

COMMUNITY DEVELOPMENT AND JUSTICE STANDING COMMITTEE

HEARING INTO CORRECTIVE SERVICES OPERATIONS IN WESTERN AUSTRALIA



**TRANSCRIPT OF EVIDENCE
TAKEN AT PERTH
WEDNESDAY, 26 JUNE 2019**

Members

**Mr P.A. Katsambanis (Chairman)
Mr M.J. Folkard (Deputy Chairman)
Mr Z.R.F. Kirkup
Mr A. Krsticevic
Mr D.T. Punch**

Hearing commenced at 10.14 am

Mr ANTONY DAVID HASSALL

Commissioner of Corrective Services, Department of Justice, examined:

Ms CHERYL CLAY

Deputy Commissioner, Community Corrections and Offender Management, Department of Justice, examined:

Ms JANETTE ALLEN

Acting Deputy Commissioner, Women and Young People, Department of Justice, examined:

The CHAIR: On behalf of the committee, I would like to thank you for agreeing to appear today to provide evidence in relation to Corrective Services operations in Western Australia. One of the functions of the committee is to review the agencies within its portfolio responsibilities. From time to time, the committee will conduct agency review hearings. The purpose of today's hearing is to discuss a range of Corrective Services-related matters, including the management of prisoners, on remand and in custody; the provision of prisoner support services in custodial settings; and access to community-based support services.

My name is Peter Katsambanis and I am the Chair of the Community Development and Justice Standing Committee. The other members of the committee are Deputy Chair Mark Folkard; the member for Dawesville, Zak Kirkup; the member for Bunbury, Don Punch; and the member for Carine, Tony Krsticevic. It is important that you understand that any deliberate misleading of this committee may be regarded as a contempt of Parliament. Your evidence is protected by parliamentary privilege; however, this privilege does not apply to anything that you might say outside of today's proceedings.

Before we begin with our questions, do you have any questions about your attendance here today?

Mr Hassall: Not from me, Chair; thank you.

Ms Clay: No.

The CHAIR: Do you have a brief opening statement that you would like to make before we move to questions?

Mr Hassall: No, we are happy to move straight to questions.

The CHAIR: Thank you. I will defer to the member for Dawesville.

Mr Z.R.F. KIRKUP: Good morning. A couple of areas that I would like to look at today are in relation to the treatment of remand prisoners at Hakea Prison and, if we get time, perhaps contraband drug testing and things like that. Following on from our estimates hearings, could you give an outline of the facilities under your purview that you think are in the most stress at the moment in terms of capacity and temperature? Where do you think those pressure points are at the moment within the justice system?

Mr Hassall: As you know, the prison population had a significant growth period in the remand area in 2015, 2016 and 2017. Over the past 12 months, that has pretty much stabilised. The prison muster today is just below 7 000, and it has been there for a year. We have new accommodation coming on stream this year in Bunbury, and in Casuarina next year. I would say, though, that Hakea and Casuarina are the two prisons that give me the most concern. We have put a lot of capacity into

Hakea Prison over the years. There is still some deficit in the support services that we are able to provide. In infrastructure, we have had some investment from government in video links and things like that. Those two prisons in the metro region give me cause for concern. Obviously, there are prisons like Broome, which is a very old prison with aged infrastructure that has its challenges as well.

Mr Z.R.F. KIRKUP: In relation to Hakea and Casuarina, I heard the radio interview this morning. Could you provide a bit more information about what the Hakea risk group is and what that does? If it is possible—I appreciate the sensitivities—can you provide the membership of that group?

Mr Hassall: Following the death of Mr Eades, which is clearly a tragic set of circumstances, I wanted to make sure that the senior leadership in corrections had oversight of what was going on on a more day-to-day basis at Hakea. I formed a Hakea risk group. Initially I chaired that group, which meets three times a week. It is the Corrective Services executive, so the deputy commissioners, population management, intel manager and the people who manage the population. We look at the day-to-day management of the population—any emerging risks and how those risks are managed. One of the things that we know is that when the muster goes higher at Hakea, the number of assaults increases and stuff like that. We do have an issue with the number of mental health prisoners in the system, at both Hakea and Casuarina, so we also monitor that. There is a range of things to look at. I actually handed over the chair of that meeting when we had the new deputy commissioners coming in. I still get the reports, but it is currently chaired by the Deputy Commissioner, Adult Male Prisons.

The CHAIR: Has an internal review been conducted into the circumstances surrounding Mr Eades' death? Has any external review been conducted? If so, who conducted the external review?

[10.20 am]

Mr Hassall: Obviously, the police investigation is currently ongoing. The radio interview this morning was as a result of them arresting two further people yesterday. That is ongoing. Immediately after the death of Mr Eades, we dispatched staff from our own professional standards area in the department. As we do, it is normal practice after any death to see if there are any staff misconduct issues and stuff like that. I am not going to comment on individual members of staff, but that review has taken place. The Inspector of Custodial Services may choose, if he wishes, to again review that; that is a matter for them, though.

