



ACT DEPARTMENT OF JUSTICE  
& COMMUNITY SAFETY

# **Vocational Educational and Training and Rehabilitative Programs in The Alexander Maconochie Centre**

**Part A: Discussion Paper**

**Part B: Delivery Strategy**

May 2007

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## GLOSSARY

|                             |  |
|-----------------------------|--|
| ACTCS                       | ACT Corrective Services  |
| ACTPP                       | ACT Prison Project   |
| AJAC                        | Aboriginal Justice Advisory Committee  |
| AMC                         | Alexander Maconochie Centre  |
| ANTA                        | Australian National Training Authority   |
| AVETMISS                    | Australian Vocational Education and Training Management Information Statistical Standard   |
| AOD                         | Alcohol and Other Drug   |
| At risk prisoner            | A prisoner assessed to be at risk of harm to self  |
| Case Management             | A systemic approach to the management of individual development  |
| CIT                         | Canberra Institute of Technology   |
| Criminogenic                | related to criminal behaviour  |
| CSU                         | Crisis Support Unit  |
| DETYA                       | Department of Education Training and Youth Affairs   |
| DEWR                        | Department of Education and Workplace Relations  |
| ERM                         | Enterprise-wide Risk Management  |
| Official Visitor            | Statutory appointment, independent prison inspector  |
| PPU                         | ACT Corrective Services Probation and Parole Unit  |
| Prisoners                   | Sentenced prisoners and Remand prisoners includes detainees and offenders  |
| PWG                         | Programs Working Group   |
| RCIADIC                     | Royal Commission Into Aboriginal Deaths In Custody   |
| Recidivism                  | Repetition of offending  |
| Rehabilitation              | Restore to former health. In the Correctional context, restore to lawful life.   |
| Rehabilitation Plan         | Case Plan targeted at addressing criminogenic needs and risk factors, developed in consultation with the offender to plan to achieve rehabilitation  |
| Restorative Justice         | Restorative justice is a process whereby opportunities are given to victims, offenders and their families to give voice to the affects of crime and the harm it caused. It provides opportunities for people to explore the harm and to find ways to restore people to the community and make amends. Central to the restorative justice process is the importance of relationships in re-connecting people. |
| RTO                         | Registered Training Organisation   |
| SAB                         | Sentence Administration Board  |
| Sentence Plan               | Plan for prisoner management, placement and classification   |
| SOP                         | Sex Offender Program   |
| TAE                         | Training and Adult Education   |
| TAFE                        | Technical and Further Education  |
| Throughcare                 | A model for the integrated Case Management of offenders that encompasses a total approach to offender and sentence management incorporating the pathway through a number of possible correctional environments, ie remand to prison to community supervision and focused on integration with the lawful community.   |
| Transitional Release Centre | Minimum security facility enabling prisoners to attend work, programs or other approved activities to assist community re-integration  |

UN  
VET

United Nations  
Vocational Education and Training

## **Programs Working Group**

The Programs Working Group was initially established in February 2004 to develop the Plan for the Delivery of Vocational Education and Training and Rehabilitative Programs for the Alexander Maconochie Centre (the Programs Plan).

Following publication of the Programs Plan in May 2005, the group was disbanded and a tender process was commenced to contract a Registered Training Organisation (RTO) to deliver Vocational Education and Training (VET) in the Alexander Maconochie Centre (AMC). The two-stage tender process concluded in November 2005. In February 2006, following debriefing of unsuccessful tenderers, Skills Training Employment Program Inc, trading as Auswide Projects (Auswide) was informed that they are the preferred provider of VET in the AMC. A Transitional Plan was developed by Auswide in consultation with the AMC Project and Procurement Solutions which forms the basis of an agreement between the parties prior to the contract commencement date of 1 July 2007.

In November 2005 the Case Management and Programs Working Group (CMPWG) was established which included, and expanded upon, the membership of the previous Programs Working Group. The membership is current to date and comprises:

- Manager, AMC Project (Chair)
- Manager Training and Operations Support
- Senior Manager Community Based Corrections
- Manager Probation and Parole Unit
- Manager Rehabilitation Programs
- Principal Psychologist – later replaced by the Manager Offender Intervention Programs
- Manager Indigenous Services and Cultural Diversity Unit
- Representative Custodial Operations
- Union Delegate, Custodial Operations

The CMPWG developed a systemic Case Management process model for the AMC. The service delivery model is well-established and operating within Community Based Corrections.

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The Terms of Reference for the CMPWG were last revised in February 2006 to include the following:

1. To refine the agreed systemic Case Management Model for ACTCS including the:
  - role of Community Based Corrections;
  - role of the Training Unit, and
  - role of custodial operations.The appropriate management of Remandees.  
Demand for services and appropriate staffing to meet demand.
2. To specify the range of programs to be provided in the AMC, who will deliver which programs and appropriate programs scheduling.
3. To liaise with the Workforce Planning Working Group and provide number and positions of non-custodial staff to be recruited to the Chair of that Group.

4. Ensure information on Case Management Model is disseminated across ACTCS and obtain information relevant to the Case Management process.

### **PURPOSE**

The purpose of this Plan is to provide a guide for ACT Corrective Services staff and others who will design, deliver and support programs and education in the AMC.

## **PART A - DISCUSSION PAPER**

### **Section One - Context**

#### **Australian Reference Documents**

*Standard Guidelines for Corrections in Australia* (1996) suggest that all prisoners should have access to educational programs and be encouraged to participate in them and be remunerated for this participation.

In 1999 the Australian National Training Authority (ANTA) published *A National Strategy To Improve Education and Training Outcomes For Adult Indigenous Australians in the Custody of Correctional Authorities*. This document states:

The overall goal of the *Strategy* is to enhance the education and training outcomes and employment opportunities on release or discharge, for adult Indigenous Australians in the custody of correctional authorities through improving their access to, and successful participation in, quality VET education and training programmes.

It is proposed that this goal be achieved through the following objectives:

**Objective 1.** To increase the priority accorded to education and training programmes for Indigenous Australians in the custody of correctional authorities, as well as education, training and employment programmes on their release. Some appropriate strategies to achieve this objective are:

- consideration of Annual State VET Plans addressing the education and training needs of Indigenous Australians in custody;
- facilitating access to targeted DETYA<sup>1</sup> education and training programmes for indigenous Australians in custody; and
- promoting access to mainstream and targeted DETYA education, training and employment programmes for Indigenous Australians following their release from detention.

**Objective 2.** To facilitate improved State, Territory and Commonwealth coordination of pre-release education and training programmes for Indigenous Australians in the custody of correctional authorities, linked to post-release education, training and employment programmes. Some appropriate strategies to achieve this goal are:

- signing the Memorandum of Agreement between each State, Territory and the Commonwealth; and

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<sup>1</sup> The Department of Education Science and Training (DEST) assumed responsibility for the functions of DETYA under the Administrative Arrangements Order of 26 November 2001. (DEST Annual Report 2001-02)

- initiating planning and implementation meetings between representatives from appropriate State and Commonwealth agencies, as well as from Indigenous community organisations.

Objective 3. To provide quality career information, advice and planning as part of personal development programmes to help adult Indigenous Australians in the custody of correctional authorities make informed vocational choices about their future education, training and employment options. Some appropriate strategies to achieve this objective are:

- access by adult Indigenous Australians in the custody of correctional authorities to existing DETYA and other national career information products; and
- development of culturally appropriate career information products, education, and training programmes, which reflect the needs of Indigenous Australians in custody, as determined by a comprehensive consultation and assessment process.

Objective 4. To improve outcomes from education and training programmes for adult Indigenous Australians in the custody of correctional authorities. Some appropriate strategies to achieve this goal are:

- provision of non-award programmes for personal development to Indigenous Australians in custody, especially those programmes which directly address issues such as cultural identity, low self-esteem, creative use of leisure time and personal problem solving;
- recognition under the National Training Framework of vocational education and training programmes provided to Indigenous Australians in custody, in order to increase the currency and transferability of knowledge and skills attained and enhance the prospects of employment upon release;
- identification and removal of institutional barriers to participation in education and training by Indigenous Australians in custody;
- provision of cultural awareness programmes for all staff working with Indigenous Australians in custody; and
- employment of Indigenous Australians to provide culturally appropriate career information, education and training programmes, non-award programmes and assessment.

Objective 5. To monitor, evaluate, report on and improve the implementation of this National Strategy. Some appropriate strategies to achieve this goal are:

- developing agreed outcomes based reporting and monitoring criteria for the education and training of Indigenous Australians in the custody of correctional authorities;
- monitoring the implementation of the National Strategy through annual workshops by key stakeholders, as well as reporting to Correctional Services Administrator's conferences, the Ministerial Council on the Administration of Justice and to the Ministerial Summit on Deaths in Custody; and
- collecting and disseminating information relating to good practice in the programme development, design, and delivery of education and training for adult Indigenous Australians in the custody of correctional authorities.



The Australian National Training Authority (ANTA)<sup>2</sup> *National Strategy for Vocational Education and Training for Adult Prisoners and Offenders in Australia* - March 2001 provides the following prisoner profile.

“Statistical data for offenders varies between State and Territories. The categories and time frames for collection of data also vary. However, the general profile is consistent. The figures below represent averages drawn across all States and Territories and are included to provide an indication of the level of offender disadvantage:

- the largest age cohort of adult offenders is young (18 - 29) and is increasing despite the decline in this group in the general population;
- most prisoners are likely to have been in prison more than once, and over half will have breached community corrections orders;
- less than one quarter have completed secondary school;
- a large number have limited literacy and/or numeracy, in both native English speaking and NESB populations;
- prior to their current sentence approximately 70% are likely to have been unemployed,
- over 75% are likely to have a drug (or other substance abuse) problem;
- the Aboriginal and Torres Strait Islander population is greatly over-represented; this is of special concern in the Northern Territory, Queensland and Western Australia;
- men comprise the great majority of offenders (over 90%), whilst the proportion of female offenders has increased in recent years (eg. in Victoria by 58% between 1996 and 2000), and the accumulated disadvantages of female offenders are generally more severe than for males;
- intellectual disability is also noticeable especially amongst male offenders;
- at least one quarter of prisoners are likely to be recorded as 'protection' prisoners;
- non-British migrants or visitors and illegal entrants to Australia are in particularly high proportions in most jurisdictions - almost 20% of NT prisoners are foreign nationals. (Note: illegal entrant detention centres are administered separately from the corrections systems and illegal entrant detainees are not covered by this Strategy)

Offenders therefore are likely to be at great risk of failure across a wide spectrum of economic and social activities. Their low skill level is a significant barrier to successful reintegration into the community. In addition there are structural barriers to their participation in vocational education and training and their access to the labour market. The offender population is increasing in all jurisdictions, placing increased pressure on facilities and services.”

This *Plan* is consistent with the Vision of *The Canberra Plan*, which sees Canberra being a community...

- “Promoting lifelong learning and celebrating participation in community activities, culture, sport, recreation and work-life.
- Recognised for the way tolerance, fairness and equity shape the way we live.
- Where all people reach their potential, make a contribution and share the benefits of our community.”

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<sup>2</sup> The functions and responsibilities of ANTA were transferred to the Department of Education, Science and Training effective 1 July 2005, as announced by the Prime Minister in October 2004.

The outcomes required of the Department of Justice and Community Safety are “Corrective services appropriate to the ACT’s needs and resources and reduce offending behaviour.”

[www.jcs.act.gov.au/departmentInfo.html](http://www.jcs.act.gov.au/departmentInfo.html)

## **International Centre for Prison Studies**

While it is accepted that imprisonment can a traumatic and potentially damaging experience, it also provides a period of stability during which time some prisoners will be able to re-order their lives. This is recognised by the International Centre for Prison Studies which, in its 2002 publication, *A Human Rights Approach to Prison Management*, notes that:

“It is an unfortunate reality that for some individuals the very fact of being in prison, of having to remain in one location for a fixed period of time, may be the first real opportunity that they have had of pursuing a course of proper education.”

## **UN Instruments**

### Education

The *Standard Minimum Rules for the Treatment of Prisoners (1984)* indicates that provision should be made for the further education of all prisoners and makes special mention of literacy and proposes an integrated approach to the education of prisoners so that they may continue their education without difficulty after release.

#### *Universal Declaration of Human Rights, Article 26*

- 1) Everyone has the right to education.
- 2) Education shall be directed to the full development of the human personality and to the strengthening of respect for human rights and fundamental freedoms.

#### *Universal Declaration of Human Rights, Article 27:*

- 1) Everyone has the right freely to participate in the cultural life of the community, to enjoy the arts and to share in scientific advancement and its benefits.

#### *Basic Principles for the Treatment of Prisoners, Principle 6:*

All prisoners shall have the right to take part in cultural activities and education aimed at the full development of the human personality.

#### *Standard Minimum Rules for the Treatment of Prisoners, Rule 77*

- 1) Provision shall be made for the further education of all prisoners capable of profiting thereby, including religious instruction in the countries where this is possible. The education of illiterates and young prisoners shall be compulsory and special attention shall be paid to it by the administration.
- 2) So far as practicable, the education of prisoners shall be integrated with the educational system of the country so that after their release they may continue their education without difficulty.

#### *Standard Minimum Rules for the Treatment of Prisoners, Rule 78:*

Recreational and cultural activities shall be provided in all institutions for the benefit of the mental and physical health of prisoners.

*Standard Minimum Rules for the Treatment of Prisoners, Rule 40:*

Every institution shall have a library for the use of all categories of prisoners, adequately stocked with both recreational and instructional books, and prisoners shall be encouraged to make full use of it.

*Resolution 1990/20* of the UN Economic and Social Council refers to education in prisons in the following terms:

- a) Education in prisons should aim at developing the whole person, bearing in mind the prisoner's social, economic and cultural background;
- b) All prisoners should have access to education, including literacy programmes, basic education, vocational training, creative, religious and cultural activities, physical education and sports, social education, higher education and library facilities;
- c) Every effort should be made to encourage prisoners to participate actively in all aspects of education;
- d) All those involved in prison administration and management should facilitate and support education as much as possible;
- e) Education should be an essential element in the prison regime; disincentives to prisoners who participate in approved formal educational programmes should be avoided;
- f) Vocational education should aim at the greater development of the individual and be sensitive to trends in the labour market;
- g) Creative and cultural activities should be given a significant role since they have a special potential for enabling prisoners to develop and express themselves;
- h) Wherever possible, prisoners should be allowed to participate in education outside the prison;
- i) Where education has to take place within the prison, the outside community should be involved as fully as possible;
- j) The necessary funds, equipment and teaching staff should be made available to enable prisoners to receive appropriate education..."

Preparation For Release

*Basic Principles for the Treatment of Prisoners, Principle 10:*

With the participation and help of the community and social institutions, and with due regard to the interests of victims, favourable conditions shall be created for the reintegration of the ex-prisoner into society under the best possible conditions.

*Standard Minimum Rules for the Treatment of Prisoners, Rule 80:*

From the beginning of a prisoner's sentence consideration shall be given to his future after release and he shall be encouraged and assisted to maintain or establish such relations with persons or agencies outside the institution as may promote the best interests of his family and his own social rehabilitation.

*Standard Minimum Rules for the Treatment of Prisoners, Rule 81:*

- 1) Services and agencies, governmental or otherwise, which assist released prisoners to re-establish themselves in society shall ensure, so far as is possible and necessary, that released prisoners be provided with appropriate documents and identification papers, have suitable homes and work to go to, are suitably and adequately clothed having regard to the climate and season, and have sufficient means to reach their destination and maintain themselves in the period immediately following their release.
- 2) The approved representatives of such agencies shall have all necessary access to the institution and to prisoners and shall be taken into consultation as to the future of a prisoner from the beginning of his sentence.
- 3) It is desirable that the activities of such agencies shall be centralised or co-ordinated as far as possible in order to secure the best use of their efforts.

*European Prison Rules, Rule 70:*

- 2) Treatment programmes should include provision for prison leave, which should also be granted to the greatest extent possible on medical, educational, occupational, family and other social grounds.

## **Section Two – Demand Factors**

### **Operating Philosophy**

The Operating Philosophy and the Operating Model of the Alexander Maconochie Centre (AMC) is consistent with the letter and spirit of the ACT *Human Rights Act 2004*.

The Operating Philosophy and the Operating Model of the AMC sits within the framework provided by the *Canberra Plan* and its constituent documents, the *Social Plan*, the *Spatial Plan* and the *Economic White Paper*.

The AMC is to be a secure and safe place that will have a positive effect on the lives of prisoners held there and on staff who work there. Its management and operations will give substance to the dictum of Sir Alexander Paterson that offenders are sent to prison as punishment, not for punishment.

The Centre will reflect the “Healthy Prison” concept. A Healthy Prison is one in which:

- everyone is and feels safe;
- everyone is treated with respect as a fellow human being;
- everyone is encouraged to improve himself or herself and is given the opportunity to do so through the provision of purposeful activity; and
- everyone is enabled to maintain contact with their families and is prepared for release.

