

Inquiry into the adequacy of youth diversionary programs in NSW **Legislative Assembly Committee on Law and Safety**

Questions on Notice arising from evidence provided on 8 May 2018 by Ms Melanie Hawyes, Executive Director Juvenile Justice NSW and Mr Paul McKnight, Executive Director, Policy and Reform, Department of Justice NSW.

Question 1

How many young people are in detention in Juvenile Justice as at 6 May 2018?

ANSWER

At 11:59pm on 6 May 2018 there were 277 males and 33 females in Juvenile Justice detention.

Question 2

Provide BOCSAR references to reports on the functions and outcomes of NSW Youth Justice Conferencing.

ANSWER

Provided by Paul McKnight

Question 3

What is the process for transfer between Juvenile Justice custody and mental health facilities to centres? How many Juvenile Justice detainees are transferred between mental health facilities?

ANSWER

Juvenile Justice detainees assessment on admission and ongoing management

Juvenile Justice detainees are screened and assessed for a range of health (including mental health) and related issues within 24 hours of arrival in custody. Detainees with mental health concerns are referred to a Juvenile Justice psychologist, Justice Health Clinical Nurse Consultant and/or Justice Health and Forensic Mental Health Network psychiatrist. Specialist assessment and treatment is then coordinated and, if necessary, a young person may be transferred to hospital.

While in hospital, the young person's progress is monitored and evaluated by Justice Health. When the young person is released, post-hospital support is coordinated by Juvenile Justice and delivered by Justice Health if in custody or by external service providers in the community.

Transfer to and from mental health facilities

Juvenile Justice detainees (on remand or serving a custodial sentence) may be transferred between a centre and the Austinmer Adolescent Unit at Malabar in Sydney, operated by the Forensic Mental Health Network (FMHN).

Austinmer is a six bed dedicated Adolescent Forensic Mental Health Unit. All clinical services are provided by the FMHN & Justice Health through a multi-disciplinary team of medical, nursing and allied health professionals.

A young person can be admitted to the Austinmer Unit if they have been scheduled under the Mental Health Act. The young person will only be returned to custody when their condition has been reviewed and they are considered well enough to return to the Centre.

The Forensic Mental Health Network (Justice Health) and Juvenile Justice have procedures in place for the return of a young person to custody. This includes a discharge summary and report on the young person's progress in hospital. On return to a Juvenile Justice centre the young person is again assessed on admission by Justice Health staff and Juvenile Justice psychologists.

Juvenile Justice operational staff can refer any concerns regarding a young person returning from hospital to the Juvenile Justice psychologists and onsite Justice Health staff. Outside of business hours 'On Call' Justice Health staff can be contacted.

Number of transfers from mental health facilities

Juvenile Justice does not collect data on whether young people (either remanded in custody or sentenced) were admitted to a mental health hospital prior to entry to a Juvenile Justice Centre.

Austinmer Adolescent Unit

Juvenile Justice detainees experiencing serious mental illnesses while in custody can be scheduled under the Mental Health Act and transferred to the Austinmer Adolescent Unit for treatment. In the financial year 2016-17 there were 21 transfers of detainees between Juvenile Justice centres and the Austinmer Unit, involving 19 young people*.

The median stay in Austinmer was 63 days. Upon discharge from Austinmer most young people were released into the community. Eight (8) were released on parole to be supervised by a caseworker. The others were either transferred to centres, received a community based order, received a Mental Health Order, were granted bail, satisfied their bail conditions, or have had their control order expire.

*Source: DJ/JJ RPELive. 17 May 18, this data is taken from a live database, therefore is subject to change.

Question 4

What mental health services are available at Reiby and Riverina Juvenile Justice Centres?

ANSWER

Reiby Juvenile Justice Centre

- Clinical Nurse Consultant (Mental Health) attends three days per week (from June 2018)
- A psychiatrist clinic is held once a week
- Four psychologist positions
- General nursing staff available Monday to Friday with access to on call specialist advice
- Out-of-hours on call Justice Health services
- Consultations available via Audio-Visual link
- All young people have telephone access to the Mental Health Hotline

Riverina Juvenile Justice Centre

- Clinical Nurse Consultant (Mental Health) attends one day per fortnight
- A psychiatrist clinic is held once a fortnight
- 2 psychologist positions (recruitment action underway for one position)
- General nursing staff available Monday to Friday with access to on call specialist advice
- Out-of-hours on call Justice Health services
- Consultations available via Audio-Visual link
- All young people have telephone access to the Mental Health Hotline
- Justice Health Clinical Integration Team has a staff member based at the Juvenile Justice Wagga Wagga community office. The CIT is a comprehensive state-wide health service that coordinates care for young people who have mental health problems and/or problematic drug and alcohol use for up to three months after their release from custody.

Question 5

How many young people are in custody for non-violent crimes?
How many are incarcerated for reoffending?

ANSWER

Young people in custody for non-violent crime

At 11:59pm on 6 May there were 77 detainees in custody for non-violent offences.

Rate of reoffending

Data on reoffending is only available through the Bureau of Crime Statistics and Research (BOCSAR). The latest Juvenile Justice re-offending data from BOCSAR shows the re-offending rate for detainees sentenced to custody for up to 12 months was 59.2 per cent.