The CHAIR: I understand that the police are investigating the criminal element of it; however, who has investigated, or perhaps audited, the procedures within the prison that may or may not have contributed to either the event happening or the severity of the event? I think that is what concerns me most.

Mr Hassall: After any incident in a prison, there is a requirement on the local management to look at their own procedures. That report has to be submitted, and we have that report. That is then reviewed by a security committee within the department and we have a look at all of that. As I said, the professional standards people will go in. As part of the professional standards team that looks at misconduct, there is also then the department's area that sits in there that looks at all deaths, so they do the review of the death in custody, and that work is ongoing. They will collect things like, for example, the clinical records—his treatment, his care pathways. There are a number of lines of inquiry. There is the police. The prison superintendent has to do his review of the incident; that is normal procedure. There is the professional standards looking at the staff misconduct, and then there is the death in custody review that goes on as well.

The CHAIR: With that internal review that you spoke about at the start of that answer, what changes in procedures have resulted from that review?

Mr Hassall: There is a number—again, I do not want to go into all of the operational stuff, because I do not have it all in front of me. I do know that there were a number of changes around recording in wing occurrence books and stuff like that, but for a more detailed response, I would have to take it on notice.

The CHAIR: Could we receive that on notice? We will write to you afterwards and highlight the areas that will be taken on notice.

Have you not considered that there would be any value in having an external review, or is that something that will happen after all these other reviews take place?

Mr Hassall: We have the police investigation, which will take primacy over anything we do. We will let that run its course. The Inspector of Custodial Services may opt to have a look, and we have the other internal things. The direct answer to your question of whether we have commissioned an external review ourselves is that, no, we have not.

Mr M.J. FOLKARD: My question has two aspects to it. The first is: with all of these reviews, is the current Prisons Act up to scratch in assisting you in that process?

Mr Hassall: The Prisons Act was written over 35 years ago. It is a good bit of legislation, I have to say. I do not know which government was in, but it is good legislation. It is not so much the enabling legislation that is the challenge we have. The challenge in the prison system at the moment is the number of prisoners that we have with a mental health problem. That is a daily challenge for any system in Australia.

Mr M.J. FOLKARD: Is that captured by the Prisons Act?

Mr Hassall: A number of other acts would cover people with mental health issues.

Mr Z.R.F. KIRKUP: I appreciate the concerns in relation to prisoners with mental health concerns, particularly those in remand. Do you think there is a need for more specialised facilities outside of perhaps Hakea for that?

Mr Hassall: Yes.

Mr Z.R.F. KIRKUP: Do you think there is a need for a new prison entirely in that respect?

Mr Hassall: With the accommodation that we have coming on stream—as I set out, I have brought some stuff and I am happy to table that—if the numbers stay the same, that will assist the overall muster of the state. We are in a situation in which we have put accommodation historically over the years where the services have not matched. If we look at Hakea, for example—as I said, we have the new court visits facility—the health centre there is under pressure. The visits centre is under pressure. We need a new kitchen. A range of things are needed. When you put extra beds into a prison and you do not match the services that go with that, all you are doing is backing up problems in the prison going forward. As I said, we did get additional funding for the visit centre from government last year. As part of the expansion at Casuarina, the kitchen has been upgraded and the visit centre has been upgraded.

Mr Z.R.F. KIRKUP: I appreciate that very little of that is in relation to those particular prisoners with mental health concerns; is that right?

Mr Hassall: Yes. One of the things that we are looking at at the moment is that we have 512 beds coming on stream at Casuarina at the end of this year—half in December and half in May. There will be a bit of commissioning lag on that from when we get the beds on stream. Our plan at the moment

for the second half, 256, is the AOD facility. That will be 128 beds. I will hand over to Ms Clay and she will talk a little about what we did in the mental health space. What we are planning at the moment is that for the other 128 beds, we would look at having some sort of step up, step down facility. It will not be a purpose-built facility because we have only a certain amount of money to put these units in. That is the first phase.

The second phase is the additional 344 beds. We are just in the concept phase at the moment of looking at what we do with those beds, which are going to Casuarina. What we are looking at there is additional secure beds in terms of management units, which will give some relief at Hakea, and then some additional mental health beds. At the moment we are running all the data on that, looking at the offenders. We know there are about 1 500 in the system on any given day with a diagnosed mental health problem. I will hand over to Ms Clay to give more detail on that.