The AMC’s Operating Philosophy is the major factor influencing the design of the Centre. The Operating Philosophy for the AMC can be summarised as follows:

- it will provide protection from those who present as a risk to the community;

- it will provide a safe environment for prisoners and staff through design features, the use of technology, appropriate classification and separation of prisoners and the appropriate categories and numbers of well-trained staff;
- it will have regard to the recommendations of the *Royal Commission Into Aboriginal Deaths In Custody (RCIADIC)*;
- its operating systems will be developed from the base of a thorough risk analysis carried out to Standard AS/NZ 4360 and which satisfies the requirements of the ACT *Enterprise-wide Risk Management (ERM)* framework;
- the facility will aim to set a new standard of sustainability in design, construction and operation especially in, but not confined to energy, water and waste;
- the facility will satisfy AS 1428 and the Department of Disability, Housing and Community Services checklist for building and facility access;
- its programs and activities for prisoners will be based on individual assessment of each prisoner as the foundation of individual Rehabilitation Plans;
- the menu of rehabilitative programs and activities offered to each prisoner is to be targeted towards positive change in the prisoner's habits, beliefs, attitudes and expectations, that is, a cognitive change approach; and recognition that most prisoners will return to society and that maintenance of positive changes in behaviour will be greatly influenced by relationships with family and close associates.
- the menu of programs and the design of individual programs will be based on a "Throughcare" model that engages family and close associates in the behavioural change process while the prisoner is in prison and ensures support to the prisoner as he or she re-enters society; the menu of programs will cover:
  - family and other relationships;
  - health education and promotion;
  - remedial education;
  - cognitive skills;
  - substance abuse treatment and education;
  - sex offender's treatment;
  - vocational training;
  - positive recreational skills and habits;
  - skills and habits for living and working;
  - victim awareness, and
  - violent offender treatment.
- there will be a multi-disciplinary approach to program delivery and Case Management. This will include involvement of other government and community agencies, where appropriate, in the provision of services, such as family and individual counselling, health, education and vocational training;
- particular attention will be paid to the needs of women and Indigenous prisoners;
- the needs of short-term offenders will be specifically targeted. Corrections staff and appropriate professionals from other government and community agencies will work with the prisoner and the prisoner's family and close associates; and
- there will be a commitment to transparency and accountability with the centre's performance outcomes being measured against the national average of other jurisdictions and published by the Productivity Commission in the *Report on Government Services* series.

Emphasis will be directed at Throughcare, which is aimed at ensuring an integrated and seamless approach to the delivery of services for offenders as they move between prison, community corrections and the community and to provide continuity of knowledge of the offender, programs

and other services. This aspect of the Operating Philosophy for the AMC will contribute to the achievement of whole of government objectives for crime prevention and community safety and to the principles of Restorative Justice.

The Throughcare approach will focus on providing:

- an appropriate continuum of health care, in particular addressing substance abuse and mental health issues;
- individual Rehabilitation Plans based on individual prisoners' needs and presenting risk factors;
- common prisoner and offender programs based on assessment of risk and need and a menu of programs targeting those attitudes and behaviours linked to the risks of re-offending;
- opportunities for self-development, improved quality of life and social integration;
- linkages with community-based programs and services;
- support for re-settlement and
- the engagement of family, and the community in the prisoner's correctional experience.

## **Women Prisoners**

Within the framework provided by the AMC Operating Philosophy it is considered appropriate to express particular principles for the management of women prisoners. The reason for this is that, in simple terms, the profile of the female prisoner population is marked by more damage, disadvantage, disease and disaffection than is the male prisoner population.

Accordingly, five principles, which reflect those adopted in Canada, Western Australia and New South Wales at its new facility at Dillwynia, will underpin the management of women prisoners. They are:

- Personal responsibility and empowerment of the individual. Many women in custody are marginalised and alienated with no experience of making decisions that affect their lives. Prison staff will give women in their care the power to make such decisions and accept that as their personal responsibility.
- Family Responsibility. The objective of this principle is ensure that prisoners who are mothers and primary carers are provided with maximum contact with their families and children and to buttress this by providing programs and support directed at improving relationship and parenting skills.
- Community Responsibility. Many women are alienated from their communities and lack supports within them. Prisoners will be encouraged to become engaged with members of the community, develop a sense of community responsibility and to set in place post release support arrangements.
- Respect and Integrity. Services provided within the prison will be gender and culturally appropriate and will respect the dignity of people and the differences between them. A key element in this is honesty and truthfulness. Prisoners will be encouraged to develop similar attitudes with regard to themselves and to others.

- Supportive Environment. The quality of the environment can promote physical and psychological health and personal development.

### **Aged Prisoners**

At present 1 in 8 Australians are over the age of 65. By 2051 this figure will have changed to 1 in 4. NSW already has almost 1 million men and women over 65 years of age. To the potential implications of this ageing population is added the reality that many Australians, especially the “baby boomers” have inadequate superannuation and retirement savings to fund their retirement and health care needs. In 1999 there were 10,000 Australian divorced women aged 59; by 2004 this figure was expected to grow by 50% and by 100% by 2009. This group, in particular, faces a bleak future in retirement. Poverty and isolation in old age, possibly in a setting of intergenerational hostility, may well add to the incidence of depression in the community, which is already expected to be the major health threat by 2020. As the nexus between poverty and crime is well established, there are prospects of increasing numbers of aged people being incarcerated, if only as they seek to be cared for. The prison design will have to take this into consideration, seeking design inspiration from aged care facilities and hospitals.

### **Indigenous prisoners**

*The Australian Capital Territory Population Projections 2002-2032 and Beyond*. Canberra: Chief Minister’s Department, June 2003 reports that the Indigenous population in Canberra, currently approximately 1.2% of the total population, is expected to continue to increase both in number and as a proportion of the total population, due to the higher levels of fertility (nationally 2.2:1.75), high migration into the ACT and an increasing propensity for people of Indigenous descent to identify themselves as Indigenous people.

For the 2002 – 03 financial year, based on the daily average figure, people of an Aboriginal or Torres Strait Islander background represented 15.74% of detainees at the Belconnen Remand Centre (BRC) (out of 734 admissions, 117 were persons of Aboriginal or Torres Strait Islander background). This constitutes a rise from the 2001`-02 financial year of 34.5%, where 11.7% of detainees were of Aboriginal or Torres Strait Islander background (out of 666 admissions, 78 were persons of Aboriginal or Torres Strait Islander background). A slight downward trend was observed in 2004 – 05 to 14.24% and in 2005 – 06 to 13.97%. However, the overall trend from 2001 – 02 to 2005 – 06 has been an increase in Indigenous representation in the remand population in the ACT.

The demographic factors outlined in the previous paragraph indicate that there are prospects that this over -representation could increase, with attendant risks to the well-being of Indigenous prisoners because their accumulated adverse life experiences heightens their vulnerability in general, but particularly in the correctional setting.

To address these issues, the Operating Philosophy of the AMC will have regard to not only the recommendations of the *Royal Commission Into Aboriginal Deaths in Custody*, and the *Bringing Them Home Report* of the *National Inquiry into The Separation of Aboriginal and Torres Strait Islander Children from Their Families*, but also to more recent and relevant documents including:

Waller, K. (1993). *Suicide and Other Self Harm in Correctional Centres*. NSW Government, Sydney

Memmot, P, Eckermann, K & Brawn, G. (1999). *Indigenous Cultures and the Design of Custodial Environments: Proceedings of a National Workshop held in Alice Springs, NT November 1998*. Aboriginal Environments Research Centre, University of Queensland, Brisbane.

Ombudsman. (2000). *Report on an investigation into deaths in prisons*. December, Government of Western Australia, Perth.

Ombudsman. (2001). *Report on an Inquiry into Risdon Prison*. June, Government of Tasmania. Hobart.

The Aboriginal Justice Advisory Committee (AJAC), an advisory body to the ACT Government, produced a *Justice Strategy Report* in 2004, which considered ways in which to reduce the over-representation of Aboriginal and Torres Strait Islander people in the criminal justice system. One of AJAC's recommendations was the establishment of Circle Sentencing in the ACT. A pilot has since been implemented.

The AMC will provide a opportunity for ACT Corrective Services to further develop its collaboration with other government agencies in responding to issues arising from the relationship between Indigenous offending and imprisonment. In addition, the staff of the AMC will seek to expand the engagement with Indigenous groups and Indigenous leadership in the management of Indigenous people placed in the care and custody of ACT Corrective Services. An Indigenous Official Visitor will be appointed to allow greater access of Indigenous prisoners to a culturally aware advocate and the role of Indigenous Liaison Officer will be expanded.

### **Prisoner Projections**

To inform planning for the prison, prisoner projections were undertaken by John Walker, Crime Trends Analysis; and the ACT Department of Treasury. Projections were run over a 20-year period (Walker 2002) and 40-year period (Treasury 2002). For the purpose herein the focus will be on the projected number of prisoners and remandees at opening, which is anticipated to be in late 2007.

|           | WALKER | TREASURY |
|-----------|--------|----------|
| Remand    | 92     | 89       |
| Sentenced | 260    | 150      |
| TOTAL     | 352    | 239      |

June 2007

Planning for the ACT Prison has been based on numbers agreed by ACT Treasury. Walker's projections are provided for comparison and indicate a possible 'worse case scenario' or risk with regard to the provision of services should these numbers eventuate.

### **Prisoner Classifications**

Classification numbers are useful as it is planned that a number of minimum-security prisoners will be accommodated in the Transitional Release Centre and will be eligible for day and works release. Interventions will be targeted at medium and maximum classified prisoners. Although some minimum-security prisoners will also be engaged in programs, it is likely that the majority of those not accommodated in the Transitional Release Centre will be employed within the prison with



emphasis on vocational training in preparation for placement in the Transitional Release Centre and re-integration.

The current classification system used in the NSW prison system does not necessarily assess risk of recidivism or identify criminogenic risk factors to inform rehabilitation planning. It may be that the introduction of risk assessment in the AMC will show a different classification distribution.

### 2001-2003 Classification Distribution

|          | <b>Max</b> | <b>%</b> | <b>Med</b> | <b>%</b> | <b>Min</b> | <b>%</b> | <b>Total</b> |
|----------|------------|----------|------------|----------|------------|----------|--------------|
| Dec-01   | 8          | 5.2      | 32         | 21.1     | 111        | 73.5     | 151          |
| Mar-02   | 13         | 9.6      | 29         | 21.48    | 93         | 68.8     | 135          |
| Jun-02   | 12         | 9.6      | 27         | 21.7     | 85         | 68.5     | 124          |
| Sep-02   | 7          | 5.6      | 30         | 24       | 88         | 70.4     | 125          |
| Dec-02   | 7          | 4.9      | 26         | 18.4     | 108        | 76.5     | 141          |
| Mar-03   | 6          | 4.5      | 26         | 19.6     | 100        | 75.7     | 132          |
| Jun-03   | 11         | 9.2      | 24         | 20.1     | 84         | 70.5     | 119          |
| Sep-03   | 4          | 3.4      | 20         | 17.3     | 91         | 79       | 115          |
| Dec-03   | 3          | 2.5      | 17         | 14.2     | 99         | 83       | 119          |
| Averages | 7.8        | 6.0      | 25.6       | 19.7     | 95.4       | 73.9     | 129          |

The number of prisoners in each classification upon commissioning in late 2007 may be estimated as approximately 6% maximum, 20% medium and 74% minimum.

### Number of Prisoners by Classification at Opening

The needs of Remand prisoners and what can be realistically provided to them differs from that of sentenced prisoners. It can be assumed from the prisoner projections provided by both Walker and Treasury that the number of prisoners held on remand in 2007 will be approximately 90 and appropriate interventions and services should be provided for this number.

With regard to sentenced prisoners Walker (2002) and Treasury (2002) differ substantially therefore both are calculated below to provide an indication of high and low probabilities.

| <b>Classifications</b> | <b>Walker</b> | <b>Treasury</b> |
|------------------------|---------------|-----------------|
| Maximum 6%             | 15.6          | 9               |
| Medium 20%             | 52            | 30              |
| Minimum 74%            | 192.4         | 111             |
| <b>TOTAL</b>           | <b>260</b>    | <b>150</b>      |

Based on Treasury numbers and prison bed allocation, 55 minimum-security prisoners<sup>3</sup> may be accommodated in the Transitional Release Centre and thereby eligible for day and works release. The remaining 56 will be accommodated within the secure perimeter and will be required to participate in structured day activities including employment within the prison, vocational education and rehabilitative programs, recreation and health programs.

<sup>3</sup> The Transitional Release Centre will have capacity to accommodate up to 60 prisoners, however, 10% of capacity has been allowed for the separation of categories of prisoners who may not reside together.

Treasury projections indicate that structured day programs and activities would need to be provided for 56 minimum, 30 medium and 9 maximum-security prisoners, and a total of 95 prisoners.

## Prisoner Profile

### Length of Sentence/days in custody

Length of stay in custody will be a useful indicator of what interventions are achievable with the majority of prisoners and remandees.

### Average length of stay - remand

Average and median length of stay on remand (that is, days in custody), over the six year period from 1996 to 2002, demonstrate a slight reduction in the length of stay (Table). The median is provided as averages may be distorted by a very few long or short terms of stay.

Table: Average & median remandee length of stay (days in custody), 1996-97 to 2001-02.

|                | Average length<br>of stay | Median length<br>of stay |
|----------------|---------------------------|--------------------------|
| <b>1996-97</b> | 36.25                     | 15                       |
| <b>1997-98</b> | 30.79                     | 13                       |
| <b>1998-99</b> | 42.73                     | 15                       |
| <b>1999-00</b> | 32.93                     | 10                       |
| <b>2000-01</b> | 33.92                     | 10                       |
| <b>2001-02</b> | 34.22                     | 12                       |

Source: ACT Corrective Services

### Average length of stay - sentenced

Average and median lengths of sentence for ACT prisoners over the six-year period 1996 to 2002 are shown in Table. The median is provided as a few very long or short sentences can significantly affect averages.

Table: Average & median sentenced ACT prisoner's length of stay (days in incarceration), 1996-97 to 2001-02.

|                | Average Length<br>of Stay | Median Length<br>of Stay |
|----------------|---------------------------|--------------------------|
| <b>1996-97</b> | 269.41                    | 60                       |
| <b>1997-98</b> | 304.09                    | 141                      |
| <b>1998-99</b> | 369.47                    | 255                      |
| <b>1999-00</b> | 520.37                    | 261.5                    |
| <b>2000-01</b> | 437.28                    | 274                      |
| <b>2001-02</b> | 449.79                    | 272                      |

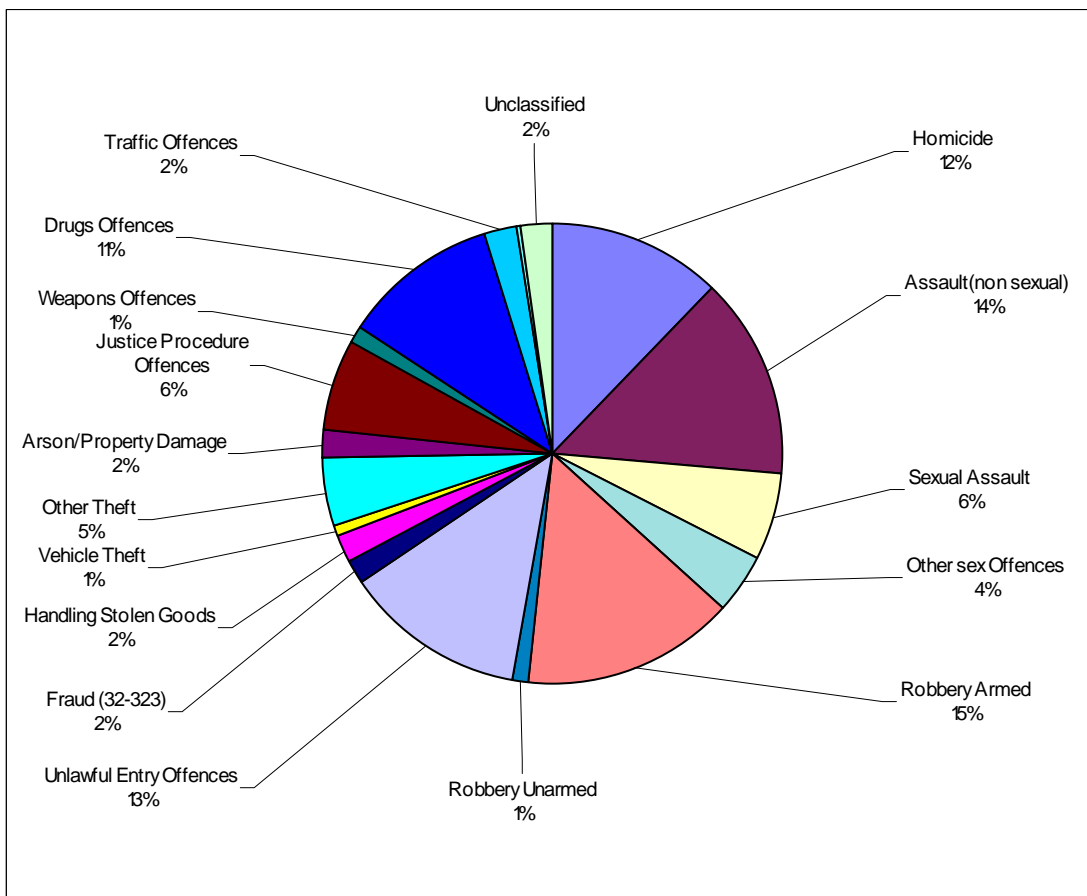
Source: ACT Corrective Services

The sentence lengths demonstrate that the majority of prisoners would be able to complete rehabilitative programs during their sentence. The exception to this may be sex offenders, however the program could be continued on a community-based order post-release.

