensure furniture allocated to residents was safe for children. Bedrooms accommodating residents with their children are significantly larger and a downstairs room had been painted with plans for its conversion to a children's playroom. There is a playground outside under shade cloth which is in need of upgrade. The ground was uneven and the artificial turf was worn through in several places. CSNSW has confirmed that a Work Health and Safety audit was conducted in October 2018 and those recommendations have all been implemented. A Fire Safety inspection was also conducted in July 2019 and implementation of those recommendations are currently underway.¹²³



The playground area was in need of upgrade



Bedrooms for residents with children are larger

The heritage status of the premises imposes restrictions on the work that can be carried out to improve the infrastructure. At the time of the inspection, a number of windows had been damaged by storms and cost-prohibitive repairs remained outstanding. Television reception was reported to be limited by the age of aerial infrastructure in both houses.

Notwithstanding the constraints of operating a transitional centre on a heritage site the inspection team observed both houses were well cared for by residents. Each house contains a shared laundry, kitchen, bathrooms and lounge room. While the kitchens and bathrooms had been identified as requiring upgrades, all of these facilities were in working order. The inspection team received positive accounts from residents about the work they had completed with staff to paint the shared living spaces and purchase new furniture.

¹²³ Information provided by Corrective Services NSW on 15 November 2019.



Bathroom facilities are shared



The kitchens were small but in working order

The administration building operates as a hub connecting the two accommodation houses. It contains an office space, an open plan officer station and a program space, which houses a conference table and a number of computer workstations with computers. This space was used for workshops and activities but at the time of the inspection the computer stations were not in working order. Working computers with restricted and monitored access to the internet have since been installed at PTC.



Multipurpose space in the administration building

The availability of internet-enabled computers at PTC for activities that support a resident's case plan objectives such as education programs, job seeking or improving digital literacy is wholly consistent with the aims of a transitional placement and represents significant value to residents.

Recommendation 27: The Inspector recommends that CSNSW conduct a Work Health and Safety audit of the PTC premises.

Recommendation 28: The Inspector recommends that CSNSW is allocated sufficient budget for minor capital works at PTC to account for the additional costs of repairs and upgrades associated with the heritage site.

Recommendation 29: The Inspector recommends that CSNSW provide working, internet-enabled computers at PTC for use by residents.

6.6 Staffing and culture

The current staffing profile at PTC comprises a manager, an administration officer, six permanent transitional centre workers and six casual transitional centre workers.

At 11 March 2019 PTC had four vacant transitional centre worker positions and this was presenting challenges for the operation of the program. It is unsurprising that residents reported that staff were very busy. The capacity to carry out searches relies on the rostering of sufficient staff and this was a challenge for PTC at the time of inspection. It is important that PTC is staffed adequately to enable the exercise of security protocols in alignment with daily activities and schedule of residents.

The case management and support provided by transitional centre workers would be enhanced by providing tailored training to staff. Presently the only mandatory requirements attached to the role of transitional centre worker are a first aid certificate, a Working with Children check and completion of the online security awareness module and CSNSW induction program. PTC staff are expected to exercise several of the powers that correctional officers exercise in correctional centres. Urinalysis, breath analysis and searches are undertaken by transitional centre workers. Residents' bags are searched upon their return to the PTC from external leave, rooms are searched and strip searches are conducted. It is concerning that transitional centre workers are not required to undertake a program of structured training. Specialist skills and knowledge of gender-responsive case management, motivational interactions, child safe practice, and trauma-informed practice are also relevant to the work of transitional centre workers at PTC and would enhance their contribution to the transitional program. It is also necessary for transitional centre workers to have delegated authority to exercise certain powers of correctional officers.

Notwithstanding these challenges the social climate at PTC was very positive and there were consistent accounts of staff being approachable, respectful and responsive to residents' needs and circumstances. Staff and residents are addressed on a first name basis and staff members do not wear CSNSW uniforms at PTC. Management and staff members are to be commended for having contributed to a positive social environment at PTC, which is an important enabling element in its mission to empower, deinstitutionalise and reintegrate residents into the community.

7 Miruma Residential Program

7.1 Overview

Miruma is a residential facility which provides a diversionary program for women with coexisting mental health and AOD issues. It was opened in 2011 within the grounds of the Cessnock Correctional Complex. It is operated by Community Corrections, Hunter District and can accommodate 11 women subject to community-based orders.¹²⁴ The program offers women intensive support and supervision to address their offending behaviour and to be able to live independently and lawfully in the community.

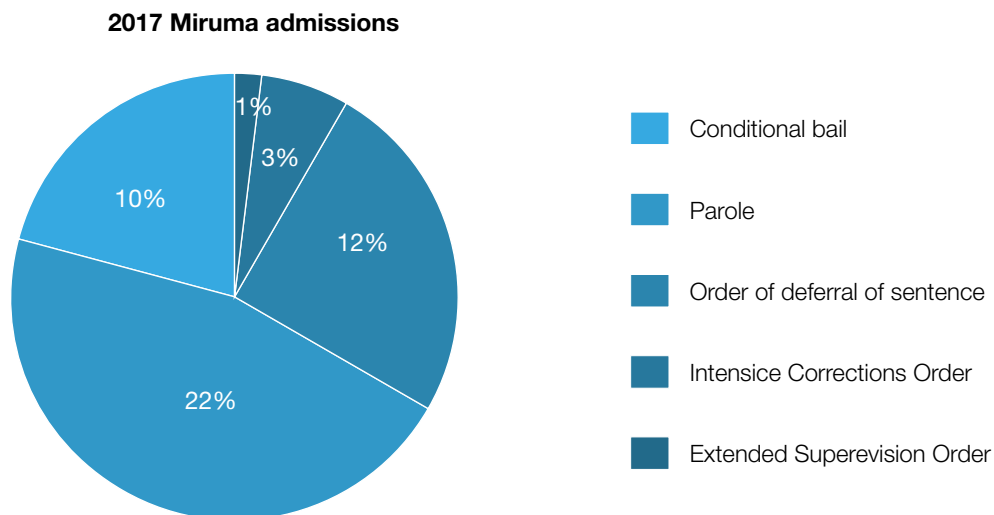
The program duration is designed to be between three and six months but is determined by the needs of each resident. The average time to completion is 14–18 weeks.¹²⁵ At the time of the inspection Miruma was operating at full capacity with 11 women in residence. Miruma's records indicated the rate of successful completion in 2017 was 69%.¹²⁶

7.2 Offender eligibility

Eligible female offenders may be subject to the following community-based orders:

- Order of deferral of sentence for rehabilitation, participation in an intervention program or other purposes¹²⁷
- Intensive correction orders¹²⁸
- Extended supervision order¹²⁹
- Parole
- Conditional bail¹³⁰

Admissions to the Miruma program in 2017 and 2018 by type of order are set out below:¹³¹



124 Corrective Services NSW, 'Miruma', *Programs for offenders* (Web Page) <<https://www.correctiveservices.justice.nsw.gov.au/Pages/CorrectiveServices/programs/women-offenders/miruma.aspx>>.

125 Information provided by Corrective Services NSW on 5 February 2019.

126 Data reflecting 2018 placements were unavailable because not all residents who were admitted to Miruma in 2018 had completed their placements.