Ms Clay: This has given us an opportunity to start looking at some of the planning on how we manage our prisoners with mental health issues. As part of that, we have been doing a bit of a snapshot view and using our medical staff to give us some categorical information around these types of prisoner profiles. We have been able to identify those who have the really significant mental health issues that would be transitioning to the Frankland Centre. There is a key group under that that are on the border of needing that intensive care. Then there is a group of prisoners that need to be better managed inside the prison population. We class it as alcohol and other drug and mental health co-dependency, because you often see the two together. The prison expansion is providing us with an opportunity to now look at how operationally we need to get better prepared at how we can manage this client cohort. There has been a lot of work done around incident rates, which prisoners have been involved, so that we understand which people we need to work with. Now it is about matching that service to that. Currently, we are looking—in fact, I have my team at Hakea today and shortly they will be at Casuarina—at the current services that we have and how we can better utilise our staff in the interim while this prison build is taking place. It is not an immediate facility response, but it is taking into account what we have available and how we can better reorganise what we are doing.

Mr A. KRSTICEVIC: In terms of prisoners with mental health issues, what happens and what support do they get when they are released? Once they walk out your door, you know they have mental health issues: what happens after that? What percentage of those will come back to prison as opposed to those who do not have mental health issues?

Mr Hassall: On the last question, if we could take the returns on notice; we will get you some detailed data, if that is okay. I will ask Ms Clay to answer the other question.

[10.30 am]

Ms Clay: In preparing prisoners for release, we have some agreements with some service providers. There is what we call a transition process. When we know that prisoners are within the last six months of their sentence, we will link them into services in the community. Some of that, of course, is dependent on whether the services are available. We provide some of that ourselves as transition through our contracts with service providers, but there are also connections with other service providers in the community. Once they leave prison, if they are not under any further obligation for supervision, it is totally voluntary on their behalf. If they are under some sort of supervision, they will then go through our community corrections officers to make sure they are attending what they should be attending to manage their behaviour.

Mr Hassall: If it is acceptable—I am happy to table this—I have a list of all our post-release service providers and what areas they cover, so you know the geographical spread.

The CHAIR: That is provided as information.

Mr Hassall: Yes, and the infrastructure one.

The CHAIR: Thank you. We will incorporate that.

Mr A. KRSTICEVIC: You said “if the services are available”. Do you have any idea of how many people would leave where the services were not available? If someone is walking out today and there are no services available for them, they are obviously in a distressed state but they are just going to have to work it out themselves: do you have the figures on that?

Ms Clay: No figures.

Mr Hassall: Like Ms Clay said, if they were under supervision—the majority would be; we could get you that data—we would know what services they have been linked into. If they were just being released, there would be some release plan. It would not be that we would just open the door and say, “It is up to you.” There would be some transitional planning and we have transitional providers. We would have to get the data for you, but there would not be a lot who are just released with no pre-planning work at all, because that is too risky.

The CHAIR: Could you give us an indication, either on notice or now if you have it today, over the past three financial years of the number of prisoners released under supervision of some sort or another—you could probably group the type of supervision—and the number of prisoners who were released without supervision, to give us an idea? It probably also gives us a good idea of the turnover too.

Mr Hassall: Yes.

Mr A. KRSTICEVIC: Would those services be provided by the not-for-profit sector, or are they provided by the government?

Mr Hassall: It is on the document that I have just tabled; it is a mixture of both.

Ms Clay: It would be a mixture of both.

Mr D.T. PUNCH: I went back to the 2015–16 report of the Inspector of Custodial Services in which you noted that at that time prisons were operating at 148.5 per cent of design capacity and there did not seem to be anything in the forward estimates in terms of a line of sight about how that growth might be managed, either in terms of diversionary programs, exit strategies or accommodation within the prison estate itself. I assume that that put a lot of focus on actual accommodation and management within the prison settings. You mentioned that that situation has improved with some of the accommodation construction that is underway. Has that provided more flexibility in managing the diversity of prisoners that you have, particularly those with special needs such as mental health or drug-related matters?

Mr Hassall: Not at the moment, but it will. On the handout that I have just tabled, you will see that going back to 2017, we had an immediate crisis when we had to get some beds into the system and we put an additional 212 beds across the prison estate. That was really to manage the immediate challenges we had with the prison muster. We went back to government with more of a longer term plan. That is how we ended up with the additional 160-bed funding for Bunbury, which comes onstream in August.

Mr D.T. PUNCH: For which we are very grateful.

Mr Hassall: I hope to invite you so you can do the official opening. And there was the 512, so there were an additional 880 beds in total. Those beds will then give us capacity to manage the cohorts better. The plan we are working on at the moment is, for example, the flow-on effect of Bunbury to

take the relief off Hakea. When we get the 512 at Casuarina, we will be able to look, as Ms Clay said, at better management of prisoners with mental health problems, and there is a range.

Mr D.T. PUNCH: I know there has been some work done in relation to opening up specific prisons to drug rehab programs. How is that progressing?