Sentenced prisoners by most serious offence

To plan for rehabilitation programs it may be useful to assess the offence types of ACT prisoners. For example, the high rates of violent offences indicates a need to adequately resource the violent offenders program.

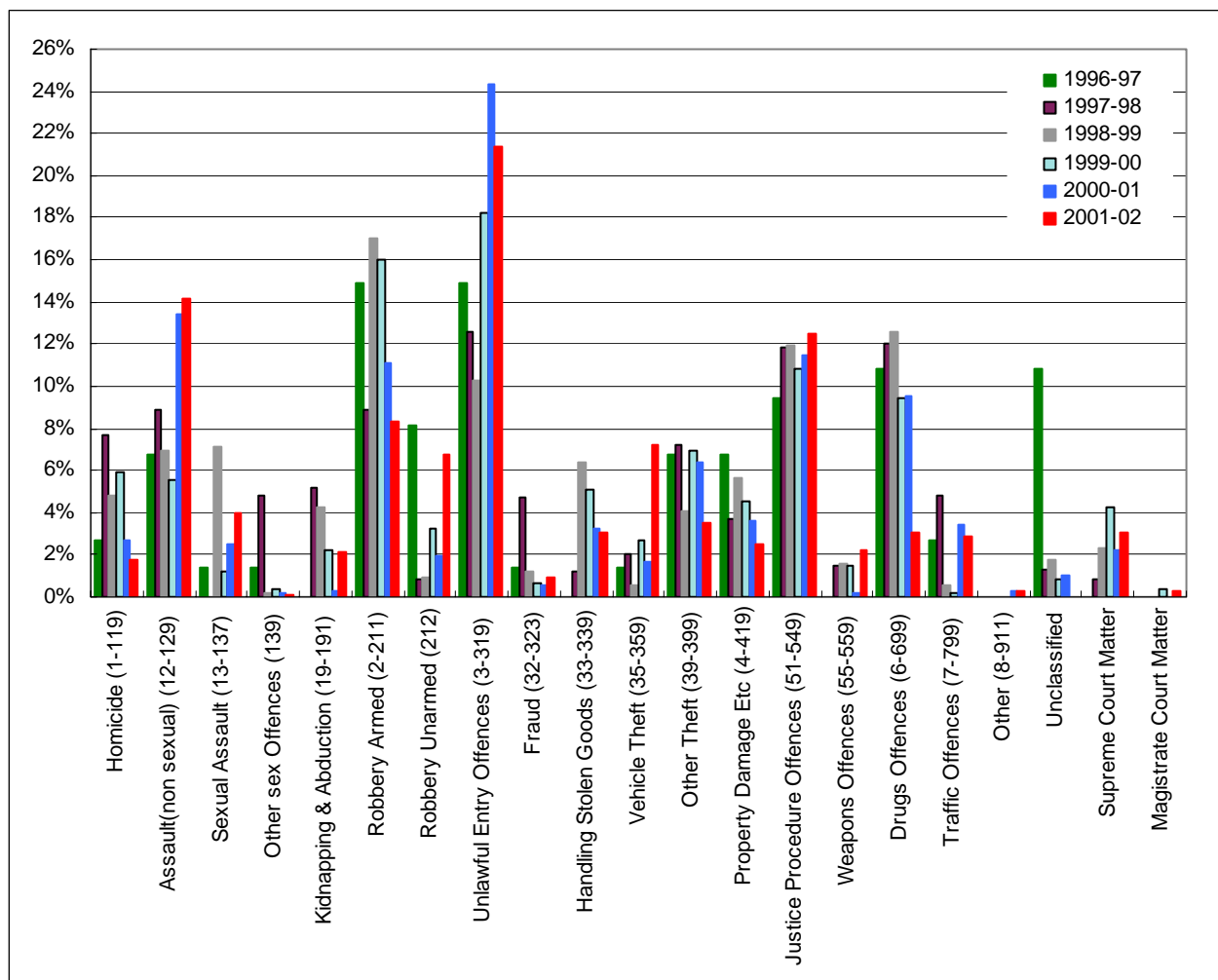
A profile of ACT sentenced prisoners by most serious offence; averaged over a six year period from 1996 to 2002 is provided at Figure 1 below. The largest proportion of ACT prisoners, during this period, was incarcerated for the offences of Armed Robbery (15%), Assault (14%), Unlawful Entry (13%) and Homicide (12%). Figure shows the trend in most serious offences over the same period.



Source: ACT Corrective Services

Figure 1: Profile of sentenced prisoners by most serious offence, 1996-97 to 2001-02.

Trends in most serious offences over the six year period from 1996 to 2002 are illustrated in Figure 2. Most noticeably the figure demonstrates the sharp upward trend in unlawful entry offences in 2000 – 01 which declines slightly in 2001 - 02.



Source: ACT Corrective Services

Trends in remandees’ most serious offences over six-year period, 1996 to 2002.

### Education Level of ACT Prisoners

A list of ACT prisoners in March 2004 showed 114 prisoners were accommodated in NSW correctional facilities. Subjects were randomly selected from this list. Firstly, every fifth prisoner, then every third prisoner, on the list was selected until 20 Community Corrections files could be obtained. The 20 subjects represent 17.5% of ACT prisoners at March 2004. As there were only 3 women ACT prisoners at the time, it is not surprising that all of the subjects were male. Data on education levels was obtained from Pre-Sentence Reports and are likely to be more accurate than self-reporting, as information in Pre-Sentence Reports is verified, where possible.

The results showed that, of the 20 subjects:

60% had achieved less than Year 10 (12 subjects)  
15% had achieved Year 10 (3 subjects) and,  
25% had achieved greater than Year 10 (5 subjects).

The majority of prisoners would be offered courses to achieve a Year 10 equivalency or other skills to provide them with marketable workforce potential.

A further study was undertaken in November 2004 in which 31 ACT prisoners accommodated in NSW correctional facilities participated in a structured interview to identify their needs and what study or work they were undertaking at that time.

#### Age of ACT Prisoners

The same exercise described above was used to gain an indication of the age of ACT prisoners. The sample of 20 prisoners current at March 2004, showed an average age of 32.9 years. The youngest being aged 21 years and the oldest, 58 years.

The mean is probably the most useful indicator for the purposes of this exercise (planning for prisoner re-integration) however, for the sake of interest both the median and mode were calculated as 35 years and 36 years respectively.

Prisoners ages will be relevant to the type of work preparation needed and eligibility for courses. For example, many CIT courses have a pre-requisite of Year 10 education or mature age, which is defined as being over 20 years. All current prisoners, (at the time of this report) would then be categorised as mature age students.

#### **Skills Forecast**

Current research shows that approximately 95% of prisoners in custody will be released as only 4% are serving life sentences (Australian Institute of Criminology, 3 Feb 2004, *Prisoner post release services Crime Facts Info No.67*). It is essential that prisoners be given every opportunity to return to society and to function normally with society. A key element in this process is the provision of VET to address deficits in this area.

The Department of Education and Workplace Relations (DEWR) 2004 publication *Job Outlook* reports that there is good long term job prospects in the Retail, Automotive, Construction and Hospitality areas. These are program areas easily provided within the prison setting.

However, the Department of Education Science and Training, 2002 report *Employability Skills for the Future*, indicates that it is no longer adequate to only have technical or job specific skills. Employers are realising to achieve high levels of productivity they require staff who have both generic skills and personal employability attributes. The key generic skills identified are:

- Communication
- Problem Solving
- Initiative/Enterprise
- Self-Management
- Planning and Organising

There is sufficient research available<sup>4</sup> that shows there is an absence of some or all of these skills in the majority of prisoners in custody.

The personal employability attributes required include:

- Loyalty
- Commitment
- Motivation
- Honesty
- Self Esteem
- Reliability

These attributes can be developed through appropriate programs and a positive relationship with staff and the broader community.

The following table provides an indication of skills and attributes that may be developed in some of the proposed AMC programs.

**Skill/Attributes Development in AMC Programs**

| <b>Skills</b>           | <b>Drug &amp; Alc</b> | <b>Cog Skills</b> | <b>Violent Behaviour</b> | <b>Sex Offender</b> | <b>Parenting</b> | <b>Healthy living / Health Promo</b> | <b>Mental Health Support</b> | <b>Educ-<br/>ion</b> |
|-------------------------|-----------------------|-------------------|--------------------------|---------------------|------------------|--------------------------------------|------------------------------|----------------------|
| Communication           | <b>x</b>              | <b>x</b>          | <b>x</b>                 | <b>x</b>            | <b>x</b>         |                                      | <b>x</b>                     | <b>x</b>             |
| Problem solving         | <b>x</b>              | <b>x</b>          | <b>x</b>                 | <b>x</b>            | <b>x</b>         | <b>x</b>                             | <b>x</b>                     | <b>x</b>             |
| Initiative /enterprise  |                       |                   |                          |                     |                  |                                      |                              | <b>x</b>             |
| Self-management         | <b>x</b>              | <b>x</b>          | <b>x</b>                 | <b>x</b>            | <b>x</b>         | <b>x</b>                             | <b>x</b>                     | <b>x</b>             |
| Planning and organising |                       | <b>x</b>          | <b>x</b>                 |                     | <b>x</b>         | <b>x</b>                             |                              | <b>x</b>             |
| <b>Attributes</b>       |                       |                   |                          |                     |                  |                                      |                              |                      |
| Loyalty                 |                       |                   |                          |                     |                  |                                      |                              |                      |
| Commitment              | <b>x</b>              | <b>x</b>          | <b>x</b>                 | <b>x</b>            | <b>x</b>         | <b>x</b>                             | <b>x</b>                     | <b>x</b>             |
| Motivation              | <b>x</b>              | <b>x</b>          | <b>x</b>                 | <b>x</b>            | <b>x</b>         | <b>x</b>                             | <b>x</b>                     | <b>x</b>             |
| Honesty                 | <b>x</b>              | <b>x</b>          | <b>x</b>                 | <b>x</b>            | <b>x</b>         | <b>x</b>                             | <b>x</b>                     |                      |
| Self esteem             | <b>x</b>              | <b>x</b>          | <b>x</b>                 | <b>x</b>            | <b>x</b>         | <b>x</b>                             | <b>x</b>                     | <b>x</b>             |
| Reliability             | <b>x</b>              | <b>x</b>          | <b>x</b>                 | <b>x</b>            | <b>x</b>         | <b>x</b>                             | <b>x</b>                     | <b>x</b>             |

<sup>4</sup> See Gendreau et al 2 1996:13

## **Section Three- Supply Factors**

### **Staffing**

An appropriate number and mix of suitably qualified and trained staff will contribute to the delivery of programs within the AMC (see Workforce Plan).

### **What Works in Reducing Offending Behaviour**

In recent years a great deal of research, eg Andrews (2001) and Andrews & Bonta (2003) has been undertaken to ascertain the features of interventions, which reduce the levels of recidivism among offenders<sup>5</sup>. The research indicates that reductions in recidivism are to be found through the design and delivery of clinically relevant and psychologically appropriate human service under conditions and settings considered just, ethical, legal, decent, efficient and otherwise normative. Subsequently, interventions should be based on psychological theories of criminal behaviour, which focus on reducing the offending of individuals. The recommended psychological perspective is a broadband general personality and social learning approach to understanding variation in criminal behaviour. This perspective identifies the following eight risk factors (“the big eight”) as being the common risk factors for recidivism:

- anti-social cognitions;
- anti-social associates;
- a history of anti-social behaviour;
- anti-social personality patterns;
- problematic circumstances in the family/marital domains;
- problematic circumstances in the work/school domain;
- problematic circumstances in leisure/recreation domains; and
- substance abuse.

Andrews (2001) has also identified a number of key principles that have gained broad consensus of researchers in the field of criminology. They are:

- Treatment is thought to be best delivered in community-based settings, rather than residential/institutional settings, as community-based programs allow offenders to rehearse and demonstrate the skills they have developed in the environment in which they will be residing and be exposed to risks.
- More intensive human services are best reserved for higher risk cases. However, Andrews notes that the research has yet to demonstrate effective treatments with the highest risk offenders such as psychopaths. Lower risk cases may be diverted from the correctional system or dealt with by way of community based dispositions in order to reduce recidivism. However, care must be taken that these dispositions do not inadvertently increase risk through, for example, increased associations with other offenders such as may occur through community service work crews.
- Effective treatments target a number of criminogenic needs, rather than just focussing on general needs.

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<sup>5</sup> Andrews (2001) refers to offenders in general, rather than prisoners, as the theory is as relevant for offenders serving community-based orders as those in custody.

- Effective treatments aim to reduce criminogenic needs, that is, those factors in offending which are associated with reduced recidivism when addressed or those protective factors which, when enhanced are also associated with reductions in recidivism. Criminogenic needs include all of “the big 8” listed above (apart from having a history of antisocial behaviour which is immutable), and include deficits in self-management, self-regulation and problems solving skills. Interventions should also aim to increase the rewards for non-criminal behaviour in home, work and study.
- Risk and criminogenic need are best assessed through validated risk/need assessment instruments, such as the Level of Service Inventory – Revised (LSI-R). Specialised risk/need assessment instruments should be used when addressing specialised areas such as sex offending or family violence.
- The general responsivity principle outlines the style, modes and influence strategies used by interventions with offenders. Interventions should typically have a positive impact with offenders. Interventions should include reinforcement, modelling, skill acquisition through reinforced practice and graduated approximations. Staff who have high quality interpersonal relationships and are open, warm, non-hostile, non-blaming and engaging should deliver these interventions.
- The specific responsivity principle outlines how interventions need to be tailored to the specific strengths and needs of particular offenders, such as structured approaches for immature offenders, concrete approaches with offenders who have low verbal intelligence, and interventions targeted according to the level of motivation of the offender.
- Assessment of responsivity and strength factors of an offender should be included as a routine part of assessment, and this should form an important part of treatment planning.
- Interventions should include after care, structured follow-up, continuity of care and follow the principles of relapse prevention. Effective interventions allow for the use of professional discretion in unusual cases where a departure from the normal methods may be appropriate.
- Rehabilitation Plans should be based on formal assessments of risk, need and responsivity and should be revised following re-assessment and any progress made by the offender. The Rehabilitation Plan should outline how these various elements will be addressed.
- Programs should be delivered in the manner in which they were intended (program integrity). To achieve this, intervention programs should:
  - be based upon a specific, empirically sound theory;
  - select staff based on attributes associated with successful intervention;
  - train staff to ensure they can deliver the program properly;
  - supervise staff on a regular basis;
  - use trained clinical supervisors;
  - have consultation services available for clinical supervisors;
  - have printed/taped program manuals;
  - monitor service delivery for quality;
  - monitor changes in offenders;
  - take action to ensure adherence to service process;
  - provide an adequate dosage, duration, and intensity of service;
  - involve a researcher in the design, delivery and evaluation of the service; and



- ensure that other staff and management issues support rather than undermine the integrity of the program.
- Programs should hire and retain staff with the necessary attributes to be able to deliver the program as intended and provide a role model for offenders. Effective staff will relate in a warm, enthusiastic, flexible and caring manner. They will be directive, solution focussed, and use approval selectively to reward appropriate behaviour. Staff should believe in the ability of offenders to change, believe that core correctional practice works, believe that they have the skills to implement such practice, believe that reducing recidivism is a worthwhile pursuit and that core correctional practice is supported by their managers.
- Effective managers who also possess the staff qualities noted above should support programs. Management is responsible for creating and maintaining program integrity.
- Effective programs will attend to broader social arrangements in their jurisdiction (such as public safety, restorative justice etc.), while ensuring that the above principles are attended to.

## **Programs**

### Objectives and Desired Policy Outcomes

A range of rehabilitative prison programs, based on evidenced-based risk and needs assessment, will be provided to prisoners' reduce their risk of re-offending and improve their opportunities for self-development. These programs may also increase prisoners' opportunities for successful integration into the ACT community upon release. The provision of programs, based on a comprehensive analysis of risk and need, will also ensure that finite resources are targeted to where they are most required and potentially most effective.