127 *Crimes (Sentencing Procedure) Act 1999* s 11.

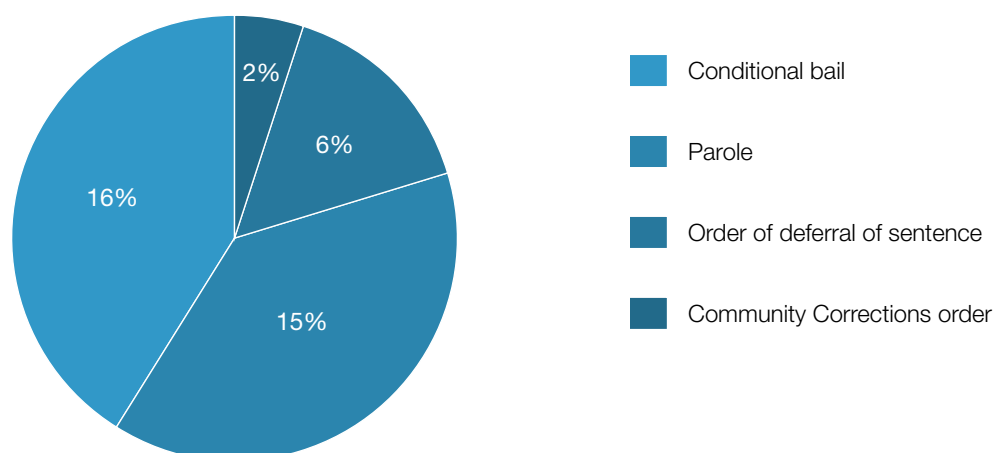
128 *Crimes (Sentencing Procedure) Act 1999* s 7.

129 *Crimes (High Risk Offenders) Act 2006* s 11.

130 *Bail Act 2013* s 28.

131 Information provided by Corrective Services NSW on 5 February 2019.

2018 Miruma admissions



The total number of offenders admitted to the Miruma program decreased from 48 in 2017, to 39 in 2018. Accounting for this overall decrease, admissions by orders of deferral of sentence were significantly lower and the admissions by order of conditional bail were significantly increased.

While there are no offence-specific exclusions from participating in the program, offender suitability is assessed in accordance with the following criteria:

- The offender has AOD and mental health issues but is not detoxing or using illicit substances.
- The offender has the capacity to live in the community.
- The offender is not suffering from an acute mental illness (i.e. active psychosis) and is compliant with any plan generated through a mental health intervention.
- The offender is not experiencing homicidal thoughts, actively self-harming or is suicidal.¹³²

Placement prioritisation is determined by:

- the needs of individual offenders
- release date in respect of parolees
- risk assessment
- preference for a diverse cohort of residents.¹³³

Miruma has a capacity for 11 residents and at the time of the inspection on 2 October 2018, there were 17 women waitlisted for placement at Miruma. The waiting time for a place in the Miruma program was at least four months. In this period of time an offender's willingness and readiness to participate in the program at Miruma can change.

Recommendation 30: The Inspector recommends that CSNSW consider expanding the capacity of the Miruma program to address demand.

¹³² Corrective Services NSW, *Miruma Standard Operating Procedure 1.0 Assessing Offenders for Placement in Biyani/Miruma* (undated).

¹³³ A group of residents with varied needs and characteristics and subject to different statutory orders was described by staff as enriching the community and reducing risk.

7.3 Program

The program offers an intensive case management model in which staff members assist a resident to identify their needs and goals and develop individualised strategies to address these in the course of the program and beyond.

Upon induction to Miruma, a short term supply of toiletries, sanitary products and clothing is provided to a new resident. Assessment interviews are conducted over the first two days to inform ongoing case work. An informal peer resident is assigned to support and assist new residents and an accommodation support worker is also assigned to coordinate case management for each new resident. Throughout the program there are a number of regular forums in which the allocated accommodation support worker or an assistant accommodation support worker meet with the resident to review progress.¹³⁴

The first few weeks of the program are used to establish a resident's resettlement plan, through consultation between a resident and their allocated accommodation support worker. It is a record of a resident's goals for the program, and identifies the local service providers that will be able to assist the resident in achieving those goals.¹³⁵

A key priority at Miruma is the identification and securing of suitable accommodation for residents to move to after completing the program. Housing was identified as a consistent challenge for residents at Miruma. However, the strong linkages between the program, relevant community housing providers and Housing and Homelessness NSW reportedly ensured that all residents who successfully completed the program were released into suitable accommodation.

A Memorandum of Understanding was developed with Centrelink to exempt residents who receive a Newstart allowance from having to complete work search activities while participating in the Miruma program. This enables residents to focus on improving living skills, addressing their offending behaviour, securing appropriate accommodation, and reducing any financial debts through Work and Development Orders.¹³⁶ Residents did not report employment to be a priority during their placement at Miruma. At the time of inspection there were no residents in paid employment.

The cost of the program to a resident is \$75 per week, which includes the cost of groceries for meals. These payments are automatically deducted through Centrepay, Centrelink's deduction service for paying bills and expenses.¹³⁷ In addition to the ongoing weekly cost of \$75 there is a \$270 fee payable on entry to the program which covers:

- \$225 3-week program fee
- \$20 medication deposit (refundable upon discharge)
- \$20 medication fee
- \$5 key deposit (refundable upon discharge).

Residents are required to complete their own chores and shopping each Saturday. Sundays are designated for an excursion supervised by staff. Programs are offered mornings and afternoons on weekdays, with free time generally allocated between 11am and 1pm.

¹³⁴ Corrective Services NSW, *Miruma Standard Operating Procedure 1.2 Case Management and Case Review* (undated).

¹³⁵ Corrective Services NSW, *Miruma Standard Operating Procedure 1.1 Reception and Admission of New Residents* (undated).

¹³⁶ A Work and Development Order may be issued to eligible people by Revenue NSW to reduce debt associated with fines through engaging in unpaid work or approved courses and treatment. <<https://www.revenue.nsw.gov.au/fines-and-fees/cant-pay-your-debt>>.

¹³⁷ Australian Government Department of Human Services, 'Centrepay', *Centrelink* (Web Page). <<https://www.humanservices.gov.au/individuals/services/centrelink/centrepay>>.

At the time of the inspection the weekly schedule of activities was as follows:

	Monday ¹³⁸	Tuesday	Wednesday	Thursday	Friday
Morning	<ul style="list-style-type: none"> - Individual counselling services administered onsite by Victims Services - Onsite delivery of the Positive Lifestyle Program¹³⁹ - A mental health worker is available onsite 		Drug Court program	SMART Recovery 9.00am–11.00am ¹⁴⁰	Apprehended Domestic Violence Orders information session 9.00am–11am
Afternoon	TAFE Outreach Program 2.00pm–5.00pm	Discussion group (addiction) 2.00pm–3.00pm ¹⁴¹	Brightside 11.30am–2.00pm ¹⁴²	EQUIPS Addictions 1.00pm–3.00pm ¹⁴³	Brightside 11.30am–2.00pm

In 2018 Miruma residents accessed a range of programs and services including:

- education outreach
- parenting programs
- wellbeing (nutrition, health, fitness, mindfulness)
- legal and financial counselling
- EQUIPS behavioural change programs delivered by CSNSW
- addiction and recovery support groups.