Mr Hassall: Wandoo was transitioned, as you know, last year. It opened up in July. We were there on Monday with another select committee. I think all the early indications are that that is very successful. I will let Ms Allen tell you a little more about that. We have had a number of women go through there. We have done that in partnership with Cyrenian House. That partnership, like any new venture, has had some teething issues—minor in the grand scheme of things—but overall it is working well. We will do an evaluation once the prison has been operating for a longer period. All the early indications are that it is working really well. I will hand over to Ms Allen to give you the details.

Ms Allen: As the commissioner said, it is early days. We are just about a year old. We took a little while, by the time we got the women through. The site itself had to have some infrastructure improvements to become fit for the purpose we wanted it to become. In fact, we are just about to open the new gatehouse. It is very fresh and very new. The substance testing we conduct on the women there is intensive. We conduct a lot of substance testing to remain drug-free. A remarkable point is that in the nearly 12 months we have been open, we have not had one positive test to drug use from the women who have come through that centre, which is a tremendous result. That has occurred for a lot of reasons.

We have been able to provide a dedicated facility for these women, and we will soon have it for the men. Providing somewhere for people who come into our care who really want to change their lives is what we are doing at Wandoo. We triage the women who come there to make sure that they do not have certain things, and their cognitive capacity to engage et cetera. It is quite an intensive program for the women there. It goes for six months through various stages. Sometimes the women will go forward a bit, but then they will have to come back and repeat a stage, so it is intensive. Even though it is early days, the no substance use is a remarkable point, because all of these women have huge histories of substance and alcohol use. Also, of the women who have come through and who have completed the program, we have had only one woman who has returned to prison. Given that number, it works out about a 12 per cent return rate, which is very low.

We are hopeful that when we have a good look at this—a two year period is about the time when you really need to have a look at results—it is going to be very good news. It is a different model. We are working closely with our partner, Cyrenian House. It is based on a therapeutic community model, a TC model, and it is quite different. I was there with the commissioner on Monday. The staff, as well as the women, are committed. It has a very positive therapeutic feel about it. It does not have a traditional feel, like when you go into a prison, which is really hopeful.

Mr D.T. PUNCH: Would I be correct in assuming, then, that the culture has shifted from a containment philosophy to a full partnership-based rehab philosophy, and that that is reflected in the transitional arrangements as people move out of the prison and into the community?

Ms Allen: Absolutely; you have got it. That is really the challenge, is it not? The challenge is to get that cultural shift. You do get that feel. We are starting to move towards that way in our other facilities, to look at the work we are doing, which is to have that engagement with the community, the custodial and the staff, and also the not-for-profits that assist us with the reintegration work that we link people up with before they are released.

[10.40 am]

Mr D.T. PUNCH: Do you see that philosophy driving the whole challenge around entry, management and exit in terms of dealing with the bottlenecks within the custodial system?

Mr Hassall: Wandoo is unique. Clearly we have put a lot of work into that and there is a lot of personal responsibility placed on the offender to change their behaviour, which is a good thing. It is a voluntary program. It is a treatment program, not a cure program, and it works. It is a small community. We have had the investment to partner with Cyrenian. As Ms Allen said, we have been able to build a new gatehouse. We have put all the things in place that would make it a success. At the other end of the spectrum is, of course, Hakea, which is much more challenging in terms of infrastructure to create that sort of culture. There is a very high turnover of staff. As Ms Allen said, where we can take those principles of trauma-informed care—getting prisoners to acknowledge their offending behaviour and get them into treatment programs—we will do that. The Deputy Commissioner, Women and Young People is a new position. We do want to look at the management of female offenders to make sure that it is more in tune with how we manage Wandoo than how we manage, say, Hakea, because we have got the space to do that and it is a smaller cohort for us to do that.

Mr M.J. FOLKARD: We are doing it fantastically. It would appear that the rehabilitation model at Wandoo would be Australia's best practice. What is happening with the male offenders in that space? I believe we are working down the road to develop a similar model there. What are the time frames involved with that? What are the bottlenecks that are holding it back and stopping it from being implemented sooner?

Mr Hassall: I will take that question, if that is okay. The bottleneck is that we have to get the building. That is part of the Casuarina expansion. We made a decision when we made the announcement about the 512 beds to put the 256 beds that were the second phase as the AOD model. There were mainly two reasons for that: one is that we did not know what was going to happen with the general purpose beds in the population with the prison system. As I said, it just turns out that they have stabilised, but we wanted a bit of insurance built into the system in case we needed those 256 beds. The first tranche that will come onstream will just be general purpose beds. We also wanted some time to plan. It is a much larger unit, if you like. It is 128 beds and there will be a mental health component, too. We needed time to look at those services. Male offenders present with different criminogenic needs to female offenders, so we have been working on all of that. We have a team looking at that at the moment. We have had some external review of us, in terms of helping us make a decision about how we provide the services. Do we go to a not-for-profit or do we provide it in-house? We have asked somebody externally to make an assessment of the department capability in that space. We have had Corrections Victoria and an independent criminologist from New South Wales help us there.