The realities of sentencing may restrict program availability for particular groups of prisoners. For example, many prisoners are sentenced to relatively short periods of incarceration that limits the range of programs, which can be initiated and completed while the prisoner is in custody. In addition, as the likely time persons on remand may spend in prison is often unpredictable, the effectiveness of criminogenic programs and their scope for rehabilitation is potentially undermined. Some correctional jurisdictions respond to this situation by placing restrictions on program availability for those serving sentences of six months or less. ACT Corrective Services has largely overcome this difficulty when addressing general offending behaviour by adopting the Cognitive Self-Change program. This program has a rolling group format, allowing participants to enter at any stage, whether in the prison or in the community following release. Nevertheless, there remain limitations on what Corrective Services can achieve with short-term remand prisoners.

To aid prisoner rehabilitation and prison management, a range of criminogenic treatment programs are essential and must be complemented with a range of vocational, educational and life skills interventions. Programs should offer choice and flexibility, particularly as persons in prison have a wide range of learning experiences and difficulties and will spend varying periods of time in prison. Some programs may be available both on an individual and small group basis.

Prison programs need to be well-managed and coordinated. They must be appropriately resourced and evaluated on an ongoing basis to determine effectiveness and inform future direction. Where possible, programs that can be continued after prison and/or that can be credited towards an external qualification should be encouraged and arranged.

## **Criminogenic Programs Assessment Tools**

Programs in the AMC are to be delivered based on risk and needs assessment. Assessment instruments currently used by ACT Corrective Services are as follows:

### Level of Service Inventory - Revised (LSI-R)

This is a 54-item rating scale used to assess the likelihood of general recidivism among adult offenders. It is designed to measure attributes of offenders and their situations in relation to level of supervision and treatment decisions. It has been validated for use with adult male and female correctional offenders. This is currently the standard risk assessment tool used by ACT Corrective Services.

### Level of Service Case Management Inventory (LS/CMI)

The LS/CMI is a further evolution of the LSI-R and includes the offenders recommended Rehabilitation Plan. This instrument is being investigated for use with ACT offenders.

### STATIC-99

The Static-99 is a brief actuarial instrument designed to estimate the probability of sexual and violent recidivism among adult males who have already been convicted of at least one sexual offence against a child or non-consenting adult.

The Static-99 is intended to be a measure of long-term risk potential. Given its lack of dynamic factors, it cannot be used to select treatment targets, measure change, evaluate whether offenders have benefited from treatment, or predict when (or under what circumstances) sex offenders are likely to re-offend. It is not recommended for adolescents (less than 18 years at time of release), female offenders or offenders who have only been convicted of prostitution, pimping, public toileting (sex in public locations with consenting adults), or possession of indecent materials. The Static-99 should be administered in an interview setting by trained professionals, specifically, staff employed within the Sex Offender Program.

### STABLE 2000

Sex offender risk assessment instruments primarily focus on historical (static) factors as opposed to changeable (dynamic) risk factors. In an effort to determine the efficacy of dynamic factors to predict risk, R. Karl Hanson and Andrew Harris developed the Dynamic Risk Supervision Project, which incorporates Static-99 (Hanson & Thornton, 1999), Stable-2000 Dynamic (Hanson & Harris 2005) and Acute-2000 Dynamic (Hanson & Harris 2005) predictors.

### P SCAN

The P-Scan provides a useful tool for developing a hypothesis for a particular person of interest, with respect to Psychopathy, and for managing risk for antisocial, criminal, and violent behaviour. It is designed for use in law enforcement, probations, corrections, civil and forensic facilities, and other areas in which it would be useful to have some information about the possible presence of psychopathic features in a person of interest.

### Psychopathy Check List – Revised (PCL-R)

The Hare Psychopathy Checklist – Revised (PCL-R) is widely accepted as the most reliable and valid method for assessing psychopathy and is rapidly being adopted worldwide as the gold-standard instrument for risk assessment. The PCL-R and the more recent screening version, the PCL:SV, are strong predictors of recidivism, violence and response to therapeutic intervention.

Both the PCL-R and PCL:SV are routinely used to assess risk in a variety of forensic populations, to aid sentencing decisions, treatment suitability and institutional placements

Note: The potential for harm is considerable if the PCL-R is used incorrectly, or if the user is not familiar with the clinical and empirical literature pertaining to psychopathy. Therefore, only those professionals who have been formally trained should administer this instrument.

#### Spousal Assault Risk Assessment (SARA)

The Spousal Assault Risk Assessment is a 20 items, paper and pencil checklist designed to screen for risk factors of spousal or family-related assault, predict domestic violence. It is a quality control checklist that can determine the extent to which a professional has assessed those risk factors deemed to be of crucial predictive importance by the clinical and empirical literature. The SARA is typically used when professionals believe that an individual poses a threat to his/her spouse, children, or another family member.

#### **Programs Currently Delivered (August 2006)**

##### The Cognitive Self-Change (CSC) Program

The Cognitive Self-Change Program was first designed by Dr Jack Bush in 1989 and has operated in the Vermont Department of Correctional Services for 17 years. Dr Bush is recognized internationally as an expert in Cognitive Behavioural programs for offenders.

The Program is available to any offender who:

- does not have an acute mental health issue; and/or
- does not have a substance abuse problem that would prevent them from participating fully in the program or cause them to disrupt others in the group.

The CSC Program aims to teach skills that will enhance an offender's ability to direct their lives in a more pro-social manner by managing their thinking. The Program is designed to teach violent and high-risk offenders how to steer their thinking away from violence and crime, and to develop their self-esteem. The methods used to achieve these outcomes are Thinking Reports<sup>6</sup>, Cognitive Check-ins, and journal assignments.

The CSC Program avoids fuelling resistance in participants by not engaging in arguments of the rightness of wrongness of their thoughts and attitudes, rather, the participant learns to objectively observe their own thoughts and attitudes and understand how these contribute to criminal behaviour. The choice to change thoughts and attitudes is left entirely up to the participant, however CSC Program insists that the participant learn how to change their thinking, so they can change their attitudes if they so wish.

Program facilitators provide individualized assistance and support to participants as required throughout the program. However, it is up to each participant to complete all tasks (including weekly homework tasks) satisfactorily. In the community group sessions are conducted once a week for a period of two hours. There are two staff facilitators and up to eight group members in each group. The program facilitators work very closely with the Probation and Parole Officers (PPO's) throughout the program. Case tracking meetings between case managers and program co-

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<sup>6</sup> The Thinking Report identifies those thoughts leading to, and enabling offending behaviour.

ordinators are conducted to enhance participation in the program and to monitor participant progress.

Evaluations of the CSC have found that it reduced three-year recidivism rates from 70% to 50% (Frueh et al 1996) and that it reduced institutional behavioural problems when offered in custody (Baro, 1999).

#### Family Violence Cognitive Self-Change Program

The Family Violence Self-Change program (FVSC) is conducted using the same principles as the Cognitive Self-Change program. However, all participants engaging in the Program have family violence as the index offence or part of it. It is a cognitive restructuring program in which participants undertake an examination of the thoughts feelings attitudes and beliefs that underlie family violence. Participants gain an understanding of how their cognitions operate across the range of their violent and abusive behaviour and develop and practice alternative thinking and behaviour.

The Program is suitable for male perpetrators who have been violent or abusive towards a female partner, same sex partner violence and where there has been violence towards family members other than the partner or ex-partner.

Female perpetrators of family violence will be placed in the Women's Cognitive Self-Change group.

Eligibility criteria include:

- No mental health issues that would prevent an offender from participating in a group; and
- Any alcohol or drug abuse is being addressed in a satisfactory manner.

#### Sex Offender Programs (SOP)

It is important to acknowledge that although most sexual offenders can be treated, there is no recognised 'cure' for sexual offending behaviour. ACT Corrective Services has sought to develop a holistic program that endeavours to address general offending attitudes and behaviour amongst adult sexual perpetrators. The programs aim to equip them with the necessary skills and attitudes to avoid future offending. The adult program is entitled 'Adult Sex Offender Program (ASOP)'.

The primary objective of the ASOP is to reduce the risk of sexual recidivism and thereby to enhance community safety. It aims to achieve this by:

- providing comprehensive assessments which accurately identify the recidivism risk, criminogenic needs and best management/treatment strategies for sexually abusive persons who have been referred to the ASOP;
- providing the ACT judiciary, the ACT Corrective Services Probation and Parole Unit (PPU), the Sentence Administration Board, Family Services and other relevant agencies with information, through consultations and reports, that assist those services to better manage sexual offenders in the community;
- developing therapeutic group-based intervention treatment programs which focus on individual treatment targets for each participant and where necessary provide individual treatment therapy; and

- enhancing the knowledge base on sex offender treatment programs through ongoing program evaluation. ACT Corrective Services has established a Program Advisory Group comprising leading academics from within Australia and a Consultative Stakeholders Group whose members are drawn from within the local community to enhance the effective management and treatment of sex offenders in the ACT.

All sexual perpetrators are not alike and have many different pathways to offending. Whilst some offenders believe that their offending is justified, most know that the offending is wrong. However, even these offenders utilise psychological mechanisms to alleviate the shame they feel. These mechanisms, referred to as ‘cognitive distortions’ include a wide range of statements and beliefs that assist the offender to ease the discomfort of the shame, without changing their harmful behaviour.

The assessment process is comprehensive and ongoing. It includes several 1:1 interviews with the offender, interviews with significant others and the administration of various assessment tools to determine the risk/needs of each prospective participant to the treatment program. This results in the development of a risk-management strategy that uses the criminogenic risks and needs identified during the assessment to provide an extensive formula for intervention. The risk management strategy includes an:

- Offence Related Skills and Support Plan which is provided to the referring body. This plan identifies support service needs and aims to address other offence-related behaviours such as violent behaviour, drug and alcohol issues, and relationship issues etc.
- Environmental Management Plan which is provided to the referring body. This plan identifies strategies for environmental management such as recommendations for liaison with significant others in the participant’s life; and
- an Individualised Treatment Plan for use during group therapy sessions or individual sessions.

Potential participants may be either temporarily or permanently unsuitable for entry to a program on the following grounds:

- acute mental health symptoms;
- substance abuse which would prevent them from participating fully in the program or cause them to disrupt others in the group;
- being below a minimum level of intellectual, social, psychosocial functioning;
- scoring highly on the Psychopathy Check List<sup>7</sup>; or
- if they are assessed as presenting little or no risk of sexually re-offending.

Some of the themes covered in the programs include:

- Denial and Resistance;
- Cognitive Distortions and Offence Cycle;
- Victim Empathy;
- Affect Management;
- Relapse Prevention; and
- Maintenance.

Individual treatment plans are reviewed on a quarterly basis. Research to date indicates that most participants in sex offender programs take approximately two years to complete the group program, (based on 2.5 hours of program participation per week) with higher risk offenders possibly taking

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<sup>7</sup> See Psychopathy Checklist-Revised (PCL-R) p 25

even longer. Each participant's progress against several treatment targets is reviewed every three months. Examples of these treatment targets are:

- show insight into victim issues;
- show empathy for victim;
- understanding of lifestyle dynamics;
- understanding of offence cycle; and
- motivation to change behaviour.

Offenders who score poorly against these targets are expected to continue in-group programs until they are assessed as having completed the program, or their sentence expires.

#### Alcohol and Other Drug Programs (Offered in custodial settings only)

Alcohol and Other Drug program encompass both the provision of counselling/case management and the delivery of three programs to detainees at Belconnen Remand Centre (BRC) and Symonston Temporary Remand Centre (STRC). In addition, programs are also provided at the Periodic Detention Centre (PDC).

The following programs are provided:

#### AOD Educational Program

This is a "one-off", 2-hour session, which covers the following topics:

- Information on Blood Borne Viruses – HIV & Hepatitis A, B, & C.
- Modes of transmission.
- Principles of transmission.
- Routs of transmission.
- Course of infections.

In addition, the following is also covered:

- universal precaution rationale;
- behaviour change and harm minimisation strategies, including cleaning, tattooing, piercing, hairdressing, and basic vein care; and
- overdosing and first aid.

#### Drug Awareness

The Drug Awareness program consists of six sessions consists of the following:

- basic drug knowledge – alcohol, cannabis, amphetamine, ecstasy, opiates and hallucinogens;
- change strategies for alcohol and drug reduction;
- harm avoidance strategies;
- harm minimisation strategies;
- treatment options; and
- relapse prevention strategies.

#### AOD Coping Skills Program:

This is a 15 module, rolling group, therapeutic and cognitive skills based program that aims to help participants develop key interpersonal and intra-personal skills, as well as positive strategies for

coping with the everyday demands of life and resisting the urge to use alcohol or drugs. The content of the Program includes:

- training in interpersonal and communication skills including; nonverbal communication, assertiveness, positive feedback, conversation and listening, giving and receiving criticism, alcohol/drug refusal, resolving relationship problems, and developing social support networks; and
- training in intra-personal coping skills, including managing urges to use alcohol or drugs, problem solving, increasing pleasant activities, anger management, dealing with negative thinking, recognising “seemingly unimportant decisions” that may lead to relapse, and planning for emergencies.

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## **Education**

### Objectives and Desired Policy Outcomes

Education programs aim to increase the personal, social and community life opportunities and employment prospects for prisoners. They will be integrated into prison employment and training programs, which will provide prisoners with opportunities to foster skills for productive, crime-free lives.

Prison education and training programs will provide prisoners with opportunities for the development of personal skills and vocational and/or educational competencies leading to the attainment of a recognised qualification;

- education and training relevant to prison employment or job experience, e.g. kitchen workers should be able to be trained and assessed in hospitality industry competencies and standards;
- transferability and/or continuation of prison programs to those in the community upon release, i.e. prison program outcomes should be similar to those in the community;
- encouragement to develop short and long-term goals utilising flexible training pathways to access nationally accredited qualifications;
- recognition of prior learning;
- education and training by registered training organisation/s, using qualified, experienced educators/trainers who:
  - understand adult learning principles and education delivery,
  - appreciate the requirements for cultural inclusion;
  - foster prisoner responsibility for their own learning and the outcomes of that learning,
  - cater for diverse prisoner needs and learning approaches; and
  - development of mentor support that involves appropriately trained custodial officers and/or community volunteers or prisoners.

The UK Home Office publication, *An evaluation of the literacy demands of general offending behaviour programmes* (Davies, K. Lewis, J. et al. 2004) found that the literacy demands (including reading, writing, speaking and listening) of programmes run in the UK were high and that tutors experienced some problems in adjusting the delivery of the programmes to accommodate the literacy needs of some offenders. The publication recommends the assessment of offenders’ literacy skills be undertaken and available to programme tutors for all offenders. This is supported by the Australian Commonwealth National Literacy Assessment Project Working Party (2005) who have developed the *Correctional Services National Language, Literacy and Numeracy Indicator Tool (CSLLN)*

- It may be necessary for some offenders, as identified by the CSSLN to participate in LLN education prior to involvement in a treatment programme, or to inform the adaptation of criminogenic programs to suit offenders with literacy difficulties.

### Literacy and Numeracy Assessment

Literacy and Numeracy Assessment in the AMC will follow the following principles:

- assessment will be an ongoing process;
- effective assessment is an integral part of instruction;
- assessment will be authentic, reflecting ‘real’ reading and writing;
- assessment will be a collaborative, reflective process;
- effective assessment is multidimensional;
- assessment will be developmentally and culturally appropriate; and
- effective assessment will identify students’ strengths; and
- assessment will be based on what is known about how students learn to read and write. Cooper (1997).

### Assessment Tool

The numeracy assessment tool to be used in the AMC is the *Correctional Services Language Literacy and Numeracy Indicator Tool 2005*.

This tool provides only an initial indicator and is designed for administration by correctional staff with minimal training. It is aligned with the National Reporting System (NRS) for Language Literacy and Numeracy (LLN) screening levels 1,2 and 3. It is designed to identify prisoners with:

- English as a second language needs;
- reading, writing and maths needs;
- learning/intellectual disabilities; and
- specific cultural needs.

Administration of the tool will take 10 to 30 minutes and involves three assessment stages of a series of brief exercises completed by the prisoner. If a prisoner is able to complete stage one, they move on to stage two. If unable to complete the first stage, the assessment is ended and the details forwarded to a qualified LLN assessor. Similarly, if the prisoner struggles with stage two, they should not be required to go on to stage three and the results of the assessment are forward to the qualified assessor. At the AMC, qualified assessors will be Auswide employees.

At completion of the assessment, in any stage, the interviewer completes a cover sheet outlining their observations of the prisoner and all information is forwarded to the VET provider. The cover sheet should also be attached to the prisoner’s Case Management file to enable Rehabilitation Planning to realistically account for any LLN needs of the individual.

### **Spiritual Well-Being**

Australia has ratified the *International Covenant on Civil and Political Rights*, which provides, at Article 18, that “Everyone shall have the right to freedom of thought, conscience and religion.” The United Nations *Standard Minimum Rules for the Treatment of Prisoners* (1955) recognises the central role of religion in the lives of the incarcerated and the *Standard Guidelines for Corrections in Australia* (1996) contains guidance on the spiritual needs of Indigenous Australians who represent such a high proportion of the nation’s imprisoned.