The range of available services and programs at Miruma reflects the concerted efforts by the manager to establish a strong network of local community service providers with whom Miruma residents can engage. Some further consideration needs to be given to mitigate the issue of service and program gaps during the Christmas and New Year period when many community organisations close temporarily or reduce their offerings. This period may also be a challenging time for residents who are unable to connect with children and family. In a short term program, this disadvantages those whose program extends over this period and presents an elevated risk of terminations or discontinuations. In the period 12 December 2018–3 January 2019 four residents were discharged from the program – one voluntary discharge and three residency terminations.

138 Monday was a public holiday during the week of the inspection but ICS obtained a further weekly schedule on 5 February 2019, from which Monday's activities were reproduced.

139 The Positive Lifestyle Program is an eight-module course focused on increasing self-awareness and understanding that is delivered in one-on-one sessions by the Salvation Army.

140 SMART (Self Management and Recovery Training) Recovery is a free addiction support group program <<https://smartrecoveryaustralia.com.au/>>.

141 A retired male addiction health worker volunteers at Miruma on a weekly basis.

142 Brightside is a YMCA program that promotes exercise as a recovery mechanism for people with a mental illness <<https://www.ymcansw.org.au/community-services/mental-health/how-brightside-works/>>.

143 The EQUIPS (Explore, Question, Understand, Investigate, Practice and Succeed) suite of programs are behavioural change programs for offenders assessed as having a medium to high risk of reoffending. EQUIPS Addiction targets addictive behaviours.

Access to independent community leave at Miruma is incentivised in stages. Initially, residents are only permitted to leave the site if accompanied by a staff member. After three weeks, residents are permitted to leave without staff escort for two hours. This is reviewed weekly with incremental increases available to overnight leave, subject to program compliance.¹⁴⁴ This incentive program is used to support women to remain connected with their families and in particular, their children. No visitors are permitted onsite at Miruma so access to community leave to facilitate contact with family and friends is a key component of the program. Sanctions for non-compliance with the program rules are usually imposed in the form of a reduced weekly leave allowance.

Another innovative feature of Miruma's program to support residents to maintain strong family relationships is by allowing limited access to mobile phones. Residents' mobile phones are otherwise prohibited and are retained by Miruma staff.

In the final month of the program, the intensity of structured supervision and case management by a resident's allocated community corrections officer increases and this will continue once the resident has left Miruma. Prior to completing the Miruma program, an Exit and Throughcare Plan is prepared by staff in consultation with the resident.¹⁴⁵ It is intended to be a resource for the resident to use in their local community and a sample reviewed included details of:

- further reporting requirements and contact information
- primary health care providers
- AOD support services
- mental health support services
- government service identifiers (Centrelink reference, Medicare number, student number, housing identification number)
- employment services.

Miruma offers continuing support to residents for three months after placement completion, during which time staff maintain weekly contact with residents by telephone. After this residents can still contact Miruma at any time via a reverse charges telephone call.

Recommendation 31: The Inspector recommends that CSNSW coordinate year-round access to programs and activities for residents at Miruma.

¹⁴⁴ Residents subject to bail orders are excluded from overnight leave on account of their bail conditions but can access a full day of community leave.

¹⁴⁵ Corrective Services NSW, *Miruma Local Order Throughcare Order Number 2.1.1* (19 July 2012).

7.4 Access to health care

Access to a general practitioner or dentist is facilitated in the local community and residents are often assisted with transport to these appointments. Residents also have access to methadone under the opioid substitution treatment (OST) program at Cessnock District Health Service and are transported daily by Miruma staff. Prescribed medications are dispensed by the local community pharmacy to residents using dose administration aids.¹⁴⁶ These medication packs are then retained securely by Miruma staff and residents attend Miruma's office to receive the individual dosages from the packs according to prescriptions. There were no concerns raised about access to these health care services.

In addition to accessing health care in the community two specialist services are available onsite to Miruma residents. A psychologist and a mental health worker visit weekly and are both available for individual counselling sessions. Miruma is a high intensity diversionary program targeting women who have substance use disorders. The available substance use treatments are weekly discussion groups facilitated by a volunteer, the EQUIPS Addiction program, and community-based addiction support groups. The availability of an AOD clinician to conduct individual counselling would also be of great benefit in supporting residents to tailor substance use treatment and recovery plans to address their individual needs.

Recommendation 32: The Inspector recommends that CSNSW facilitate access at Miruma to a community-based AOD clinician.

7.5 Physical environment

Despite its location within the Cessnock Correctional Complex, Miruma's physical infrastructure is residential in character. There is one administration house and four accommodation houses, three of which have three bedrooms and one of which has two bedrooms. All houses are air-conditioned and each bedroom has a wardrobe, desk, single bed and window. Each resident is issued a key to her allocated bedroom and the houses are locked overnight by staff for security.

Each house has a shared bathroom, laundry, lounge room with television, and kitchen with electric cooktop and oven facilities. The accommodation was in good condition and working order with accounts from residents and staff that maintenance issues are addressed promptly.



Common living and dining area



Kitchen

Residents are required to prepare their own meals and the kitchen facilities appeared clean and functional. Residents are not permitted to have private televisions or DVD players in their rooms and instead are encouraged to negotiate access to the shared facilities in each house.

During the inspection, staff and residents identified that the removal of a large grove of trees had removed a natural barrier between the correctional centre infrastructure and Miruma. This vegetation was removed to

¹⁴⁶ Dose administration aids are commonly referred to as medication packs. They are manually packed, foil- sealed seven-day packs of medication to assist a patient to manage multiple medications.

facilitate the expansion of correctional centre infrastructure. Planting out the backyards would provide more shade and privacy, and encourage greater use of these spaces. Considerable scope exists in these yards for health and wellbeing activities including growing food. Consultation with residents may identify further ideas for increasing the use of these spaces in line with Miruma's objectives.



The yards attached to each house were expansive but underutilised

The administration house has one interview room but this is used by administration staff three days per week. This is because the administration house does not have sufficient desk space or computers to accommodate all staff during a day shift.

At the time of inspection the houses were at full capacity. Staff suggested converting one of the garage spaces into an interview space for residents. Unfortunately the minor works proposal that was submitted for the garage conversion was unsuccessful in the previous financial year.¹⁴⁷ Reconfiguration of the garage would increase Miruma's capacity to accommodate:

- interviews by staff of residents
- meetings between residents and their legal representative
- individual counselling
- office space for any visitors.

Recommendation 33: The Inspector recommends that CSNSW maximise the use of existing infrastructure and outdoor spaces on the Miruma site to better serve the function of the program.

¹⁴⁷ Information provided by Corrective Services NSW on 15 November 2019.