Mr M.J. FOLKARD: Sorry to jump in: a couple of times, mental health has cropped up in response to our questions. Are you engaging with our Mental Health Commissioner in that space?

Mr Hassall: Yes, we have someone from the Mental Health Commission seconded into the team. They have been very supportive. I have met with the Mental Health Commissioner a couple of times on this issue. We have had that arrangement. We have, I think, two people.

Mr M.J. FOLKARD: Are they value-adding to the way you are doing business?

Mr Hassall: Yes. With Wandoo it was rushed, to be perfectly honest. We had to get it done very quickly, so we just had to plough through. We have had a bit more time with this one. The two people we have had on secondment have actually been able to help us with our thinking and shape our thinking about how the unit would run but, more importantly, how it would integrate with services in the community.

Mr M.J. FOLKARD: So embedding back out and then comparing with on release. I picked up that you said there was 12.5 per cent reoffending based on those after release. Is that early days?

Mr Hassall: Correct.

Ms Allen: It is early days. I say that it is early days because, generally, if you have a look over about a two-year period, you can get more of an indication of success, but we are only a year.

Mr M.J. FOLKARD: What is the general reoffending percentage of those who are being released?

Mr Hassall: We have a binary measure, which is basically a return to prison. I will get you the exact figure. It is in the RoGS data.

Mr Z.R.F. KIRKUP: Is it 42.7?

Mr Hassall: Mr Kirkup is correct.

The CHAIR: Within what time frame?

Mr Hassall: That is two years.

Mr M.J. FOLKARD: So they will come back in after two years. I suppose we will ask this question on notice: how many times, and for the second or third time, how far does that percentage fall off?

Mr Hassall: Yes. The measure is not that sophisticated. I think what you are talking about is a desistance measure, which we do not have. This is just, sort of, that a person gets arrested; they come back in. What you want to know is whether they are coming back in for a more minor offence, have they been out for longer—those type of things. We do not have that type of measure.

Mr Z.R.F. KIRKUP: Just taking you back to Hakea, if we can, commissioner. I believe, through questions on notice and certainly through estimates, we have established that, at Hakea, the level of assaults has gone up. The level of overcrowding has gone up. Obviously, in 2019, now we have the level of unnatural deaths that has gone up quite considerably. I think contraband interception has gone up. Of course, the prison union believes that the prisoners now—they call it a crisis point, in that gang crime, in particular, is out of control. I think the Prison Officers' Union has suggested that it is at a point where staff are fearful of engaging now. What is your response to that assertion, I suppose, that by every other measure now, it seems like the situation at Hakea is almost out of control?

Mr Hassall: I was there yesterday. I have been working in prisons for 30 years, and I would not describe it as a prison out of control. I walked around; I felt quite safe. There were prisoners out doing activities. There was lots of staff about. Is it challenging? Absolutely. We know that when the numbers go nearer 1 200 there, then what you get is more assaults and more incidents. That is a fact. We cannot deny that. Primarily, that is driven because there are not enough activities for prisoners. If you have a system that just warehouses people, then that is the behaviour that you will get. Sometimes we are in that space at Hakea.

What I would say on the contraband is that on the back of the CCC reports last year, we have set up a new division in the department—professional standards—and we have ramped up our searching not only of visitors, but also of staff. There will be some, as a consequence of that. In a sense, we have two areas of the department now that are doing things. We have the professional standards area that will do staff testing and drug and alcohol testing, including myself. They will just go in. We have police officers on secondment into that division. That is all intelligence-led. That work carries on, and we have a number of staff. It is all in the public domain that the CCC have identified it. We also then have our usual searching activities, where we have the special operations group go out and they will do random searching and car park searching of staff and visitors. We have ramped those activities up over the last 18 months. Again, it is a challenge for us—people bringing stuff into

the prison system—and I make no apologies; we do inconvenience people and we do inconvenience prisoners.

On the gang issue, again, there is a problem with a small number of prisoners in the prison estate, mainly OMCGs—outlaw motorcycle gangs—who will organise their criminal activity wherever they are. Just going back to the earlier question, I forgot to mention that, on the back of Mr Eades' death, we had a look at that and we had a look at the gang issues, and we introduced a disruptive prisoner policy, where those small number of people, when we know who they are and we know their associations—we work very closely with the police, we have put more investment into intelligence over the last two years—we will make those people's lives uncomfortable. As I said on the radio this morning, I make no apologies for that. They will get moved around without notice.