Religion in the correctional setting has specific and important roles:

- Firstly, the explanatory role, wherein religion helps to explain the mysteries of the human condition. Religion provides some explanation of meaning and worth of the individual beyond the prison experience.
- Secondly, religion is prescriptive, with faiths such as Christianity and Islam establishing tenets to which their followers should adhere. Some religious values will conflict with the prevailing prisoner code and prison culture. This will pose difficult contradictions for some prisoners.
- Thirdly, religion has an experiential role. This concerns the experience of conversion and commitment to a faith as, in part, a means to achieving a personal sense of peace in the face of stress, guilt and anxiety arising from the prisoner's sentence. For some prisoners, their faith helps them survive their sentence.
- The final role which religion plays in the correctional setting is social. While much of prison life is insular, Christian, Jewish and Islamic faiths require group worship and the practice of religious rituals in a group environment. Some prisoners will find that the social aspect of religious practice satisfies a particular personal need and fosters connection to religious communities to which they may return or join on release. In this, religion would make a significant contribution to the precepts of Restorative Justice.

The unique and complex religious and spiritual needs of Indigenous prisoners are acknowledged in the *Standard Guidelines for Corrections in Australia*. (1996). These needs will be addressed and promoted through consultation and partnerships with the Indigenous community and by employing approaches grounded in Indigenous values and customs.

The practice of Satanism and future developments in religion and spirituality may well present some particular difficulties for the management of the AMC. Trends towards chauvinism and fundamentalism in Christianity, Islam and Hinduism would not be welcomed in a prison environment which generates its own stresses. Some New Age forms of spirituality may not present any difficulties, but those with more radical or apocalyptic perspectives, may well require the churches, the chaplains and ACTCS to develop comprehensive policy responses, some of which may not be without controversy.

Prisoner programs are directed at influencing pro-social values and behaviours in prisoners. As religion can make a useful contribution in sustaining or reinforcing the moral order, the activities of Chaplains and others involved in prisoner spirituality need to be integrated, where possible, with the endeavours of program staff.

To discharge their immediate responsibilities in the AMC, Chaplains, Elders, or Ngankaris (traditional healers) will have access to prisoners, appropriate AMC prison staff and case managers. They will be provided with an interview room and the use of a multi-purpose area for worship. A "quiet" space, with its Indigenous and non-Indigenous elements and attached storage area, is to be a significant feature of the AMC.

### **Environmental Factors Impacting on Effective Program Delivery**

The effectiveness of prison programs will be influenced by factors surrounding the environment in which the programs are delivered.

In general, the "Healthy Prison" concept, which is a key feature of the AMC Operating Philosophy, supports prison programs and fosters prisoner acceptance of programs. The setting and program delivery will:

- respect the rights of prisoners to learn and develop;
- provide for the total well-being of the prisoner and responsively address issues relating to their families, other relationships and health;
- promote trust and rapport between participants;
- be flexible, free of stress, tension and non-competitive;
- provide encouragement to address offending behaviour;
- be gender and culturally appropriate;
- foster development of mature coping skills, including responsibility for the prisoner's own participation in and achievements from programs;
- be available to all prisoners and, in conjunction with good behaviour, may be the basis for a re-classification of security level;
- involve prison officers and, where appropriate, other prisoners and community volunteers as mentors and tutors;
- be grounded in the immediate and long-term needs of the individual;
- be available at appropriate stages of a prisoner's incarceration, to meet individual prisoner needs;
- offer choice, options and pathways;
- cater for diverse learning/training needs and approaches;
- recognise the multiple program needs of prisoners;
- build on issues of prisoner identity and value;
- accommodate the wishes of prisoners' families and includes their involvement in programs, where appropriate;
- provide opportunities for program continuity in the community upon release;
- be housed in a central, specially designed facility which also contains informal areas for creative and recreational activities and quiet places for reflection and spiritual activities; and
- be grounded in a comprehensive assessment of prisoner program needs.

## **PART B - DELIVERY STRATEGY**

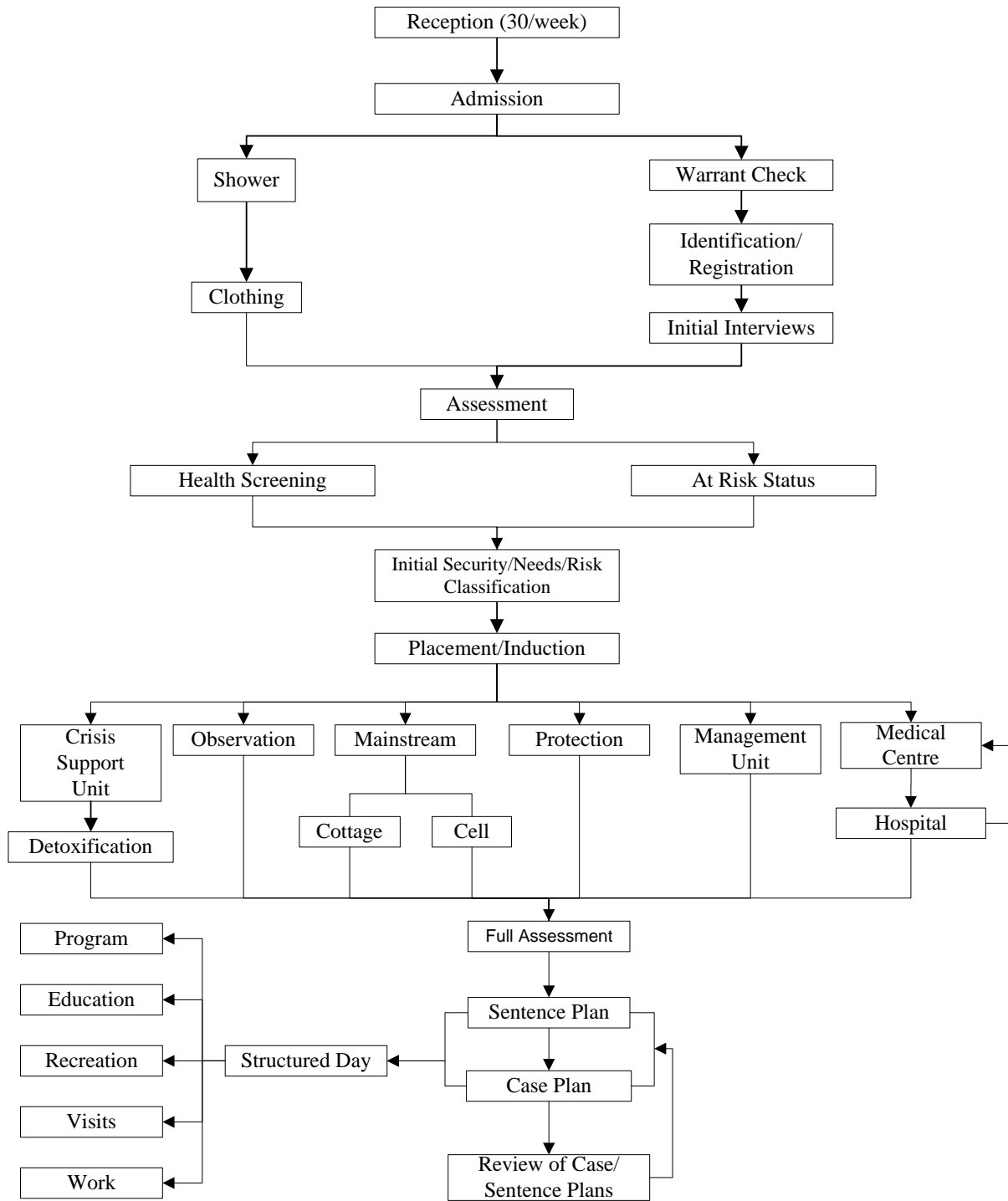
### **Section Four: Operating Model**

The Operating Model of the AMC will reflect a human rights-based approach. Rules and procedures for the AMC and for the care and custody of prisoners have been developed in consultation with the ACT Human Rights Commissioner and the Ombudsman.

The Operating Model of the AMC will be located on a continuum from indirect supervision to direct supervision. The major features of the former are a heavy reliance on distant electronic surveillance and the confinement of officers to secure stations. In contrast, the direct supervision model of the AMC is based on extensive staff (as role models) and prisoner contact, the development of positive relationships with attendant improved surveillance and security and institutional “climate”.

The Operating Model gives effect to the Operating Philosophy, which is described above.

The Operating Model (see following flowchart) describes the range of activities, which will take place within the AMC, with a particular focus on how these activities will impact on the individual prisoner.



## **Admission**

On admission (30 receptions/week) into the AMC, prisoners may well be disoriented, angry, under the influence of drugs or alcohol and may be in a state of anxiety over family, property or their own circumstances.

The following actions will take place:

- the prisoner will be taken out of the vehicle and placed in a holding cell;
- the prisoner will be offered tea/coffee;
- the prisoner will be searched;
- the prisoner will be provided with clean clothing/footwear;
- the prisoner's clothing and property will be documented and secured;
- the prisoner will be permitted a telephone call;
- the prisoner will be photographed, biometrically identified and details entered into the prisoner database;
- case file will be raised, with initial documentation placed in the file;
- where the prisoner is an Indigenous person, the Indigenous Liaison Officer and/or Peer Supporter will be notified; and
- the prisoner will receive an audiovisual and face-to-face briefing on the prison, the processes in which he or she will be involved and his/her responsibilities.

## **Initial Assessment of Risk**

The following actions will take place:

- a custodial officer will check commitment documentation, including any 'at risk' alerts;
- a mental health professional will interview the prisoner, if the prisoner's state permits this, and complete an assessment instrument to give an initial indication of 'at risk' status. A copy of the completed instrument will be made available to prison nursing staff;
- within four hours of reception, a health screening of the prisoner will be completed;
- prison nursing staff will provide the prisoner with information relating to communicable diseases and will offer voluntary blood screening; and
- a determination will be made jointly with the prison nursing staff on whether the prisoner needs to be placed on a detoxification or "at risk" observation regime.

Note: For details of the health aspects of the admission process, see *ACT Health Corrections Health Services Plan*

## **Classification**

After the initial admission and assessment processes have been completed, the prisoner will be assigned a temporary security or needs classification, which will determine his or her initial placement and management regime.

Rehabilitation Plans will be developed for all prisoners based on the general category of the prisoner (eg remand, sentenced, etc) as well as their assessment results.

## **Placement**

After all admission and basic assessments have combined to produce an initial security or needs classification, the prisoner will be placed in accommodation, which matches that classification or need.

The options for placement are:

- normal mainstream accommodation (cell [single, double, buddy] or cottage);
- protection unit within mainstream accommodation;
- remand accommodation for those whose placement/at risk status is yet to be determined;
- Crisis Support Unit accommodation; and
- Management Unit accommodation.

Of the 90 male beds in the remand facility, ten double cells would be for the accommodation of remandees whose placement/at risk status is not finalised after the initial reception process has been completed. For female remandees in the same category, accommodation will be provided in a five bed “high needs” unit.

Custodial staff managing the accommodation unit into which the prisoner is placed will, as soon as practicable, brief the prisoner (induction) on the operation of the system, the Centre, services available and his/her responsibilities.

## **Full Assessment of Risk and Need**

Within 24 hours of being received into the prison, the prisoner will undergo a full health assessment conducted by medical staff. The medical officer may, at this stage, refer the prisoner to a psychologist or to a specialist, such as a psychiatrist, for further assessment.

Program staff, the Indigenous Liaison Officer, and psychologists may also interview the prisoner as required to fully assess the prisoner’s risks and needs and to inform the prisoner’s Rehabilitation Plan. The prisoner will receive a full assessment within seven days.

## **Case Management**

The AMC will operate within a Case Management framework, which will be central to prisoner care, management and rehabilitation.

The two main objectives of Case Management are:

- the equitable and timely development and implementation of each Rehabilitation Plan; and
- improved use of resources, by tailoring interventions to the individuals’ risks and needs.

The prisoner will be informed about the Case Management system and process and invited to participate. Probation and Parole Officers will maintain responsibility for prisoner Case Management throughout a period of incarceration, and will develop a Rehabilitation Plan based on the individual needs and risks posed by each prisoner, in consultation with the prisoner, the

prisoner's significant others, rehabilitation, custodial, health and VET staff and others as appropriate.

While interventions and programming will be based on assessed risks and needs, for those prisoners with sentences of three months or less, the Rehabilitation Plan will be, by necessity, generally limited and may well consist of representatives of relevant service agencies meeting with the prisoner and his/her family to determine post release support needs.

Prisoners with sentences greater than three months will have a detailed Rehabilitation Plan reflecting an assessment of risks and criminogenic and other needs.

Each prisoner will be assigned a custodial Case Officer who will be supported by other professional staff. Case Management reviews will take place in accordance with the individual Rehabilitation Plan goals of each prisoner, but not less frequently than every six months.

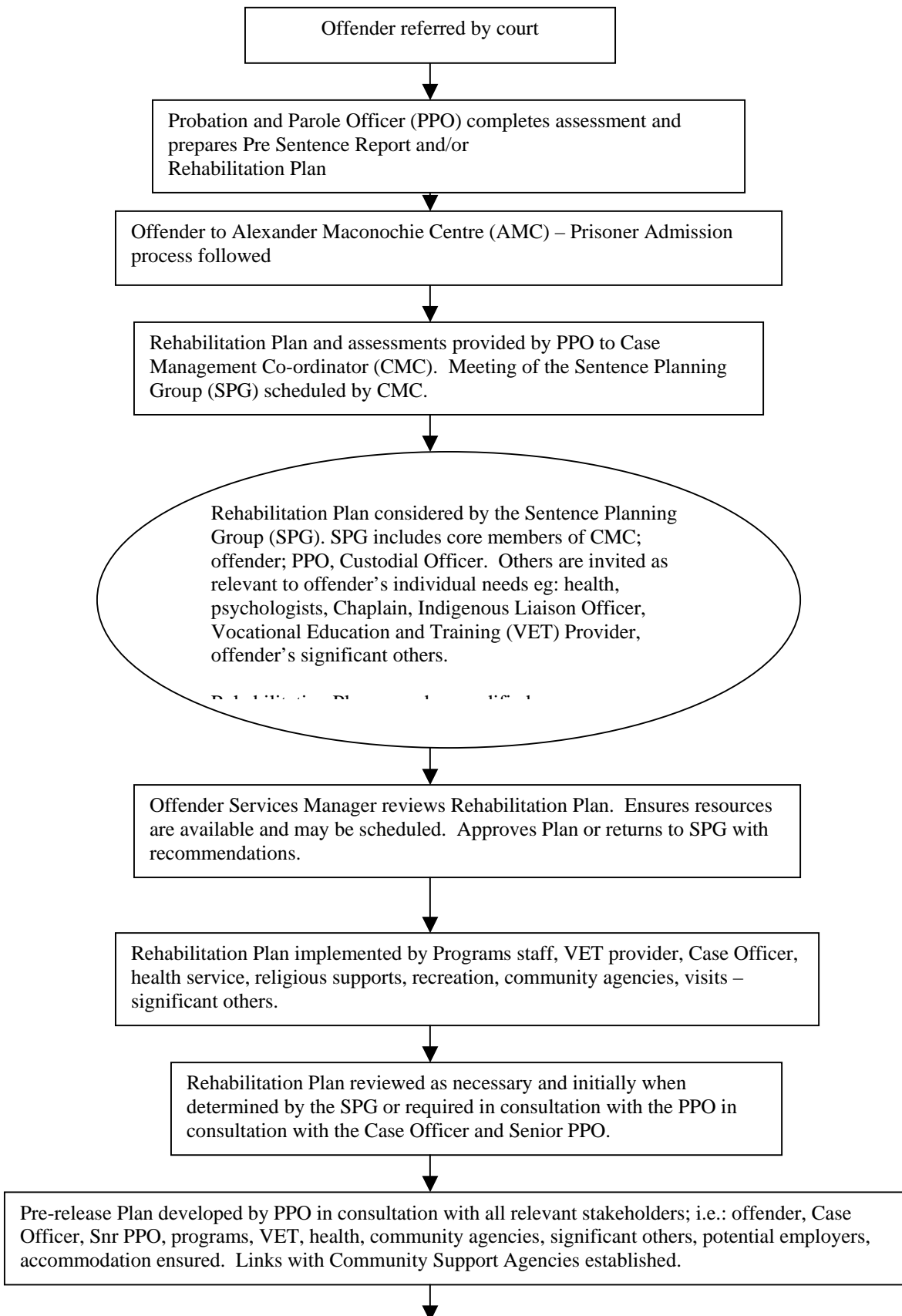
The following model provides a useful focus for various categories of prisoner and may assist in developing realistic expectations of what the case management process aims to achieve.