7.6 Staffing and culture

Miruma has a staffing profile that reflects its focus on case management. In addition to the role of manager there are accommodation support workers and assistant accommodation support workers. The program also has a part-time administrative assistant. A range of mandatory and optional training modules are available to Miruma staff. These are delivered either as part of a 3-week package at Brush Farm Corrective Services Academy in Sydney or as a range of individual modules.¹⁴⁸

The range of available modules is outlined in the following table:

Mandatory (for completion within 12 months of commencement)	Recommended (optional)
Mental health first aid	Motivational interactions
First aid	Maintain professional boundaries
Working with AOD offenders	Group work facilitation
Suicide prevention	Offered (optional)
Communicable diseases	Working with culture and diversity
Security awareness	Disability awareness
Radicalisation & extremism awareness program	Trauma-informed practice
Business continuity planning awareness	Resilience

Weekly house meetings were characterised by residents as a forum in which they were listened to and their input was taken seriously. Residents described staff as ‘helpful’, ‘flexible’, and ‘supportive’.

The commitment to continuous improvement and the delivery of a program that is relevant and responsive to residents is evident. An example of good practice observed was the administering of an optional exit questionnaire to residents. Residents are asked to provide their views about their experience in the program, their preferences, and their perceptions of strengths and potential improvements. A sample of questionnaires reviewed by the inspection team identified that residents consistently rated their experience at Miruma positively. This explicit focus on the experience of residents as a primary measure of success, and openness to feedback, is reflective of the resident-focused culture at Miruma.

¹⁴⁸ Information provided by Corrective Services NSW on 25 March 2019.

8 Balund-a Residential Program

8.1 Overview

Balund-a is a residential diversionary program located in the far north coast region of NSW in the Bundjalung Nation. The 534 hectare property is 25km south of Tabulam and 80km south west of Casino. The Bundjalung name 'Bugilmah Burube Wullinje Balund-a' roughly translates as 'be good now you have a second chance down by the river'.¹⁴⁹

The program is primarily designed for participation by Aboriginal men but it is also open to non-Aboriginal men. The program aims to:

- reduce reoffending and enhance skills in a culturally supportive environment
- provide a range of programs to address offending behaviour
- increase educational and vocational skills
- use the property as a resource to support enterprises and activities for residents
- recognise and restore cultural links between residents and their land.¹⁵⁰

Balund-a's infrastructure was originally designed to be a 75 bed minimum security correctional centre, but was repurposed as a residential diversionary program for Aboriginal men and women before limiting its intake to men in 2012. Balund-a has 75 beds but a current operational capacity of only 40. At the time of inspection Balund-a had 34 residents.

The following table sets out the participation and completion rates at Balund-a in 2017 and 2018:

	Referrals received	Admission to program	Program completion	Program termination
2017	203	124	38 (25 Aboriginal residents)	94
2018	243	107	29 (20 Aboriginal residents)	88

Admission of Aboriginal offenders to the program was 69% of the total admission in 2017 and 77% in 2018. The duration of the Balund-a program is at least six months. In 2018 the average length of stay was 66 days for Aboriginal residents and 74 days for non-Aboriginal residents, reflecting a concerning low rate of program completion.¹⁵¹ The majority of program terminations are initiated by residents. The remaining terminations by CSNSW were linked to use of drugs and alcohol by residents, assaults on other residents, threats to staff, and non-compliance with intensive supervision agreement sanctions.¹⁵²

8.2 Offender eligibility

The following criteria must be satisfied for eligibility to participate in the Balund-a program. An offender must:

- be male and at least 18 years of age
- not be dependent on AOD and not in receipt of OST
- not pose a risk to himself or others

149 Corrective Services NSW, 'Balund-a Program Overview' (Balund-a Referral and Information Pack, Community Corrections, undated).

150 Corrective Services NSW, 'Balund-a Program Overview' (Balund-a Referral and Information Pack, Community Corrections, undated).

151 Information provided by Corrective Services NSW on 22 February 2019.

152 Information provided by Corrective Services NSW on 22 February 2019.

- not have a current or historical sexual or serious offence history.¹⁵³

Eligible male offenders may be subject to a community-based order currently including:

- Order of deferral of sentence for rehabilitation, participation in an intervention program or other purposes¹⁵⁴
- Intensive Corrections Order¹⁵⁵
- Conditional Release Order¹⁵⁶
- Community Corrections Order¹⁵⁷
- Parole
- Conditional bail.¹⁵⁸

Residents enter the program provisionally for a two-week period and if assessed as suitable, are confirmed for a minimum six month placement.

Women were eligible to participate in the program before 2012. CSNSW's assessment is that women cannot be safely and securely accommodated at Balund-a.¹⁵⁹ It was reported to the inspection team that low referral rates increased the sense of isolation experienced by women. There were also challenges in delivering separate therapeutic and education programs to women in a remote location.¹⁶⁰ Notwithstanding these challenges, which are also relevant for male residents, the need and demand for a diversionary program for Aboriginal women in Northern NSW should be considered.

8.3 Staffing and culture

The following positions comprise the staffing profile at Balund-a:

- Manager
- Operations Manager (vacant)
- Counsellor
- 2 x Elders (0.5 of one role vacant)
- Case Management & Administration Officer (vacant)
- Coordinator, Programs
- 2 x Coordinator, Residents and Security (one role vacant)
- Farm Supervisor
- 6 x Senior Program Support Officer (one role vacant)
- Senior Instructor, Catering and Laundry
- 10 x Program Support Officers (5 vacant)
- Administration Manager
- Administration Assistant

153 Corrective Services NSW, 'Balund-a Program Overview' (Balund-a Referral and Information Pack, Community Corrections, undated).
Offenders with a history of a sexual offence may be considered for participation on a case-by-case by the Manager.

154 *Crimes (Sentencing Procedure) Act 1999* s 11.

155 *Crimes (Sentencing Procedure) Act 1999* s 7.

156 *Crimes (Sentencing Procedure) Act 1999* ss 9, 10.

157 *Crimes (Sentencing Procedure) Act 1999* s 8.

158 *Bail Act 2013* s 28.

159 Information provided by Corrective Services NSW on 15 November 2019.

160 Information provided by Corrective Services NSW on 22 February 2019.

The high rate of staff vacancy at Balund-a is a barrier to the delivery of the program and may offer some explanation for the high rates of program non-completion in the 2017–2018 period. The challenge in attracting and retaining staff due to its geographical isolation and the associated shift patterns requiring onsite accommodation is acknowledged. This requires an innovative approach to recruiting staff that is supported by CSNSW. Delays in the recruitment process, particularly around the security vetting process, require urgent resolution.

8.4 Program

Residents progress through four stages of the program to completion.¹⁶¹ The cost of participation to residents is 25% of their income, which generally comprises Centrelink deductions. All meals are provided by CSNSW onsite.