Just going back to the other point that you made around the deaths. I think there have been four at Hakea. It looks like two are apparent suicides; we cannot make that determination until, as you know, they are subject to the police investigation. Again, we will have to wait to see what comes out of all of those inquiries.

[10.50 am]

The CHAIR: Just on the same thing, and then we will go back to the minister. Just on that, you have described Hakea Prison. I do not want to put words in your mouth, but from what I have heard, I would describe it as overcrowded and with not enough things for people to do when they are in there. These people have been remanded in custody for a reason, so the last thing we want to do is put them back out on the street. Do we require an additional facility, either in the metropolitan area or in a regional place? That is part (a) of the question. Part (b) is: how can we get more activities for those people to do, so that they do not fall into the worst type of habits?

Mr Hassall: If I could just take the first part of your question on the accommodation, we have done our long-term custodial plan, which we have submitted to government. That is all the accommodation that I have already talked about within the handout. As you know, we have secured some additional funding to look at scoping out a new prison in the Kimberley. If the population at the moment continues as it is, the beds that are coming onstream in the metro, Bunbury and Casuarina would be sufficient. But we have plans going forward to 2032 that we have presented, and that long-term plan. We will go back to government every year and say, "This is the position that we are at." As those beds come onstream and if the population stays as it is, that will take the pressure off Hakea. I do not deny that when it gets to nearer 1 200, it is an incredibly difficult and complex prison to manage. It is a daily challenge for the superintendent, and it is a daily challenge for staff, compounded by the OMCG issue that I have talked about, but also the number of prisoners that we have in the system with mental health problems. Our ability to service those prisoners is very limited.

Mr Z.R.F. KIRKUP: Further to my original question, I suppose, just in relation to Hakea and the remand population, with those prisoners with a mental health concern—in Hakea at any point in time it is suggested it is around 10 per cent or thereabouts—as part of the ask that you have gone to government with in relation to the long-term builds, have you asked government for a specific mental health facility? If so, what has the reception been?

Mr Hassall: We did talk to the minister when the government first came in about the plans for Casuarina, and the need for a step-up, step-down facility. There were no issues with that, and that is what we are planning now. So the 128 beds will be the AOD site; the second bit will be for a step-up, step-down. We have to go back for the recurrent funding to do that. We will have to see what the outcome of that is, but there have not been any issues with our planning in that space at all.

Mr Z.R.F. KIRKUP: In relation to the gang affiliation profiles that exist in Hakea and across the system, more broadly speaking, are you able to provide through supplementary information a breakdown of those gang affiliations? I know that they are collected by prison. Can we get an understanding of perhaps the gang affiliation for each prison that exists?

Mr Hassall: Yes, I do not see any issue with that. We will take that on notice.

The CHAIR: We will take that on notice.

Mr Z.R.F. KIRKUP: Thank you, Chair. The question that was answered by the minister on 14 March this year was in relation to drug testing of prison or corrective services employees. I will remind you of the numbers. This is question on notice 4486. In 2016, 364 employees were tested; in 2017, 128 employees were tested; then in 2018, 426 employees were tested—so 364, 128, 426. Obviously, it is great to see as many corrective services employees tested as possible. I am keen to understand why you believe in 2017 there was such a significant decline in those being tested—effectively less than 30 per cent of the number before.

Mr Hassall: To answer your question, we have to go back to 2015. I think, under the previous government, the regulations were introduced about drug testing, and they had not been implemented by the then Department of Corrections. I was not the commissioner at the time; this is just my understanding. There was a lot of rush to get that done, and we put some processes in place to get the drug testing off the ground in 2016. There was always an agreement that there would be a review period, so what you saw in 2017 is that review take place. Were we using the right testing tools? Was our intelligence right? Were we managing it right? So there was a dip, absolutely, whilst we did that review. When we did the review through 2017, we changed some of the processes. I cannot recall, but I am happy to take it on notice about what we did. We expanded the drug testing team. For example, we put in place a drug mitigation manager. We linked it up with drugs and we just drew on more intelligence. That was the reason for the dip.

Mr Z.R.F. KIRKUP: I appreciate that. On that, then, as part of the review, are you aware of any instructions being given to cease the testing of corrective services employees while that review was undertaken?

Mr Hassall: I will have to go back and check, but there was an instruction to cease a certain stream of testing, yes, whilst we did the review. It was almost blanket screening that we were doing, and what we wanted to do was go for a more targeted testing regime, because we found that when you use intelligence, and we would collaborate the intelligence, say, of what the police were telling us and what we were finding ourselves, we actually got a much higher hit rate. So rather just blanket testing anybody—turn up on a Monday, for example, and just test everyone—when we targeted people, we had a much higher positive test rate.

Mr Z.R.F. KIRKUP: The 2017 figures show that there was a four per cent hit rate, and the 2018 figures show a lesser amount hit rate.