### **PRISONER CATEGORY, CRITERIA and PROGRAM FOCUS**

| <b>Category</b>                                 | <b>Criteria</b>                                | <b>Case Management and Program Focus</b>   |
|---|--|--|
| <b>Remand Short-term</b>                        | = or <28 days                                  | Immediate acute health needs. Preparation for court. Advice on and links to community support services. Access to developmental and recreational activities. Assistance with accessing accommodation on release. |
| <b>Remand Long-term</b>                         | = or > 28 days                                 | Acute and chronic health needs. Advice, information and links to community support services. Preparation for court. Access to meaningful activity. Assistance with accessing accommodation on release.           |
| <b>Sentenced Short-term</b>                     | = or < 3 months                                | Acute and chronic health needs. Advice, information and links to community support services. Access to meaningful activity. Pre/post release planning. Assistance with accessing accommodation on release.       |
| <b>Sentenced Long-term</b>                      | = or > 3 months                                | Full assessment of risks and needs. Individualised Rehabilitation Plan prepared and implemented through structured daily activities. Regular review of progress. Pre/post release planning.                      |
| <b>INCLUDED IN ALL OF THE ABOVE CATEGORIES:</b> |  |  |
| <b>Intellectual disability</b>                  | Diagnosis by ACT Health or consultant          | To improve functioning and to protect from harm. Pre/post release planning   |
| <b>Mental illness/co-morbidity</b>              | ACT Health or consultant Psychiatric diagnosis | Stabilise illness, improve functioning, protect from harm. Secure forensic facility support. AOD support. Pre/post release planning  |

The following represents the process model of Throughcare for implementation within the AMC.

## PROCESS MODEL OF THROUGH CARE





Interventions and supervision to Community Corrections upon release, or otherwise as per Court Order. Links with Community Support Agencies maintained.

## **Sentence Administration**

The Sentence Administration Board will be provided with a copy of the initial Rehabilitation Plan and Pre Release Report and plans as applicable.

## **Structured Day**

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

## **Programs**

Each prisoner is expected to be engaged in a mix of Criminogenic and Life Skills programs. Within these two broad and overlapping categories example programs include:

### Treatment (Criminogenic) Programs.<sup>8</sup>

Cognitive Self-Change (includes violent offenders)

Alcohol and Drug Programs

Sex Offender Treatment

Vocational Education and Training (includes Living Skills)

Suicide and Self-Harm Prevention

Linkages to community agencies for short-term prisoners<sup>9</sup>

### Health & Life Skills Programs.<sup>10</sup>

Parenting

Budgeting and finance management

Victim Awareness

Healthy Living/Health Promotion

Mental Health Support

Stress Management

Spiritual/religious services.

## **Work**

Initially, work primarily will be in what is described as domestic industries such as grounds and facilities maintenance, cooking, and cleaning, although this will be complimented with industries employment. Space within the perimeter is required to permit the possible development of limited

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<sup>8</sup> A key requirement will be that courses for Indigenous Australians and those from Non English Speaking Background have culturally appropriate content and are delivered in a culturally appropriate style.

<sup>9</sup> Stable and suitable housing is a major risk factor. While not a formal program, housing will be a key aspect of Case Management and Throughcare.

<sup>10</sup> Visits will be integrated with all programs in accordance with the Rehabilitation Plan.

horticultural activity, facilities maintenance, waste management and recycling and other work opportunities.

Note: Prisoners in the Transitional Release Centre will attend workplaces in the community.

## **Visits**

Visits will be considered to be part of a formal program and will be available six days a week with specific periods being set aside for family visits and for professional visits. The feasibility of evening visits will be examined. The importance accorded to visits reflects their acknowledged value in the rehabilitative endeavour (see Section 5).

Program staff will assist prisoners to gain the most from their visits, which may take place in relatively private family rooms in addition to the normal visits area.

## **Recreation**

Recreation in the AMC is to be both formal, as a planned activity, integrated into the prisoner's Rehabilitation Plan, and informal, giving the prisoner the opportunity to make decisions and assume responsibility for the use of his or her time.

The emphasis on physical recreation is to be on aerobic activity, rather than anaerobic activity. This activity will be facilitated by a recreation officer to improve prisoner general well-being.

Recreation will also include painting (particularly for Indigenous prisoners) and hobbies.

## **Accommodation**

The range of accommodation provided in the AMC is fully described in the ACT Prison *Functional Operating Brief*, Section 6. Of particular note is that 60% of the accommodation is cottage (self catering units) and 75% of accommodation is single occupancy. Double and "buddy" cells will be available providing the opportunity for Indigenous and other vulnerable prisoners to share accommodation.

A key requirement is to ensure that accommodation design maximises the options available to AMC management to place prisoners according to risks, classification and needs.

## **Prisoner Management**

In addition to the range of accommodation types provided in the Centre, there is also the following 'special' accommodation:

### **Management Unit**

The Management Unit comprises both management cells and detention cells.

Detention cells are used for the immediate securing of prisoners involved in incidents or those being investigated. Management cells are used to accommodate prisoners whose disruptive behaviour is not conducive to the good order of the prison and whose continued placement in the mainstream accommodation is no longer appropriate. In some cases, this is done for the prisoner's own safety. Management cells provide a place to address the prisoner's inappropriate

behaviour away from other prisoners. An individual prisoner is not usually placed in a management cell for more than 28 days.

### **Crisis Support Unit**

The CSU will provide a safe environment for prisoners undergoing acute episodes to be managed and stabilised out of the mainstream environment. The CSU is not a secure forensic mental health facility.

### **Staffing Model**

Aspects of staffing will be included in the Workforce Plan, in particular issues related to staff training and the development and maintenance of an appropriate staff culture.

While there may be specialist Master Control positions, the preferred option is not to differentiate or stream custodial staff into discrete security or custodial support staff categories, but rather to require custodial staff undertake a broad range of duties, embracing both security and Case Management functions.

The staffing gender balance sought will be within the range: 75-60 males to 25-40 women.

The custodial staffing roster will allow officers to participate in paid training for six to eight days per annum. Restrictions on prisoner movement at lunch-time will enable staff to have a full lunch break.

### **Initial Assessment**

Within the Case Management model, prisoners will be individually assessed with regard to the criminogenic risk and needs (includes vocational education and training needs) and Rehabilitation Plans will be negotiated with each individual identifying intervention strategies, goals and timelines to address these risks and needs.

Assessment will be based on the LSI-R in the first instance and Rehabilitation Plans developed targeting dynamic risk factors as identified by that instrument. Further specialised assessment may be required in some cases by mental health or other health professionals as well as education or vocational specialists.

The education assessment will be based on the *Correctional Services Language, Literacy and Numeracy Indicator Tool 2005*.

Rehabilitation Plans are to be realistic, achievable and prioritise risk. Throughcare strategies are also to be identified in the Rehabilitation Plan. For example – in the case of a prisoner serving a ten-month sentence who aims to complete a two-year vocational course as well as cognitive skills and violent offender treatment programs, the priority afforded to each undertaking would need to be considered in light of other factors such as the presence or absence of correctional involvement beyond the term of imprisonment.

## **Participation in Programs and Education**

### General Assumptions

Regarding the number of prisoners to be engaged in programs and education, for the purposes of this Plan, the following general assumptions have been made:

- prisoners being repatriated from NSW will be assessed prior to return to the ACT;
- the prisoner number projections provided by ACT Treasury are reasonable;
- planning is based on projected numbers upon commissioning;
- allowing for separation of prisoners within the Transitional Release Centre, the TRC will have a practical operating population of approximately 55 (capacity is 60);
- 55 minimum-security prisoners will be eligible for day and works release and will access services and supports within the community;
- each prisoner's individual criminogenic risks and needs will be assessed upon admission and Rehabilitation Plans will be developed in consultation with prisoners to address their risks and needs;
- Rehabilitation Planning will include education and vocational assessments, taking into account the prisoner's personal interests and strengths regarding potential education and workforce participation;
- some prisoners of different security classifications will be able to mix for the purpose of program participation;
- those prisoners unable to mix will be able to access programs through scheduling, closed circuit television or other technologies;
- programs offered to remandees may be different to those offered to sentenced prisoners, but will include components of cognitive skills programming and may include offence specific programs and VET where appropriate; and
- changes in the prisoner profile will require further analysis at a later stage.

The statistics and prisoner projections provided previously indicate that there will be:

- 150 sentenced prisoners at opening;
- 89 remandees.

### **Remand Programs**

Remand programs will vary from that available to sentenced prisoners due to their remand status and median length of stay, which over 6 years, averages at 12.5 days.

### Specific Assumptions

- Health and Life Skills programs and basic education to be offered on a voluntary basis; and
- Service Providers will be invited to inform prisoners about availability and access.

Remand prisoners are primarily concerned with preparing for court. Contrary to popular conception, remand prisoners are not necessarily awaiting the court's determination of their guilt or innocence. Many have either pleaded guilty to an offence or have been convicted on the basis of presenting evidence and are awaiting sentence. In the ACT, legislation also allows for the Sentence Administration Board to have a parolee held in custody for up to two periods of seven days to appear before the Board regarding a breach of Parole. Others may be assumed to have been remanded in custody pending final determination by the court of their guilt or innocence.

Regardless of their conviction status, all remand prisoners are classified maximum security as they are considered to be at high risk of absconding, and/or self-harm, and may present as detoxifying from substance abuse, and/ or with undiagnosed mental health issues. Their presenting health, mental health and legal needs are of utmost concern. Furthermore, they often seek to contact family members and friends with whom they may have lost touch previously.

Remand programs therefore target assessment of presenting needs, visits – legal and other, welfare services and pro-social meaningful activities to keep them occupied for the benefit of the remandees and to assist in the maintenance and security and good order of the centre.

Health and Life Skills programs should be offered as well as basic education on a voluntary basis. To gain maximum benefit from these programs they should be educative and provide information as to the availability of services and supports within the community, preferably by visiting community agencies with which they can establish links. Programs upon commissioning will need to cater for 89 remandees.

## **Sentenced Prisoners**

### Vocational Education and Training

VET courses will be targeted at developing marketable skills directly linked to industry skill shortages. Prison facilities will influence the type and level of courses that can be delivered within the secure perimeter. Given the average length of sentence of approximately nine months it is expected that courses offered to prisoners who are ineligible for day release will generally be aimed at basic preparatory education and work readiness. It is expected that facilities within the prison will provide for the achievement of qualifications to the Certificate 2 level, in some areas. Where infrastructure is not an issue Certificates 3 and 4 should be achievable. Examples of the types of courses that may be delivered will depend upon skills shortages at the time. Training packages used may be taken from, but will not be limited to, the following industries:

- Hospitality (the Prison kitchen will accommodate Cert 1 & 2 level of training)
- Construction (workshop will accommodate Cert 1& 2 level)
- Business Services
- Information Technology
- Occupational Health and Safety
- Remedial massage
- Horticulture
- Media, and
- Learning Options for Indigenous Australians

Auswide Projects as the selected service provider will offer courses equitable to those available in the community, within the limitations imposed by the secure facility. All courses should be accredited and provide a pathway toward further study. Certificate 2 level would allow prisoners to participate in Certificate 3 and 4, during Transitional Release or upon re-entry into the community.

Funding will be sought under the New Apprenticeship Scheme, User Choice or other equity program where appropriate.

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

### General VET Funding

Training and Adult Education (TAE) in the ACT has advised that adequate funds are available through different grant programs to allow ACT prisoners' access to Vocational Education and Training. TAE has indicated that it would be preferable to mainstream prisoner education by developing a partnership with other accredited providers.

Following a competitive tender process, Skills Training Employment Program Inc trading as Auswide Projects (Auswide) was selected as the preferred provider of Vocational Education and Training (VET) to prisoners within the AMC.

The model of service proposed by Auswide is to assess the learning and development needs of each prisoner on an individual basis and develop individual learning plans with prisoners. Auswide will provide a diverse range of Vocational Education and Training options for prisoners with a strong emphasis on building marketable skills and establishing links with employment and further educational opportunities in the community.

### Funding for Indigenous VET

Most jurisdictions cover Indigenous VET out of their Treasury allocated budget, however they can also access a range of Commonwealth funds including the following;

- Indigenous Education Strategic Initiatives Plan (IESIP) funding is supplementary to State funding allocations and has boundaries based on remoteness and the education level of the students. The funding is provided to an RTO (so not necessarily to Corrections per se). The RTO needs to enter into a 3-year funding agreement with the Indigenous Education Branch in the Department of Education and Training.
- Northern Territory Corrections accesses funding for prisoners under the Indigenous Literacy Programs. This funding is tied to criteria of remoteness and isolation and to existing education levels of students.
- The Vocational Education Guidance Assistance Scheme (VEGAS) is a grant program for schools and prisons. This funding is targeted to assist prisoners learn about their employment futures and to encourage them into training and education. It cannot be used to deliver VET.

### Prisoner Participation in VET

The following estimates are indicative only for the purposes of planning. It is likely that the prisoner population will change over time and it also will be necessary to assess prisoner needs on an individual basis. The service provider will be required to have the flexibility to accommodate the changing needs of and numbers in the prisoner population.

Treasury projections estimate 239 prisoners at opening. Of these 89 will be in remand leaving a sentenced prisoner population of 150. Of these 9 will be maximum-security, 30 medium security and 111 minimum-security prisoners.

It is estimated that 55 of the anticipated 111 minimum-security prisoners at opening will be eligible for transitional release. This leaves 56 minimum-security prisoners ineligible for day or works release who will be required to work and attend programs within the prison. In addition to the 56 minimum-security prisoners, 30 medium-security and 9 maximum-security prisoners will attend programs and work within the prison, providing a total of 95 prisoners attending work and programs within the prison daily.

### Education Levels of ACT Sentenced Prisoners

- 60% of prisoners will have less than Year 10 education;
- 15% will have achieved Year 10; and
- 25% will have greater than Year 10 education levels.

This indicates that of the 150 sentenced prisoners anticipated upon opening approximately:

- 90 prisoners may require literacy and numeracy development and/or bridging courses to be eligible for further vocational training with a Year 10 pre-requisite; and
- the remaining 60 will likely require work readiness and vocational assessment and training.

55 sentenced minimum-security prisoners will be able to pursue work and study within the community. If the above percentages are applied to the 'in house' population, it can be estimated that services within the prison will need to cater for

- 34 minimum-security;
- 23 medium and maximum-security prisoners with less than Year 10 education levels; and
- 38 remaining prisoners with Year 10 or higher education.

Of the 55 Transitional Release Centre prisoners:

- 33 may need to attend literacy and numeracy or bridging courses within the community; and
- 22 are likely to have achieved Year 10 or higher education levels.

Training within the prison will need to cater for 95 sentenced prisoners of whom:

- 60% - 57 prisoners will require basic education (literacy and numeracy)
- 15% - 14 prisoner will have achieved Year 10, and
- 25% - 24 prisoners will have achieved higher than Year 10.

It is likely that the 38 prisoners with Year 10 or higher qualification will be eligible to enrol in a Certificate 1 and/or Certificate 2 level courses.

### Sentenced Prisoners by Education Level and Classification

Education levels are applied to classifications for the purpose of planning for separations and the provision of adequate classrooms and remote access services as 60% of prisoners within each classification will require basic education (literacy and numeracy) as follows:

- 60% of 56 minimum security prisoners 34 (excludes Transitional Release)
  - 60% of 30 medium security prisoners 18, and
  - 60% of 9 maximum security prisoners 5
- TOTAL 57 prisoners requiring basic education within the prison may be anticipated at opening.

The remaining 40% of prisoners are likely to be eligible for enrolment in Certificate 1 and/2 level vocational courses

- 40% of 56 minimum security prisoners 22 (excludes Transitional Release)
  - 40% of 30 medium security prisoners 12, and
  - 40% of 9 maximum security prisoners 4
- TOTAL 38



### Delivery Hours

The service provider will be required to deliver the equivalent of 4 hours per day per prisoner of vocational education and training for 48 weeks per year. Study may be independent and self paced under the guidance of the service provider.

Assuming 4 hours per day of vocational education and training for each of the 95 sentenced prisoners on 5 days each week for 48 weeks per year.

95 prisoners x 4 hours per day x 5 days per week x 48 weeks per year =  
91,200 hours of program delivery per year for sentenced prisoners within the facility.

Note: The four weeks per year in which VET is not available will not be consecutive. Breaks may occur in one or two-week periods for example two weeks over the Christmas period, one week over Easter and one week at another time during the calendar year.

Pro-social activities for prisoners on transitional release are to be considered and may include voluntary work for charities, leading activities for other prisoners, prison maintenance or other productive activities.

### Employment Opportunities

In addition to VET, employment opportunities will be available to prisoners within the AMC and will be linked to VET. These may include:

| <b>AMC Employment</b> | <b>Potentially Applicable VET Courses</b> |
|-----------------------|---|
| Cleaning              | Industrial cleaning                       |
| Shop                  | Business studies/hospitality              |
| Laundry               | Industrial cleaning                       |
| Grounds               | Horticulture                              |
| Administration        | Business studies                          |
| Library               | General education                         |
| Cafes (visits)        | Hospitality/ business studies             |
| Kitchen               | Hospitality                               |
| Workshop              | General construction                      |

### **Criminogenic Programs**

#### Specific Assumptions

The following specific assumptions have been applied to criminogenic programs:

- Transitional Release Centre prisoners will attend programs in the community;
- programs will be adapted to cater to gender differences and for special needs groups where applicable;
- all prison staff will be trained in the content and context of cognitive behavioural programming; and
- treatment will be transferable to and from the community.