The table below outlines the four stages of the program:

Program stage	Program substance
Stage 1	<p>Upon entry to the program residents stay in accommodation units located in Area 1 for a period of two weeks whilst they are assessed. Staff aid residents to meet their immediate needs including applying for Centrelink, obtaining identification, opening a bank account, seeking medical attention, obtaining personal hygiene items and clothes. Residents eat in the dining room with other residents and are able to participate in cultural outings.</p> <p>After the two week assessment period residents reside in accommodation units located in Area 2. They are able to participate in weekly buy ups, and receive visits on weekends and public holidays. Residents are also expected to participate in work parties that undertake maintenance, gardening and general upkeep of the Balund-a site.</p>
Stage 2	<p>Residents in Stage 2 continue to participate in scheduled programs and work parties. Residents are eligible to participate in cultural activities, recreational outings and community projects. They continue to have access to weekly buy ups and visits on weekends and public holidays. Residents in Stage 2 are also eligible to participate in the Resident Committee forum.</p>
Stage 3	<p>Residents can progress to Stage 3 after 2 months if compliant with case plan objectives. In Stage 3 residents are eligible to participate in a monthly shopping excursion, and may choose to cater for themselves. Residents continue to participate in cultural activities, recreational outings and community projects.</p>
Stage 4	<p>Residents in Stage 4 are eligible for weekend leave subject to the manager's approval. Licensed drivers are permitted to keep their own vehicle onsite for use. Upon completion of all EQUIPS programs, work experience or community projects will be discussed and approved by the manager. Residents in Stage 4 are supplied with food items and are responsible for self-catering. Residents remain eligible for the monthly shopping trip, recreational outings and community projects.¹⁶²</p>

¹⁶¹ Corrective Services NSW, *Balund-a Stage System* (version 13, 21 September 2018).

¹⁶² The information in this table is adapted from Corrective Service NSW, *Balund-a Stage System* (version 13, 21 September 2018).

Residents are expected to engage in criminogenic programs, cultural activities, recreational activities, education and training, community projects and paid employment while residing at Balund-a. The following criminogenic programs were delivered onsite at Balund-a in 2018: ¹⁶³

Program	Number of participants	Number of programs
EQUIPS Foundation	48	4
EQUIPS Aggression	22	2
EQUIPS Domestic Abuse	19	2
EQUIPS Addiction	19	2
Sober Driver	8	1

Approximately 80 residents attended 10 meetings of Alcoholics Anonymous and Narcotics Anonymous delivered onsite and all residents attended the CSNSW Health Survival Tips session in 2018. ¹⁶⁴

None of the programs are delivered by Balund-a staff and the inspection team heard from staff that there are frequent cancellations due to low participant numbers. Some residents observed that they were required to complete EQUIPS programs at Balund-a even though they had already completed these programs while previously in custody.

The consistent availability of relevant programs and activities at Balund-a is vital to its diversionary objective and to increasing the program completion rate. The remote location of Balund-a limits resident access to programs and activities offered in local communities and this needs to be accounted for in planning and delivery of programs and services to residents at Balund-a.

The cultural component of the Balund-a program is managed by several Aboriginal Elders employed by CSNSW. Residents consistently identified the Elders as the most valued feature of the program at Balund-a. The Elders share their cultural knowledge, facilitate activities and lead excursions to culturally significant sites in the area. Residents built a gunyah (bush hut) behind Area 2 under the supervision of Elders that is now available for residents to use for personal reflection or cultural practices and protocols around bereavement. The construction of the gunyah was identified as important by Elders because there were barriers to obtaining approval for residents to attend funerals offsite.

The Elders have a common room located in Area 2 and are also expected to use the Area 2 administration office. Their common room is located next to the program room in Area 2 and does not have running water, a sink or window. Elders advised that their communication with residents would be improved through the provision of a space where residents can come and have a cup of tea with them. A lack of funding and restrictions on resident access to tools was cited by Elders as inhibiting the expansion of the cultural program. Residents and Elders expressed a desire to expand the cultural program through:

- monthly cultural excursions into the community
- boomerang and didgeridoo making workshops
- language workshops.

The cultural component of the program at Balund-a is unique and valuable. Resident engagement in cultural activities not only reflects its own educational and wellbeing value, but it supports resident engagement with other educational and criminogenic programs at Balund-a. The value of a continued partnership with the Elders at Balund-a cannot be overstated.

¹⁶³ Information provided by Corrective Services NSW on 28 February 2019.

¹⁶⁴ Information provided by Corrective Services NSW on 28 February 2019.

Residents participate in limited recreational activities at Balund-a. There is a weekly shopping trip to the general store in nearby Tabulam and a monthly shopping trip to Casino. Residents who have progressed to Stages 3 and 4 of the program are rewarded with the opportunity to travel to Grafton or Lismore for personal shopping on a monthly basis.

Unsurprisingly, given the size and location of Tabulam, the cost of items at the general store was reportedly higher than in larger towns. While the importance of engaging services in the communities that are local to Balund-a is acknowledged, the majority of residents have limited access to income and would benefit from being able to regularly access more affordable shopping options.

Despite efforts by Balund-a to establish relationships with local registered training organisations, numerous barriers were identified to the delivery of increased education and training for residents, including the remote location of the site and the low and inconsistent resident numbers. Management at Balund-a reported difficulties in securing literacy and numeracy trainers to attend the site. A Certificate III in Civil Construction (Plant Operations) was delivered in 2017 at Balund-a with 53 enrolments. While only 15 residents completed the program in full, individually certified components were completed by all. Demand amongst residents for access to enrolment in this course was high but Balund-a was unable to secure another program offering in 2018.

The following education and training programs were provided at Balund-a in 2017:¹⁶⁵

Provider	Program	Participants
TAFE	Community Engagement	33
TAFE	Preparation for Work and Training (PWT)	18
TAFE	Access to Work and Training (AWT)	63
TAFE	White Card	7
TAFE	Certificate II in Career Prep	29
TAFE	Certificate III Civil Construction	53
ACE	Certificate II Aboriginal and Torres Strait Islander Cultural Arts	15
ACE	Certificate I Skills for Vocational Pathways (Balund-a Indigenous Language Program)	21
ACE	Balund-a Cultural Arts Course	16
ACE	Aboriginal Driving Program	5
ACE	Red Room Poetry Workshops	20
CHS Training Grafton	Traffic Controller Course	30
CHS Training Grafton	Chemical certification	24

The following education and training programs were provided at Balund-a in 2018:¹⁶⁶

Provider	Program	Participants
TAFE	Community Engagement	87
TAFE	Small Motors (FSK)	49
TAFE	Access to Work and Training (AWT)	57

¹⁶⁵ Information provided by Corrective Services NSW on 28 February 2019.

¹⁶⁶ Information provided by Corrective Services NSW on 28 February 2019.

Provider	Program	Participants
TAFE	Defence Maths	1
TAFE	Certificate II in Career Preparation	2
ACE	Certificate II in Aboriginal and Torres Strait Islander Cultural Arts	15
ACE	Red Room Poetry Workshops	20
CHS Training Grafton	Traffic controller course	15
Team Training	Roller Operations	11

The availability of distance education for residents at Balund-a may address some of the barriers to access. Internet-enabled computers would need to be made available for use by residents and such a resource would also enhance the delivery of other program and educational offerings onsite. The inspection team was advised that the cost of network infrastructure had previously been deemed prohibitive. If Balund-a is to fulfil its purpose as a residential diversionary program in a relatively isolated location, investment in infrastructure is necessary to enable its residents to engage in a range of rehabilitation and reintegration focused activities.