Question 6

What cultural competency training programs are available to Juvenile Justice staff?

ANSWER

Juvenile Justice has a strong commitment to engagement with Aboriginal young people. Approximately 10 per cent of the total Juvenile Justice workforce identify as Aboriginal or Torres Strait Islander, in roles ranging across frontline, managerial and administrative areas. This includes a number of identified roles dedicated to Aboriginal staff, including six caseworker in custody positions.

In addition, Aboriginal engagement is one of the strategic priorities in the Juvenile Justice 2017-2020 Strategic Plan. An important component of the initiatives in this Strategy is the cultural awareness and competence training delivered to staff to strengthen their capability to deliver culturally appropriate services to detainees. This training is embedded in the recruitment, induction and training of staff throughout the organisation. Cultural awareness training is also an essential requirement for staff of non-government service providers delivering programs such as Youth on Track and the Joint Support Program.

Aboriginal Engagement across Juvenile Justice will soon be guided by the new Aboriginal Strategic Plan (2018 – 2021) which aims to systematically address Aboriginal issues in policy and practice and embed cultural competence across Juvenile Justice. This Plan is due to be launched in July 2018.

Examples of specific resources available to Juvenile Justice staff:

- **Aboriginal and Torres Strait Islander Cultural Respect Training Package**
All employees are required to complete a module of the Aboriginal Cultural Respect Framework. Knowledge of the framework builds of cultural awareness for working effectively with Aboriginal detainees and their families
- **Working with Aboriginal and Torres Strait Islander Persons Good Practice Guide:** supports internal organisations and staff to improve their practice when working with Aboriginal detainees, their families and communities
- **My Journey My Life Program** is a resource for staff to utilise with young people to address their offending behaviour while reconnecting with their culture
- **Department of Justice Valuing Diversity, Code of Ethics and Conduct, Language Service Policy:** e-learning modules that are part of the Department's Valuing Diversity package
- **Training in core programs** delivered by Juvenile Justice, including CHART, X Roads, Motivational Interactions, Mental Health First Aid and Suicide Awareness all specifically address issues of cultural awareness and respect.
- **De-escalation training** 'Connect, Redirect, Resolve' identifies the need to consider cultural issues in dealing with detainees in difficult situations
- **REAP** - Radical Extremism Awareness Program delivers training regarding management of young people espousing extreme social/ political/ religious views. Staff also access training from the Australian Multicultural Foundation in recognising anti-social behaviours, including criminality, and processes that can lead to violent extremism
- Juvenile Justice is currently investigating how the program 'Aboriginal 8 Ways of Learning' can be integrated into core programs to further assist front line staff

understand and adapt program content to the learning style preferences of Aboriginal young people

Question 7

What is included in client Background Reports for the Children's Court?

ANSWER

Contents of Background Reports (BGRs):

Background reports provided by Juvenile Justice are individualised and specific to the relevant risks and needs of the young person. They contain the following:

- Sources of information – documents records, files and historical information accessed as well as individuals contacted to prepared the report (e.g. interview with young person and their family)
- Prior and current offences – previous supervision and participation with JJ, prior breaches, analysis of previous and current offending
- Family and living circumstances – explanation of family relationship dynamics and how/if these factors are related to the offending, including family support, accommodation issues, role modelling, cultural issues, parental supervision, significant events experienced in the family environment
- Education and employment – young person's education/employment and how/if related to offending. Also included in this section is any disability information and diagnoses, and whether there is a need for further assessment of an intellectual disability
- Peer relations – explanation of how/if the young person's peers contribute to their offending, including role of peers and involvement with pro/anti-social peers
- Substance abuse – brief explanation of how/if the young person's substance use contributes to their offending
- Leisure and recreation – brief explanation of how/if the young person's leisure and recreation activities contribute to their offending, including level of social support services/recreation in the community, involvement in activities, willingness or ability to engage in pro-social activities
- Personality and behaviour – explanation of any impulsive, challenging or risk-taking behaviour, the motivation for the offence and any factors leading up to the offence that may have influenced its occurrence. Including any mental health information and diagnoses, or identified need for further assessments and referrals
- Attitudes and beliefs – assessment of the young person's attitude to their offence/s and the victim/s. Considers age, stage of development, maturity, other developmental factors
- Eligibility and suitability for community based sentencing options, based on legislative requirements, as well as any casework strategies/plans that could be put into place to support young person.

Question 8

What Mental Health reports and assessments of young people mental are provided to courts?

ANSWER

Circumstances when mental health assessments occur prior to sentencing in the Children's Court

Juvenile Justice psychologists complete a Confidential Psychological Report (CPR) for a young person remanded in custody when requested to do so by the Court or when referred for an assessment of mental health and/or cognitive functioning from a Juvenile Justice Centre Assistant Manager.

When a young person is in the community, it is the responsibility of the court to source an external psychological report.

A young person charged with a sex offence will be referred to a Juvenile Justice psychologist for further assessment and the results included in the Background Report.

If a Juvenile Justice caseworker believes that a young person needs an assessment for any other reason, a referral to a Juvenile Justice psychologist will be made and the outcome included in the Background Report.