Mr Hassall: I do not have the figures in front of me.

Mr Z.R.F. KIRKUP: On the question that I asked, they show that there was a reduction in the hit rate, so I appreciate that that might be your position, commissioner, but it does not necessarily bear out in the figures that we saw. In relation to the officers who tested positive to those drug tests, I understand most of them would resign prior to the disciplinary matters being heard. Is there any likelihood of those prison officers returning back into the system? You can appreciate where the interest might be. An officer tests positive, they then resign before disciplinary action can take place; as a result, there is nothing on their file that says they have tested positive and are due for disciplinary action. Then they return into the system. Is that a possibility?

Mr Hassall: I will have to take that on notice. There is a system where we can record something so that we know when we do that. I will have to get you the details on that. There is a process, even if somebody resigns, that we can record that, to say that they do not come back in.

The CHAIR: Can you give us an indication over, say, the last three years, of how many people have resigned in those circumstances?

Mr Hassall: We can certainly take that on notice and give you the data about resignations, yes.

The CHAIR: Resigned in the process between a positive drug test and disciplinary action being taken.

Mr Hassall: Yes.

Mr D.T. PUNCH: Thank you for the spreadsheet on community-based services. Just taking you down a different track, I am really interested in the regional data around the capacity of those community-based services in relation to the prison populations and the discharge rates in those regional prisons. That might be a question on notice.

Mr Hassall: If we could take that on notice.

Mr D.T. PUNCH: Just to get an understanding of their ability to actually meet the demand. That would be great.

Mr A. KRSTICEVIC: You mentioned earlier, “If the prison population stays the same or consistent into the future.” I am just wondering whether any work is being done or communication between you and the police and other parts of government to be able to map out trends, whether it be criminal activity, whether it be the amount of drugs coming into the system and in the community generally, just those things that naturally lead to crime—homelessness and all the economic and financial circumstances affecting people today—and whether there are other corporate crimes that are going to be committed. What analysis are you doing there? Is there any sort of future gazing?

[11.00 am]

Mr Hassall: There are a number of things going on in that space. I have regular meetings with the police commissioner where we talk about a whole range of things, what is going on in prisons, and the sort of activities that police may or may not do. Some things he can tell me; some things he cannot. But there is an overarching justice planning and reform committee that is chaired by the Department of the Premier and Cabinet that looks at a whole range of things. That brings together the police, the Director of Public Prosecutions and a whole range of government agencies, looking at things that you have just talked about. In the first year of this government, we did get funding to build a justice pipeline model, which is basically a data system, if you like, where if you want to change policy, or things are happening, you can put that into the model, and it will tell you the flow-on effects—how many courts, how many police officers, how many prison beds. It is not my area of expertise, but that is up and running. We do run datasets then and share that, where we can, across agencies. I have brought some with me today on remand. So that sort of strategic overarching committee is in place. That is how we go with things like the accommodation, the funding issues, things that might happen in the—I cannot think of the name of the laboratory now—ChemCentre.

Mr M.J. FOLKARD: Going back to the drug testing of employees and that sort of stuff, my question to you is in relation to the Prisons Act. How are you finding the dated Prison Act in relation to discipline and in that space? I know that in the policing environment, sworn police officers in relation to disciplinary matters can be compelled to answer, and the right to remain silent in that space. I know that the Prison Act does not necessarily have that embedded into it as part of the statutes and that sort of stuff. As I said to you before, would the modernising of the Prisons Act help you in that space?

Mr Hassall: Yes. There are two acts—the Prisons Act and the Public Sector Management Act. Some of the points I would take on notice and get a more detailed response, but there invariably will be gaps in that space. We do not have some powers over employees, for example, to compel to answer. If I could take that on notice, I could give you more a more detailed response.

Mr M.J. FOLKARD: Yes, I would be interested to get your feedback as to the conflict between obviously the public service space versus those of sworn prison officers. I think that maybe we need to have a look at that to assist the way that we actually run or manage our employees in that space, and your thoughts.

Mr Hassall: Certainly, now we have the new professional standards area in the department, that is an area that I would expect them to be looking at. If I could take that on notice, we can certainly give you a more detailed response.

The CHAIR: We will take that on notice. Could I go back to the mental health area. Are you able to give us a number of the secure forensic mental health beds that you have within the system? Are you able to break that down by facility?

Mr Hassall: We do not have any—correct me if I am wrong, Cheryl—secure mental health beds. We could certainly give you a breakdown of the number of infirmary beds and crisis care beds that we have in the system, and management unit beds, where we would manage those people.

The CHAIR: Sure, but you do not have any dedicated secure mental health beds within the system?

Mr Hassall: I would have to take that on notice just to double-check. I do not think we do, designated under the legislation.