The development of agricultural skills and experience was emphasised as a feature of the Balund-a program.¹⁶⁷ During the inspection residents confirmed that the opportunities to participate in farm activities were very limited. Only those who already had existing relevant skills and qualifications were invited to participate in farm work by the farm supervisor. Staff advised that the safety risks associated with the use of machinery, power tools and hand tools by residents restricted broader participation in farm work. The use of machinery occurs routinely under supervision in correctional centres and while the risks are acknowledged, these must be balanced with the potential benefits of training residents in the safe operation of farming equipment. The very limited involvement of residents in the cattle farm operation at Balund-a reflects a lost opportunity for education, training and potential employment pathways.

Once residents reach Stage 4 and have completed the criminogenic programs available, they are eligible to seek external employment. However, the opportunities to engage in paid employment are limited because residents must arrange their own transport to and from work. This requires an employer to provide transport or the resident to possess a current drivers licence and access to a private vehicle. A resident can keep their vehicle onsite in Stage 4 if it is registered and has current third party insurance. Unsurprisingly, these barriers are reflected in the very low rates of external employment at Balund-a. In 2017 there were no residents employed externally and in 2018 only one resident was employed.¹⁶⁸ The lack of activities and work opportunities in Stages 3 and 4 of the program may also explain the high attrition rate during these stages.

Progress in the Balund-a program is incentivised through the issue of rewards for case plan compliance and sanctions for non-compliance or breaches of program rules. Intensive Supervision Agreements (ISA) are generated to address non-compliance with case plan objectives and incidents of substance use. Residents are permitted one ISA in response to substance use and one ISA in response other behavioural incidents during their placement at Balund-a.¹⁶⁹

167 Information provided by Corrective Services NSW on 14 October 2018; Corrective Services NSW, 'Balund-a (Tabulam)', *Community Corrections* (Web Page). <https://www.correctiveservices.justice.nsw.gov.au/Pages/CorrectiveServices/Community%20Corrections/offender-management-in-the-community/balund-a_tabulam.aspx>.

168 Information provided by Corrective Services NSW on 28 February 2019.

169 Corrective Services NSW, 'Application for Final – Intensive Supervision Agreement' (Memorandum 011/11, 17 June 2011).

If a resident breaches the program rules after exhausting their eligibility to be managed under an ISA, they can apply for a 'Final ISA' to the manager of Balund-a. If the terms of this are breached or if the resident's application for a final ISA is refused, they are referred to an internal Breach Review Panel to consider whether the resident's continued participation at Balund-a is supported.¹⁷⁰

The case management framework, including the ISA and breach review processes, is not documented in a single location (SOP or Local Order). Instead, there are memorandums from 2011 and 2013, neither of which situate these processes within the broader case management framework. It was unclear what form ongoing case management took at Balund-a, how case managers were assigned and whether these case management relationships were consistent throughout a resident's placement.

Entry to Balund-a is contingent on a resident's agreement to drug testing by urinalysis and breath analysis at the direction of staff. On reception to Balund-a residents undergo urinalysis and are tested again before their progression from Area 1 to Area 2 accommodation. Each day between three and four residents are randomly selected for urinalysis. Residents returning from external leave are also tested.

Urinalysis is conducted using a collection and testing cup. A positive or negative indication for the presence of drugs is returned within a couple of minutes.¹⁷¹ If a positive result is returned the resident is given an opportunity to admit to, and explain, their substance use. Only those tests that indicate the presence of cannabis are sent for confirmatory testing to provide insight into patterns of substance use. Advice received from Balund-a management was that a negative confirmatory test does not negate the positive result of the initial test cup.¹⁷²

Residents expressed concern and confusion about the basis for a recorded substance use where confirmatory testing indicates a negative result. The Inspector shares their concern. A positive drug test can have significant consequences for residents, including regression from Area 2 to Area 1, loss of privileges, or termination of placement. This may also contribute to the high rate of program termination at Balund-a. At present there is no documented process available to residents about the outcomes of drug testing and associated consequences.

CSNSW advise that negative confirmatory test results should be recorded as negative for substance use.¹⁷³ Further training is required to ensure staff adherence to CSNSW policy.

Recommendation 34: The Inspector recommends that CSNSW coordinate year-round access to programs, education (including distance education) and activities for residents at Balund-a.

Recommendation 35: The Inspector recommends that CSNSW support and strengthen the continued involvement of Elders at Balund-a.

Recommendation 36: The Inspector recommends that CSNSW support residents at Balund-a to attend funerals in the community.

Recommendation 37: The Inspector recommends that CSNSW explore alternative shopping options for Balund-a residents that offer lower costs for residents.

Recommendation 38: The Inspector recommends that CSNSW provide working internet-enabled computers at Balund-a for use by residents.

Recommendation 39: The Inspector recommends that CSNSW maximise the use of the Balund-a site and its farm as a source of education, training and activities for residents, and expand opportunities to involve residents in site improvement projects.

170 Corrective Services NSW, 'Balund-a Breach Review Panel' (Memorandum 003/13, 19 April 2013).

171 Pathtech, '14 Panel Urine Cup' *Proscreen product information* (Web Page) <<https://www.pathtech.com.au/product/>>.

172 Information provided by Corrective Services NSW on 28 February 2019.

173 Information provided by Corrective Services NSW on 15 November 2019.

Recommendation 40: The Inspector recommends that CSNSW provide information at induction to Balund-a residents about their progression through the program, drug testing procedures and the supporting case management framework.

8.5 Access to health care

Residents at Balund-a access health care services primarily in the community. Aboriginal residents access services provided by the Jullums Aboriginal Medical Service in Lismore and the Bonalbo Hospital. Non-Aboriginal residents access local public health services in Casino or Lismore. If residents need dental treatment the dental hotline is used and the next available appointment for residents is secured in Lismore.

Balund-a receives fortnightly visits from a mental health nurse from Jullums Aboriginal Medical Service and monthly visits from a CSNSW psychologist. The services of a fulltime counsellor onsite are also available but this position was vacant at the time of inspection. CSNSW has confirmed that this position has since been filled.¹⁷⁴

While it is acknowledged that Balund-a is not an AOD treatment or rehabilitation program, the majority of residents experience or have experienced substance use that may be connected with their offending. Regular access to an AOD counsellor would be a valuable inclusion in a program with diversionary aims for a cohort that frequently present with histories of substance use. Access to this service may also reduce rates of program discontinuation that is connected to AOD use.

Recommendation 41: The Inspector recommends that CSNSW consider establishing an identified AOD counsellor position at Balund-a.

8.6 Physical environment

Balund-a is a working cattle farm. The property comprises four resident accommodation areas, three of which were in use, one staff accommodation area and a main administration and visits block in the centre of the site. The buildings and accommodation is purpose built and was observed to be in good condition.

Area 1 has an administration building, multipurpose programs rooms, and two accommodation units. Area 1 accommodates new residents during their provisional period and residents who have been regressed from Area 2 for breaching the program rules, usually following an incident of substance use. This practice of accommodating these residents together is ill-advised and CSNSW confirmed that it was ceased in September 2019.¹⁷⁵



Area 1 administration building



Area 1 programs space



Area 1 programs space

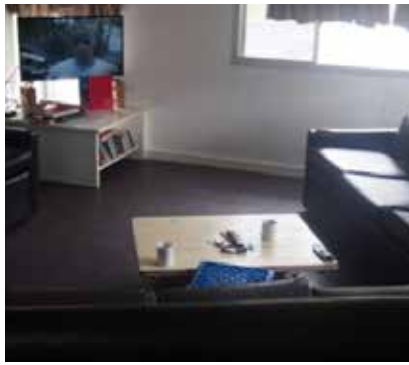
Accommodation units in each area had shared living and kitchen facilities. The lounge rooms had a television and the kitchens had hot plate facilities, a refrigerator and a microwave. Each accommodation unit had an external balcony with a small clothes line. Shared bathrooms are also located in each accommodation unit. Bathrooms were accessible and showers were co-located with toilets.