#### Drug and Alcohol Programs

Data provided previously indicates 11% of sentenced prisoners are incarcerated for drug offences, however, the 1997 NSW Corrections Health Services *Inmate Health Survey* found that 60% of

males and 70% of female prisoners had a history of illicit substance abuse. Further studies from NSW, SA and other jurisdictions indicate that approximately 75% of prisoners had some form of substance or alcohol abuse issues. This would indicate that the majority of prisoners would participate in substance abuse programs. It may be assumed that approximately 70 prisoners on opening will require substance abuse intervention within the prison.

Of the 55 prisoners eligible for Transitional Release approximately 40 may need to establish links with community based alcohol and drug services.

For further details see the ACT Corrective Services *Drug, Alcohol and Tobacco Strategy 2006-08*.

### Cognitive Skills

Anti-social attitudes, feelings and associates are primary risk factors for recidivism. As such the majority of offenders exhibit these cognitive distortions, which enable their anti social activities. As programs should target medium to high-risk offenders (see Andrews & Bonta 2003) it is likely that cognitive skills programs will be targeted firstly at maximum and medium-security prisoners and secondly at minimum-security classified prisoners who are ineligible for Transitional Release.

Of the 95 sentenced prisoners a few will be ineligible for participation in such a program due to psychopathy. Others may require a program adapted for intellectual disabled participants. Mental Health issues and substance abuse should be sufficiently stabilised in an institutional setting to allow these individuals (who may be excluded from community based programs) to participate in programs within the prison. Allowing a 10% adjustment (an estimate of the presence of psychopathy in prisons) it may be assumed that approximately 85 prisoners will be expected to participate in a Cognitive Behavioural treatment program within the prison.

Applying the percentage of each classification to the above estimate of 85 prisoners it may be assumed that:

- 6% will be maximum security = 5 prisoners
- 20% - medium = 17 prisoners; and
- 74% - minimum = 63 prisoners.

All prison staff should be trained in the content and context of the cognitive behavioural treatment program to integrate treatment into everyday prison activities and thereby maximise the benefits of the program.

### Violent Offenders

The data shows that including weapons offences, arson/property damage, armed robbery, assault (non-sexual) and homicide, approximately 44% of ACT sentenced prisoners were incarcerated for violent offences. This does not account for the prisoners who have a history of violence not related to the current offence. It is estimated that approximately 50% of prisoners will have some history of violent offending.

This indicates a clear need for Violent Offender treatment programs. Unfortunately, the numbers of offences that constitute a Family Violence Offence are not separately recorded at this time.

Violent offender treatment – either family violence or other may apply to up to half of the sentenced prisoners ineligible for Transitional Release an estimate of 47 in total.

### Sex Offenders

The statistics provided show 10% of the prisoner population was incarcerated for sex offences. It is likely that of those eligible for Transitional Release, 5 will require treatment in the community and approximately 10 prisoners will participate in sex offender treatment within the prison, at the time of commissioning. Sex offender treatment integrates institutional programs with the provision of follow-up community based programs to assist relapse prevention.

### Health and Life Skills Programs

The 2001 NSW *Inmate Health Survey* found:

- 31% of women and 28% of men tested positive for hepatitis B core-antibody
- 64% of women and 40% of men were hepatitis C antibody positive
- 11% of women and 20% of men were identified as probable pathological gamblers
- 39% of women and 45% of men had suffered head injuries resulting in unconsciousness and of those 41% of women and 23% of men reported unresolved side effects
- approximately one-third of women and one-fifth of men had been through the childhood care system
- scores on all eight dimensions of the SF-36 (generic health survey – self report) were lower than for the general community; this was more pronounced among women than men
- 95% of women and 78% of men had at least one chronic condition
- 18% of women and 27% of men scored below the pass rate on the intellectual disability screener
- over one third of women and approximately half the men drank alcohol in the hazardous or harmful range
- 83% of women and 78% of men were current smokers.
- 84% of women and 80% of men had used illicit drugs at some time in their life, 74% of women and 67% of men had used illicit drugs regularly in the twelve months before imprisonment
- 60% of women and 37% of men had been sexually abused before the age of sixteen; 30% of women and 10% of men had been sexually abused before the age of ten.

Health and Life Skills programs will be developed in consultation with local providers.

### Employment Opportunities

The service provided to remand prisoners may vary from that provided to sentenced prisoners due to their remand status and length of stay. However, programs available will include a cognitive skills component and offence specific programs as well as VET may be offered as appropriate.

Non-compulsory AMC employment opportunities for remand prisoners may be similar to those provided for sentenced prisoners, but would exclude Hospitality studies as the AMC kitchen would provide food for remand prisoners. While the library would also be manned by sentenced prisoners, General Education opportunities for remandees may be provided by other methods.

### **Preparation for Release**

Prisoners will be preparing for re-integration with the community from commencement of their sentences through participation in rehabilitative, and vocational education programs. Family members and community supports will be engaged in this process (see Section 5). While much of this work, in particular with medium and maximum-security prisoners, will be undertaken within the confines of the prison, it is essential to successful re-integration that links with community-

based agencies and support services (including families) are established and/or maintained during incarceration and that this work continues within the community following a prisoner's release.

The AMC will incorporate a Transitional Release Centre (TRC) to accommodate up to 60 minimum-security prisoners (practical operating capacity will be 55 persons) to assist the re-integration process. TRC prisoners will be eligible for day and works release, and may be eligible for overnight release to stay with approved persons on weekends. This allows prisoners to adjust gradually to community life while maintaining the security and discipline of the institutional setting.

An important component of the transitional release stage will be attendance at work, vocational training, education or other approved activities, in the community. Further, it is imperative at this stage that appropriate post release accommodation is identified and secured, along with a source of income, positive pro-social activities and community supports matched to the needs of the prisoner. In accordance with the 'Throughcare' philosophy of the AMC, planning toward transitional and eventual release should commence early in the prisoner's sentence, and community re-integration should be rehearsed by the prisoner (in achievable steps) during the transitional release stage.

In effect, the sentence should provide for learning how to lead a law-abiding lifestyle to rehearsing what has been learned and upon release demonstrating the achievement of rehabilitation.

Links will need to be established with a range of service providers including but not limited to alcohol and other drug services, accommodation support services, financial counselling, health services, cultural support agencies, Centrelink and other employment agencies, relationship and parenting services as well as 'prisoner friendly' employers and VET providers.

## **Housing**

Data from ACT Community Corrections indicates that of 654 offenders on active community based orders;

1% are homeless,

2.7% are at risk of becoming homeless, and

3.3% are housed in inappropriate accommodation.

However the situation for remand prisoners is less encouraging with approximately one-third of those detained in remand unsure as to where they will reside when released. (ACT Corrective Services July 2006 *Remandee Release Needs Report on Structured Interview*)

Secure and stable accommodation is fundamental to prisoner rehabilitation as efforts to maintain employment and relationships, even keeping appointments with support agencies is compromised by inadequate or unstable housing. A strong emphasis will be placed on negotiation with government and non-government accommodation services to ensure prisoners are appropriately housed upon release. Living skills programs within the AMC will incorporate components to assist prisoners to maintain secure housing.

## **Providers**

### Vocational Education and Training

There are over 100 Registered Training Organisations (RTO's) in the ACT alone, and many more in the region. The ACT Accreditation and Registration Council, Training and Adult Education,

Department of Education and Training accredit these organisations in the ACT. Most specialise in a particular field of training and many, like the Department of Justice and Community Safety initially sought accreditation to provide nationally recognised training to their staff. This does not prohibit the RTO from expanding the accredited training courses they offer to include training relevant to the community in general and to prisoners, in particular.

Auswide Projects has been selected as the preferred provider of VET to prisoners in the AMC.

#### Rehabilitative/Offence Related Programs

ACT Corrective Services (ACTCS) Offender Intervention Programs (OIP) Unit provides rehabilitative programs designed to address criminogenic risk/need factors. The Unit delivers the following programs

- Cognitive Self-Change Program
- Family Violence Cognitive Self-Change Program
- Alcohol and Other Drug Education
- Alcohol and Other Drug Coping Skills
- Sex Offender Treatment Program

Corrective Services' program staff will deliver programs both in the community and at the AMC. Existing community-based programs may require modification to suit a custodial environment.

#### Health and Life Skills Programs

Some service providers are identified in the following. All can be contacted through the Yellow Pages, or Contact (produced annually by ACT Canberra Connect).

#### Parenting

Communities at Work

Marymead

Sexual Health and Family Planning

Northside Community Service

Belconnen Community Service

Relationships Australia

Barnardos

Canberra Family Support Service

#### Healthy Living / Health Promotion

ACT Community Care

ACT Alcohol and Drug Program

Alcohol and Drug Foundation ACT (ADFACT)

ACT Eating Disorder Association

ACT Hepatitis C Council

Canberra Sexual Health Centre

Diabetes Australia

Mental Health First Aid

Women's Health Service

Winnunga Nimmityjah

Aids Action Council

Canberra Men's Centre

Indigenous and Cultural Support Services

Aboriginal Sporting Corporation and Recreational Activities (ASCRA)  
Canberra Rape Crisis Centre  
Ngunnawal Country Indigenous Women's Circle  
Winnunga Nimmityjah

Mental Health Support

ACT Health  
Mental Health Services  
Grow  
The Mental Health Foundation  
4S Group

Self-Harming/Suicide Support

ACT Health  
Mental Health Services  
Grow  
The Mental Health Foundation  
Lifeline

Stress Management

ACT Health  
Mental Health Services  
The Mental Health Foundation

Spiritual/Religious Services

ACT Churches Council  
Australian Centre for Christianity and Culture  
Buddhist Society  
Canberra Islamic Centre  
Kairos Prison Ministries

Victim Awareness

Victims of Crime Co-ordinator  
VOCAL

Managing Household Budgets

CARE – Credit and debt counselling service / gambling counselling  
Indigenous Services Liaison Officer, Centrelink

## AMC Offender Intervention Programs Sample Schedule (Criminogenic Programs)

Venue One

| Session times       | Mon.  | Tues.   | Wed.   | Thurs.   | Fri.  |
|---------------------|---|---|--|--|---|
| <b>8.30-10.00AM</b> | Cog Skills (M & M) Group 1 Session One<br>Facilitator 1 & 2           | Cog Skills (M & M) Group 4 Session One<br>Facilitator 1 & 2           | Team Meetings<br><br>And<br><br>Case Management meetings<br>Facilitator 1 & 2<br>Facilitator 3 and 4<br>Facilitator 5 and 6<br>Facilitator 7 & 8 | Cog. Skills (M & M) Group 1 Session Two<br>Facilitator 1 & 2           | Cog Skills (M & M) Group 4 Session Two<br>Facilitator 1 & 2       |
| <b>10.30-12.00</b>  |   | Drug Awareness (M & M) Group One<br>Facilitator 7 & 8                 |  |  | Drug Awareness (Women)<br>Facilitator 5                           |
| <b>1.15-2.45</b>    | Cog. Skills (Women) Group 3 Session One<br>Facilitator 1 & 2          | Cog. Skills (Protection) Group 2 Session One<br>Facilitator 1 & 2     | Drug Awareness (Protection)<br>Facilitator Five  | Cog. Skills (Women) Group 3 Session Two<br>Facilitator 1 & 2           | Cog. Skills (Protection) Group 2 Session Two<br>Facilitator 1 & 2 |
| <b>3.15-4.45</b>    | Supervision Facilitators 1&2<br>Opposite fortnight reports/case notes | Supervision Facilitator 3 &4<br>Opposite fortnight reports/case notes | Supervision<br><br>Facilitator 5 & 6<br><br>Opposite fortnight reports/case notes  | Supervision Facilitator 7 & 8<br>Opposite fortnight reports/case notes |   |
|                     |   |   |  |  | <b>Venue Two</b>  |
| <b>8.30-10.00AM</b> | Remand Cog. Skills<br>Facilitator 7 & 8                               | Sex Offender Program Group One<br>Facilitator 3 & 4                   |  | Sex Offender Program Group Two<br>Facilitator 3 & 4                    |   |
| <b>10.30-12.00</b>  | A & D Coping skills (M & M) (AMC)<br>Facilitator 5 & 6                |   |  |  | A & D Coping skills (M & M) (AMC)<br>Facilitator 7 & 8            |
| <b>1.15-2.45</b>    | Family Violence Self Change<br>Facilitators 3 &4                      | Coping Skills (Women) (AMC)<br>Facilitator 5 & 6                      | Family Violence Self Change<br>Facilitators 3 &4   | Drug Awareness (M & M) Group 2 (AMC)<br>Facilitator 6                  | Drug Education<br>Facilitator 5                                   |
| <b>3.15-4.45</b>    |   |   | Remand Cog. Skills<br>Facilitator 7 & 8  |  |   |

The above schedule provides:

|   |                    |
|---|--------------------|
| 4 x Cognitive Skills Groups x 2 sessions per week               | = 8 delivery hours |
| 2 x Adult Sex Offender Programs per week x 1 session            | =5 delivery hours  |
| 1 x Family Violence Cognitive Self Change per week x 2 sessions | = 4 delivery hours |
| 4 x Drug Awareness Programs x 1 session per week                | = 8 delivery hours |
| 3 x Alcohol and Other Drug Coping Skills 1 session per week     | = 6 delivery hours |
| 1 x Drug Education x 1 session per week                         | = 1 delivery hour  |

In addition to program delivery, program staff undertake assessments, prepare reports, provide one on one counselling sessions, program development tasks, program management, record keeping and referral responsibilities.

## AMC Vocational Education and Training – Sample of Activity Sessions

| Daily Activity Sessions                 | Monday |   |   |   | Tuesday |   |   |   | Wed |   |   |   | Thursday |   |   |   | Friday |   |   |   | Saturday |   |   |   | Sunday |   |   |   | Totals                       |
|---|--------|---|---|---|---------|---|---|---|-----|---|---|---|----------|---|---|---|--------|---|---|---|----------|---|---|---|--------|---|---|---|------------------------------|
|   | 1      | 2 | 3 | 4 | 1       | 2 | 3 | 4 | 1   | 2 | 3 | 4 | 1        | 2 | 3 | 4 | 1      | 2 | 3 | 4 | 1        | 2 | 3 | 4 | 1      | 2 | 3 | 4 |                              |
| Computer Room 1                         |        |   | X |   | X       | X | X |   | X   | X | X |   | X        | X | X |   |        |   |   | X | X        |   |   |   |        |   | X |   | 13                           |
| Computer Room 2                         |        |   | X |   |         |   | X |   | X   | X | X |   | X        | X | X |   | X      | X | X |   |          |   | X |   |        |   | X |   | 13                           |
| Vocational Training                     | X      | X | X |   | X       | X | X |   | X   | X | X |   |          |   | X |   |        |   | X |   | X        |   |   |   |        |   | X |   | 13                           |
| Education                               | X      | X | X |   | X       |   | X |   | X   | X | X |   |          |   | X |   |        |   | X |   | X        | X |   |   |        |   | X |   | 12                           |
| Voc/Ed                                  |        |   |   |   | X       | X | X | X |     |   |   |   | X        | X | X | X | X      | X | X |   |          |   | X |   |        |   | X |   | 13                           |
| Arts and Crafts                         | X      |   | X | X |         |   | X |   |     |   |   |   | X        | X |   |   |        |   |   | X |          |   | X |   |        |   | X |   | 9                            |
| Number of Groups per session per day    | 3      | 2 | 3 | 3 | 4       | 3 | 4 | 3 | 4   | 4 | 4 | 0 | 4        | 3 | 4 | 3 | 2      | 2 | 2 | 4 | 0        | 3 | 3 | 0 | 0      | 0 | 3 | 3 | 0                            |
| Assessment                              |        |   |   |   | X       | X | X |   | X   | X | X |   | X        | X | X |   |        |   |   |   |          |   |   |   |        |   |   |   | 9                            |
| Activities away from Education Building |        |   |   |   |         | X |   |   |     |   |   |   |          | X |   |   |        | X |   |   |          |   | X |   |        |   | X |   | 5                            |
| Total Activities for day                | 11     |   |   |   | 18      |   |   |   | 15  |   |   |   | 18       |   |   |   | 11     |   |   |   | 7        |   |   |   | 7      |   |   |   | Total Sessions per week = 87 |

### Program Evaluation and Reporting

#### Programs Evaluation

While evaluation of correctional programs may seem simple at a quick glance, e.g. does the program reduce the rate of re-offending? In practice this can be quite complicated.

Firstly, the definition of recidivism can be quite vexed: Do we measure charges, convictions or re-incarceration? Do we only count specific types of offences (e.g. violence), or is any offence counted? Compounding this is the reality that official measures of recidivism are almost certainly an underestimate of the actual recidivism rate, as most offences remain unsolved. However, this issue is probably the smallest problem in evaluation of correctional programs, as it is likely that official measures, regardless of their definition, are likely to be strongly correlated with actual offending, and hence are a reasonable proxy of that construct, albeit an underestimate.