¹⁷⁴ Information received from Corrective Services NSW on 15 November 2019.

¹⁷⁵ Information provided by Corrective Services NSW on 15 November 2019.



Kitchen facilities



Living room with television



Bathroom

Bedrooms accommodate up to two residents. Mattresses in some rooms were uncovered foam, which needs to be addressed to ensure that hygiene and fire safety standards are maintained.



Bedrooms were a mix of single and double occupancy

Between Monday and Thursday the shared kitchens and common rooms in accommodation units are locked between 11pm and 6am. Between Friday and Sunday these areas are locked between 12am and 6am. The justification for these restrictions is to promote healthy sleep patterns that enable residents to engage in various activities and programs during the day. Gym equipment is available for use in two of the accommodation areas.

In Area 1 several programs and activities rooms and adjacent offices were unused. Similarly, in the main administration building at the centre of the site, the multipurpose visits space, programs rooms and the audio-visual link (AVL) suite appeared underutilised by residents.

A review of the usage data indicated that the AVL suite at Balund-a was not used on a single occasion in 2018. This is despite the fact that it has the capacity to facilitate virtual family visits for those residents whose family and friends are not able to travel to Balund-a. The challenges that Balund-a faces in relation to accessing health, education and recreational services onsite may be addressed to some extent through the use of AVL technology to facilitate the delivery of virtual services.

Recommendation 42: The Inspector recommends that CSNSW review the practice of placing residents who have been regressed for breaches of the rules in the same area as newly arrived residents and consider alternative placement options.

Recommendation 43: The Inspector recommends that CSNSW use the existing audio-visual link (AVL) suite to facilitate family visits for residents at Balund-a.

9 Nunyara Community Offender Support Program

9.1 Overview

Nunyara was opened in 2008 and is located within the Long Bay Correctional Complex at Malabar in eastern Sydney. Nunyara is a residential facility that provides accommodation and reintegration support for up to 45 male offenders subject to community supervision orders. Nunyara's central focus is on supporting offenders to secure stable, affordable accommodation in the community that is compliant with conditions stipulated by supervision orders.

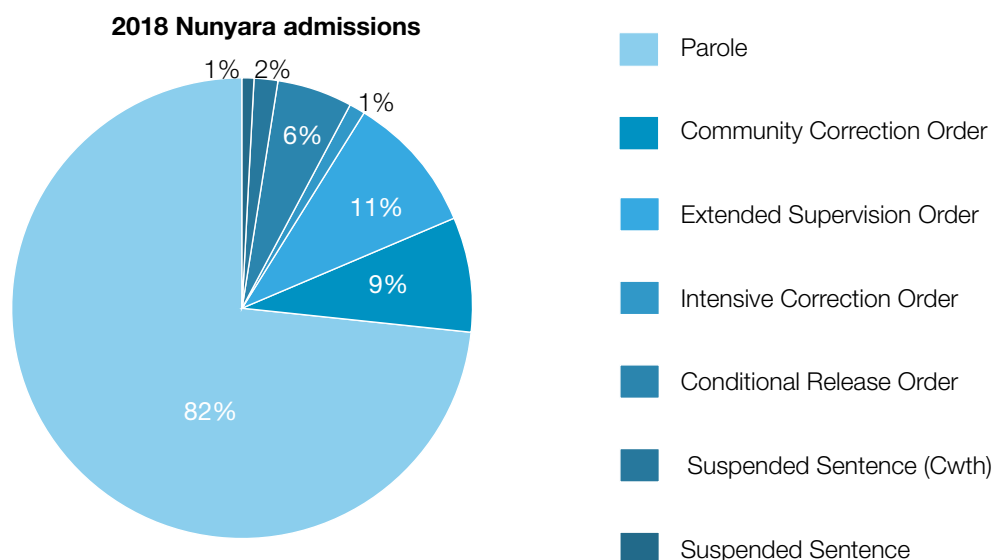
The duration of a placement at Nunyara is designed to be 3–6 months but crisis accommodation placements are also available to address crisis accommodation needs in the short term. At the time of inspection Nunyara accommodated 21 residents, the majority of whom had been released from secure custody to Nunyara under community supervision orders. Nunyara received 103 residents in 2017 and 90 residents in 2018.¹⁷⁶

9.2 Offender eligibility

Eligibility to reside at Nunyara is assessed on the basis of criteria. An offender must:

- have a risk of reoffending assessed as medium to high
- be able to live independently and not require intensive support
- not be suffering from an acute mental illness (i.e. active psychosis)
- not be experiencing homicidal or suicidal thoughts, or actively self-harming
- not be detoxing or using illicit substances or alcohol
- agreed to the Resident Terms and Conditions.¹⁷⁷

Admissions to Nunyara in 2018 by type of order are set out below:¹⁷⁸



¹⁷⁶ Information provided by Corrective Services NSW on 4 March and 31 May 2019.

¹⁷⁷ Corrective Services NSW, *COSP Referral Form – Resettlement and Reintegration Program* (2018).

¹⁷⁸ Information provided by Corrective Services NSW on 31 May 2019. Residents entering Nunyara may be subject to more than one type of order at the same time.

9.3 Program

Nunyara offers short term supervision of, and support to, offenders with a focus on addressing accommodation needs as a critical barrier to their successful community resettlement. There is an associated focus on financial management in so far as it is linked to securing accommodation in the community.

Offenders participate in weekly accommodation meetings with accommodation support workers and assistant accommodation support workers. Weekly reviews involve accommodation searches and planning rental inspections. Staff confirmed there is an expectation that residents attend at least three rental property inspections per week.

A fortnightly budget meeting is held with each resident to supervise their financial planning. Residents are supported to establish a bank account, register with Centrelink, identify options for employment and plan for the management of any outstanding debt. As residents need to be able to afford an upfront bond payment and ongoing rent in the community, strengthening their budgeting and saving skills is important.

Monthly exit planning meetings are also conducted with residents to identify their reintegration needs and plan accordingly. The inspection team reviewed a sample of Exit and Resettlement Plans and observed the following inclusions:

- identified housing needs and available options
- budgeting plan
- health needs and local service providers
- appropriate community activities, such as community work, sport and leisure that are locally available for a resident
- employment and training priorities.

Regular and constructive meetings occur between Nunyara management and supervising community corrections officers. This enables consistency and coordination between support offered by Nunyara and the case management plan generated under the community supervision order. Monthly contact with residents is maintained by Nunyara staff for three months after their exit and residents can continue to contact Nunyara for advice or support in perpetuity.

If employed, residents are charged \$75 per week or 25% of their weekly income. The charge covers accommodation and groceries, including an evening meal which is prepared by residents with assistance from staff. At the time of inspection only three out of the 21 residents were in positions of paid employment. Staff confirmed that the constraints of a short term placement resulted in an emphasis on identifying and securing accommodation and attending community-based appointments over searching for employment.