A significant challenge is the development of a comparison group against which we can compare our treated offenders. For this to be a fair comparison, the comparison group should be just like the treated group apart from the treatment. In other words, we need to compare apples with apples. While this may seem simple there are numerous examples where this rule is violated through comparing selected low risk offenders to the remainder (e.g. Daly et al., 2003); comparing treatment completers to those who dropped out of treatment; excluding dropouts from a comparison; or otherwise comparing treated offenders to a non equivalent comparison group.



While the ideal comparison group is constructed from random assignment to treatment, this is often not possible in corrections where denial of treatment could adversely affect an offender's future. Fortunately, there are often other methods of developing a comparison group such as comparing a group of offenders referred to treatment with a similar group of offenders selected from past records matched on risk assessments (e.g. LSI-R) score and other demographics such as age and gender.

Finally, no evaluation would be complete without an evaluation of the inner workings and structure of the program itself - i.e. does the program follow the principles of effective programs that have been garnered from research? It would make little sense to devote considerable resources to conducting an outcome evaluation of a program which would not be expected to reduce recidivism because it targeted low self esteem, used harsh confrontation or other discredited models such as scared straight. Fortunately, correctional programs can be assessed with the Correctional Program Assessment Inventory (CPAI) which measures the program's resemblance to effective programs as outlined in the "What Works" literature. The CPAI scores a program on 131 criteria ranging from staff qualities, though implementation issues to theoretical underpinnings. Scores on the CPAI are significantly related to the program's likelihood of success in reducing recidivism.

ACT Corrective Services is committed to ongoing outcome and process evaluation of all criminogenic programs. The issue of correctional program evaluation is explored further by McGuire (2001).

#### Education Evaluation

The 2006 ANTA funded publication, *Rebuilding Lives VET for Prisoners and Offenders* lists the following Learning and Assessment Strategy objectives of prisoners' education and training against which interventions may be measured.

**Access:** To improve access to vocational education and training for adult prisoners and offenders.

**Participation and attainment:** To support successful participation and attainment across a range of fields of study and levels of vocational education and training.

**Employment and lifelong learning:** To contribute to the employment and learning pathways which can support the successful re-integration of offenders into the community.

**Promoting quality and accountability:** To create an accountable system that provides quality vocational education and training outcomes for offenders.

#### Internal Reporting

Measures used to evaluate the effectiveness of ACTCS interventions will include the following:

- Return to prison rate;
- Return to ACT Corrective Services (in accordance with National Corrections Advisory Group counting rules);
- Participation in psycho-educational/therapeutic (offence specific) programs;
- Employment rate;
- Post release employment rate (where data is available);
- Participation in Vocational Education and Training with specific data for women, disabled and Indigenous prisoners in accordance with AVETMISS protocols;
- Completion of accredited modules;
- Pathways to continued education established upon release;

- Completion of psycho-educational/therapeutic programs;
- Assessed pro-social attitudinal change pre and post psycho-educational/therapeutic programs;
- Accommodation upon release, and
- With respect to drug use see ACT Corrective Services Drug, Alcohol and Tobacco Drug Strategy 2006-2008.

In addition to the above indicators, the service provided by Auswide Projects will be evaluated on the basis of the following seven Key Performance Indicators:

1. Delivery of the required training hours via a variety of flexible methods, including but not limited to :

- Group training sessions
- Group and individual assessments
- Supervised and assessed self learning
- Competency based assignments and assessment tasks
- Day release training tasks
- Group release training tasks
- Attendance in planned recreational activities
- Recognition of Prior Learning assessments

2. Production of accurate records and individual core plans with copies made available to trainees to build up individual training portfolios – Managed through production of training portfolios for every trainee who undertakes regular training/education and/or initial assessment.

3. Participation by Auswide staff in all available AMC and Department meetings. Meetings will be recorded on monthly report of Project Manager.

4. Establish effective linkages to outside learning organisation and educational providers. Referrals will be recorded in the monthly report and shared data base.

5. Seek to maintain high levels of participation and completion, with an emphasis on completed accredited modules/certificates.

Participation and completion to be measurable through completed training hours and attendance sheets via the VET Track system for monthly invoicing purposes.

Auswide will also develop a recording system for measuring prisoner education/training enrolments upon discharge as a post release outcome.

6. Provide a wide variety of learning opportunities, courses and activities, utilising the full range of occupational opportunities and available learning modes.

Production of weekly/monthly calendars of activities, circulated to all prisoners. Regular surveys of prisoner to influence learning choices as evidenced in marketing materials.

7. Gain maximum involvement in learning opportunities from prisoners with support from custodial and non-custodial staff. Involvement level to be measured by take up rates and recording of referrals.

### External Reporting

Prisoner enrolments will be measured in accordance with the requirements of the Steering Committee for the Review of Commonwealth/States Service Provision and reported in the annual *Report on Government Service Provision*. Measures to be reported include:

- the proportion of prisoners enrolled in education and training courses,
- number of prisoners undertaking personal development courses, and
- number of prisoners engaged in offence related programs.

### Internal RTO Auditing

An audit process will be developed in consultation with Auswide. The focus of audit will be on Learning and Assessment Strategy application.

## **Section Five – Engagement with Families**

### **General**

The characteristics of prisoners and their families are varied and complex. The ties that a prisoner may have can vary according to gender, marital status, race, ethnicity, religion, history and attitudes to offending, length of sentence and other factors. While family and community ties may be important supports for some prisoners, they may be detrimental for others. In some cases it may be necessary to discourage or prevent ties for reasons of family and community safety. (ACTCS. 2002 *From Exclusion to Inclusion – a report on the role of the local community in the rehabilitation and reintegration of prisoners*)

Families can be an important influence on prisoners. Research has shown that

- family and parenting characteristics are key predictors of criminal behaviour.
- Loss of outside relationships is considered the most painful aspect of confinement for prisoners.
- Prisoners who maintain contact with their families are at lower risk of self-harm than those who do not, and
- families are one of the most important factors affecting prisoners' rehabilitation after release.

(Murray, J. (2005). 'The Effects of Imprisonment on Families and Children of Prisoners' in Leibling and Shadd (eds) *The Effects of Imprisonment*. Willan Pub, Devon, UK)

The impact on the families of separation from an incarcerated loved one can also be profound. Most substantially families may suffer a loss of income exacerbated by the expenses of visiting and providing money to the imprisoned family member. Spouses may become sole parents for the period of the spouse's imprisonment and suffer deterioration in social activity and relationships with friends, in-laws and neighbours. (see Murray 2005: 444) The affects on children of the incarceration of a family member may include depression, hyperactivity, aggressive behaviour, withdrawal, regression, clinging behaviour, sleep problems, eating problems, running away, truancy and poor school grades. (See Murray 2005: 446)

Consequently there are important reasons to involve families in the lives of prisoners throughout a period of incarceration and to encourage family support of prisoners post release where it is in the best interests of the prisoner and their family. Not only will this support the prisoner, but families may benefit through regular contact, involvement in the prisoner's rehabilitation plan and ready access to information and advice on the progress and living conditions of their loved one.

Probation and Parole Officers (PPOs), as Case Managers, will have an essential role in establishing and maintaining links with the families and significant others of prisoners held in the AMC. As PPOs will maintain responsibility for the development and implementation of individual Rehabilitation Plans with prisoners, they will also have responsibility for liaising with the prisoner's family and significant others to engage them in the rehabilitative process.

While the focus of the AMC will be on the rehabilitation of individuals in custody, it is recognised that families of prisoners may sometimes require extensive supports and this is not a role that can reasonably be fulfilled by the AMC. However, some safeguards will be in place to assist families to access supports provided in the community.

A Community Liaison Officer (CLO) and Indigenous Liaison Officer (ILO) will be employed at the AMC with part of their roles being to assist the families and significant others of prisoners to access

information that is relevant to their loved one in custody and necessary to enable them to provide support. Furthermore, the CLO and ILO will have a good knowledge of available community supports for families and be able to provide advice and referral information to those who are in need of support.

The CLO and ILO will be responsible for ensuring that information for families and other visitors is readily available and up to date. They will play a pro-active role in engaging families and the community in the rehabilitative objectives of the AMC through the dissemination of information about the AMC Case Management Process, prisoner opportunities for rehabilitation, Vocational Education and Training (VET), employment opportunities, accommodation options and classification procedures as well as the rights and responsibilities of visitors and prisoners with regard to visits. Families who are supportive of the rehabilitation process will have the opportunity to work effectively with staff of the AMC to support prisoners' participation in treatment and VET programs that will assist their successful re-integration with the community post release.

### **Stages of Sentencing – Family Involvement**

| <b>Stage of Sentence</b>                                      | <b>Family Participation</b>  | <b>Correctional Staff Responsible</b>  |
|---|--|--|
| <b>Pre Sentence Report (remanded in custody or community)</b> | Liaison with PPO preparing report  | Probation and Parole   |
| <b>Community Based Order</b>                                  | Liaison with supervising PPO   | Probation and Parole   |
| <b>Custodial Sentence</b>                                     | Involvement with Sentence Planning Group/review of rehabilitation plan/visits    | Probation and Parole, Sentence Management Co-ordinator, CLO & or ILO, Programs, Health, Education officers |
| <b>Pre Release Planning</b>                                   | Involvement with Sentence Planning Group/contribution to Pre-release plan/visits | Probation and Parole, Sentence Management Co-ordinator, CLO & or ILO, Programs, Health, Education officers |
| <b>Post Release</b>   | Liaison with supervising PPO (if applicable ie: post release order in place)     | Probation and Parole   |

### **Visits**

Although prisoners lose their liberty they should not lose contact with family, friends and the community. This is reflected in Article 10 of the *International Covenant on Economic, Social and Cultural Rights, 1976* which states that:

“The widest possible protection and assistance should be accorded to the family, which is the natural and fundamental group unit of society, particularly for its establishment and while it is responsible for the care and education of dependent children. Marriage must be entered into with the free consent of the intending spouses....”

The negative effects of loss of contact with family and community include making time in prison harsher, increasing social isolation, exacerbating the potential for family break-up and increasing the risk for children of prisoners coming into contact with the criminal justice system. Loss of

contact with family, friends and community is also likely to increase recidivism, as the prisoner upon release is unable to cope personally and socially without support and returns to former patterns of behaviour. Support services should be directed at families to encourage them to stay involved and at communities to promote engagement in prisoner rehabilitation. It is also important to consider the specific needs of children, who need access to both parents, particularly the primary carer.

In addition, given that crime emerges as the product of the joint failure of the individual and of the society of which he or she is part, the community has an obligation to remain engaged with its prisoners and to assist in their rehabilitation.

An effective system of visits would also assist in the maintenance of prisoner morale and in fostering a benign Centre “temperature”.

To achieve these objectives, the design of the centre needs to include facilities for a range of visiting arrangements. In the main, visits for women will take place in the women’s area of the prison. The main visits complex is primarily for male prisoners and their visitors, although women prisoners and their visitors will have access to the non-contact visits and family visits areas. Visiting arrangements and facilities will be suitable for all types of visitors, including children, family and friends, professional workers and volunteers. The facilities will be family (especially children) friendly, promote a relaxed atmosphere (though excellent natural light levels, soft colour finishing and furnishings and low profile furniture), and where necessary provide privacy. Visits will be encouraged and regular times for visits identified and promulgated in a form and through several media easily accessible to potential visitors.

Facilities for families with children are essential, and child play areas (BCA standards) will be available. A mothers’ room and tea and coffee preparation facilities will be provided. Outdoor facilities for informal social activities, such as barbecues, will also be made available. These will include sitting spaces, shade and windbreaks.

In addition there will be suitable facilities for professional visitors, such as legal representatives and the Official Visitor, to visit prisoners in private.

While visits will take place 6 days each week, scheduling will be necessary to ensure equity of access and that the opportunities provided by legal/professional visits are fully realised.

## **Section Six - Facilities**

### **Education and Vocational Training**

Associated with, but separate from, the vocational education and training area will be a 300m<sup>2</sup> workshop. This will include a staff office, VET office, training/lunch room and staff and prisoner amenities.

Design and Operational Considerations. To facilitate the delivery of VET programs the AMC design will include the separate provision of:

- staff offices and facilities with staff access only;
- adequately sound proofed classrooms and hobby rooms and associated stores with prisoner and staff access; and

- spiritual facilities with prisoner and staff access.
- a separate office for the education supervisor;
- a general office area with space for five work-stations;
- one interview room for general use;
- store areas for appropriate materials;
- one additional office, with attached storage space, for an external service provider; and
- amenities for both staff and prisoners (toilets, tea and coffee preparation area).
- 

#### Classrooms and Hobbies area

The areas will include the following elements:

- areas for general hobbies, including a wet area sized for 10 persons;
- classroom areas (six rooms [one specifically for Indigenous prisoners] for groups of up to 20 prisoners);
- an area for a small library, including an office for the librarian with an additional work station;
- two computer rooms (no internet access) for male and female prisoners;
- store areas for relevant materials;
- cleaner's room; and
- amenities for both staff and prisoners (toilets, tea and coffee preparation area).

### **Criminogenic Programs**

Design and Operational Considerations. To facilitate the delivery of these programs the AMC design will include the separate provision of:

- two, adequately soundproofed, multipurpose rooms (capacity 10) for the delivery of programs, including smaller observation areas where program delivery can be supervised, monitored and if necessary recorded. Some of these classrooms would also need access to an external, secure area;
- a barber's facility for male prisoners (hairdressing facilities for female prisoners will be located in a community centre in the female area of the prison);
- six interview rooms for general use;
- areas for the storage of program materials;
- six workstations for the drug and alcohol counsellor, Aboriginal counsellor and welfare officers;
- an office for the senior psychologist with three workstations for the psychologists;
- an office for the Case Coordinator and four workstations for the Case Managers with case file storage;
- amenities and tea/coffee preparation facilities for prisoners and staff; and
- a cleaner's room.

The classrooms referred to earlier (under Education and Vocation Training) could also function as areas where programs could be delivered. Moreover, smaller program areas will be available in secure cellblocks for the delivery of programs to prisoners being accommodated there. This will result in less prisoner movement.

Note: While this Plan notes that recreation, vocational training and education areas will all areas of the prison, there is a separate community centre in the female area of the prison, adjacent to the officers' station, which will include:

- telephones,
- outdoor hard-court;
- walking track;
- indoor gym (four stations),
- craft (including wet area) with a capacity of six;
- reading/meeting room (to seat 20, but dividable into two programs and visits rooms);
- visitors toilet adjacent to meeting room, with baby change facilities and amenities;
- two interview rooms, (seating four);
- Case Manager's office (with case file storage);
- video conferencing suite (seating four);
- medical or nurses room including desk, treatment couch, secure storage cabinet, hazardous waste disposal unit and small refrigerator;
- a small training kitchen and café adjacent to the reading/meeting room; and
- a hair dressing facility.

The women's area will also have a separate grounds maintenance store and work area.



## APPENDICES

An example of daily activities of remandees follows:

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### Typical remand centre daily routine

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#### *Activities*

---

rise, ablutions & breakfast  
medication distributed  
report to program or Activity 1  
visits commence  
morning tea in common area  
report to program or Activity 2, visits cease  
lunch in common area  
report to program or Activity 3, visits commence  
afternoon tea in common area, visits cease  
medication distributed, free time, ablutions  
evening meal in common area  
evening activities/ performing arts, craft

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cell lock down, non-cell remandees in wings<sup>1</sup>

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### Typical minimum-security daily routine

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#### *Activities*

---

rise, ablutions & breakfast  
medication distributed  
report to program or Activity 1<sup>1</sup>  
visits commence  
morning tea in common area  
report to program or Activity 2, visits cease  
lunch in common area  
report to program or Activity 3, visits commence  
afternoon tea in common area, visits cease  
medication distributed, free time, ablutions  
evening meal in common area  
evening activities / performing arts, craft

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prisoners in wings<sup>2</sup>

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Typical medium and maximum-security daily routine

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*Activities*

---

Rise, ablutions & breakfast  
Medication distributed  
Report to program or Activity 1  
Visits commence  
Morning tea in common area  
Report to program or Activity 2, visits cease  
Lunch in common area  
Report to program or Activity 3, visits commence  
Afternoon tea in common area, visits cease  
Medication distributed, free time, ablutions  
Evening meal in common area  
Evening activities / performing arts, craft

---

Cell lock down, non-cell prisoners in wings<sup>1</sup>

---

Visits will be integrated with participation in activities. Daily activities should be varied on weekends to emulate community life and the emphasis on weekends will be on visitors, recreational activities and free time although, some programs to assist re-integration and rehabilitation should be offered on weekends to Transitional Release prisoners who will be absent during the week.

The daily routine provides for approximately 6 hours of scheduled activities per day. Planning for a five-day week provides for 30 hours of scheduled activities per week.

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