The challenge of securing accommodation for residents with a range of complex needs and restrictive supervision conditions was evident in the case of a resident who had been assessed as requiring residential aged care. The duration of his placement at Nunyara was approaching two years. Despite continued efforts, Nunyara staff and the supervising community corrections office had been unable to secure a place that was consistent with the conditions of the resident's community supervision order and considerations of prospective aged care facilities. Fortunately, CSNSW has since confirmed that this resident has secured an aged care placement.¹⁷⁹ Even in the event that a resident does not require an aged care placement, identifying and securing stable accommodation is a key challenge for residents at Nunyara. In 2017 44% of residents at Nunyara were in placements of durations longer than 7 months, confirming the significant barriers in identifying and securing stable accommodation.¹⁸⁰ Partnerships with local community service providers are instrumental in addressing these barriers.

¹⁷⁹ Information provided by Corrective Services NSW on 15 November 2019.

¹⁸⁰ Information provided by Corrective Services NSW on 31 May 2019.

Residents are expected to be awake by 6.45am on weekdays and to have had breakfast, made lunches if required and tidied their rooms by 7.30am. On weekends residents must be awake by 7.30am and duties performed by 9am. Cleaning, maintenance and cooking tasks are distributed amongst residents for weekly completion. Access to the community for health appointments, social purposes, therapeutic programs, or financial and accommodation matters is permitted between 6am and 6pm with prior approval. Weekly schedules of travel must be approved in advance by Nunyara's management. A review of a sample of weekly schedules indicated that residents accessed the community to engage with specific reintegration support services, criminogenic programs, health care providers and recreational activities.

Security measures in operation at Nunyara include the monitoring of resident timetables, curfews, mealtimes, entry and exit. As a condition of the placement, residents also agree to undergo drug and alcohol testing and to searches of their room and personal belongings.

Compliance with case plan objectives and Nunyara's resident responsibilities is reviewed at the resident's weekly meetings with an accommodation support worker or assistant accommodation support worker. Residents and staff both described these interactions as compliance exercises. While sanctions were imposed for failing to meet weekly savings goals or comply with curfews imposed, it was unclear how positive progress was reinforced and encouraged in residents. The structure of these meetings needs to be reviewed to ensure they provide valued and meaningful opportunities for interactions that encourage and reinforce a resident's progress.

Recommendation 44: The Inspector recommends that CSNSW review the application of sanctions at Nunyara to ensure they are proportionate.

9.4 Access to health care

Residents at Nunyara access health care in the local community. Residents' prescriptions are retained at a local pharmacy and any residents receiving OST attend specialist community health services for treatment. There were no concerns about access to primary health care expressed during the inspection.

Residents at Nunyara need to be able to manage their own self care, personal hygiene and room cleaning. The benefits of the placement are contingent on a resident's capacity to plan their own schedule and travel into the community independently. At the time of the inspection two residents were reportedly experiencing age-related illness and required a level of care and support that Nunyara was ill equipped to provide, including one who was waiting for a residential aged care placement.

The resident waiting for an aged care placement was unable to leave Nunyara unless accompanied by a staff member because of the risk that he could become disoriented. The state of his room indicated he was not managing hygiene and self care tasks adequately. Nunyara management had exempted him from the 'No personal television' rule and provided him with a television in his room for stimulation. The challenge in managing the complex needs of an increasing population of aged offenders has already been identified as an issue by the Inspector. Recommendations have been made previously to CSNSW and JH&FMHN to consider making aged care available to inmates in custody and to those under supervision in the community.¹⁸¹ The need for specialist residential aged care to accommodate offenders subject to strict community supervision regimes upon their release from custody was evident at Nunyara.

Recommendation 45: The Inspector recommends that CSNSW identify and secure, through partnerships with government and non-government organisations, suitable accommodation for aged and infirm offenders subject to community supervision.

¹⁸¹ Inspector of Custodial Service NSW, *Old and Inside: Managing Aged Offenders in Custody* (Report, September 2015) 46.

9.5 Physical environment

Nunyara is located within the Long Bay Correctional Complex and the infrastructure reflects its historical function as a periodic detention centre.¹⁸² Until 2015 it could accommodate up to 80 residents in the community offender support program. Staff confirmed that in 2015 half of its site was resumed for use by the Metropolitan Special Program Centre to accommodate minimum security inmates participating in work release programs. Nunyara lost access to the basketball court and green space and its main common room was halved in size to provide an officers' station to supervise the work release inmates. Perimeter fencing and razor wire were also added to the site. In August 2018 the work release inmates were removed from the site but it has not been reallocated to Nunyara for use.

There are two double-storey accommodation blocks at Nunyara. Each has an attached common room with lounges, a television and DVD player, and a selection of books. There is also a multipurpose block with administration offices, and the kitchen.



Common room A



Common room B

While common rooms are required to be unlocked to ensure free and open access for residents, the inspection team heard from staff and residents that these spaces are locked overnight. These residents are not inmates and should have free and open access to use the common facilities on the premises including a small gym at the front of the centre which is open 8:00am– 6:00pm.



Gym equipment



Dining room adjacent to kitchen

The kitchen facilities were clean and expansive. At the time of our inspection the large sink in the resident kitchen had been out of order for approximately one month.

¹⁸² Clive Lucas Stapleton & Partners, 'Long Bay Correctional Complex Conservation Plan', commissioned by NSW Department of Public Works and Services for the NSW Department of Corrective Services (August 2004) 178.



Communal kitchen facility



Accommodation blocks have individual carpeted cells with a window. Each room has a single bed, wardrobe, desk and chair. The rooms were fit for the purpose of providing short term accommodation but they are unmistakably prison cells as opposed to residential accommodation. Residents are issued with a key to their room and are expected to manage access and its security.



Accommodation block



Bedroom

Bathroom and laundry facilities are shared and while they were very basic, they were adequate.



Shared bathroom



Laundry

Maintenance of the centre is provided by Long Bay Correctional Complex but delays were reported in the resolution of maintenance issues.

Recommendation 46: The Inspector recommends that CSNSW consider reallocating the whole of the originally occupied site to Nunyara to increase its capacity and provide greater opportunities for onsite activities.

9.6 Staffing and culture

Nunyara has a staffing profile that reflects its priority of supporting residents to find accommodation. In addition to the manager, and a throughcare and placement officer who supervises case management of residents, there are accommodation support workers and assistant accommodation support workers.

Upon commencement the only structured training available to staff is the online Security Awareness module and mandatory induction. It remains unclear what, if any, further structured training is made available to staff. The training needs of staff require analysis to ensure staff are supported and empowered to work constructively with residents who have complex and diverse needs.

Recommendation 47: The Inspector recommends that CSNSW develop and implement a prescribed training program for staff at Nunyara to manage the increasingly complex and diverse needs of its residents, including aged care considerations.



Inspector of
Custodial Services

Produced by Inspector of Custodial Services

Level 3, 50 Phillip Street
Sydney NSW 2000

P: 02 8061 9331

W: www.custodialinspector.justice.nsw.gov.au