The CHAIR: Is it something that would be useful in the management of the issues that you have described?

Mr Hassall: Well, I think what you need in a prison system is a range of options to manage people. As I said in my earlier answers, we assess prisoners. There are basically four categories. There is the category of just everyone is okay, and then there is one to three, which is you have a diagnosed mental health problem. In category 1, which is the most extreme end—that is where we have a lot of prisoners—you would want a continuum of care. You would want some prison-based settings. You want a step-up, step-down, because people's health changes every day. We do not have that at the moment, so we are limited in our response to the health needs that they present.

The CHAIR: As a result of that management, I assume some prisoners are actually being managed by being diverted out into hospital settings. Do you have any numbers around that, on an average basis per day?

Mr Hassall: We could certainly get that information of prisoners that would go to hospital for primary care. There would be smaller numbers going for mental health issues. Our referral is to the Frankland Centre, so we could give you the data on numbers of referrals.

The CHAIR: Yes, if you could, that would be useful. So all of your mental health referrals are to Frankland Centre? You do not refer any elsewhere, unless they require primary care as part of that treatment?

Mr Hassall: Correct.

The CHAIR: Okay.

Mr M.J. FOLKARD: The Frankland Centre is a mental health facility under the Mental Health Act et cetera. Would the equivalent of that sort of facility within the prison environment assist you in that space?

Mr Hassall: Yes, absolutely. It is a gap in our system, and that is what we would aim to do with the 128 beds at Casuarina. That is what I would describe as the step up, step down. Ideally, we would like it to be a purpose-built step-up, step-down facility, but we have just got the accommodation we have got, so we will make that work. That will give us that type of facility so we can transition people in from the mainstream and up to the Frankland Centre and back down, and that is how it would work. For example, if you look, as I mentioned, at Ravenhall prison in Victoria, when they designed that prison, they had a purpose-built step-up, step-down facility that patients get referred on to the Thomas Embling centre.

Mr M.J. FOLKARD: So, those extreme cases can be placed in that sort of facility and managed with a partnership with the health department et cetera, so we were managing their mental health. Is that what you are saying?

Mr Hassall: That is correct.

The CHAIR: As I understand the operation at Ravenhall, it does still refer out to Thomas Embling at the top end and you would look at the same model here, which would, I assume, if you are referring only top end to the Frankland Centre, take some pressure off the Frankland Centre as well.

Mr Hassall: Correct. That is what we would want the 128 beds to be. That is our planning at the moment.

Mr Z.R.F. KIRKUP: In the time that we have, I am keen to just get a bit of an understanding for the FTE profile at Hakea and Casuarina, if we can, and the retention rates. Noting the Prison Officers' Union, if you have the peak union come out and say the prison is in a crisis point and there is a problem with respect to a gang culture developing in the prison that is impossible to control at the staffing levels, do you find it difficult to attract and retain prison officers there; and, if so, do you have the numbers of those officers at Hakea and Casuarina who are on the transfer list?

Mr Hassall: We can certainly get you that information on notice. We are running a recruitment campaign generally for prison officers across the state. It has been an incredibly successful campaign. Again, I will get you the exact figures. I think we have attracted over 2 000 applicants. Most of those people actually want to go to the metro region. Our challenge is getting staff to go to the eastern goldfields, to be perfectly honest, which is where our main challenge is for recruitment, and we have got some dedicated work going on there. On average, about 100 prison officers a year leave for one reason or another. They either get promoted or they just get to retirement age. That is our normal business, if you like. That is four prison officer scores. On top of that, we are recruiting, in total, 458 officers over the next two years. That is primarily to meet the attrition and the new accommodation that is coming onstream.

Mr Z.R.F. KIRKUP: I appreciate that, commissioner. Do you have any concerns then with respect to the level of turnover at Hakea or at Casuarina?

Mr Hassall: No. The problem I have is people from eastern goldfields—I have most of the staff there want to go to —

Mr Z.R.F. KIRKUP: Forty-nine per cent, I think it was.

Mr Hassall: Higher than that—it changes every day. I had a petition sent to me the other day, I think, with 50-odd people who want to come out. Our challenge is not getting people to the metro prisons; it is the regional prisons, to be honest. That is where the challenge is. I am happy to get you the data, though.

The CHAIR: Yes, okay. We will take that on notice. Of the 458 new recruits, how many of those will be additional numbers to the system?

Mr Hassall: Like I said, take out the 100 a year, so those are additional for new accommodation—so, 258. That is what we are planning for.

Mr M.J. FOLKARD: I have never seen a recruitment for numbers that big.

Mr Hassall: Well, what happened was we had the recruitment freeze. We had a bottleneck of vacancies, if you like, and that put a lot of pressure on the system when we went into recruitment. We have a limited capability in terms of what we can do at training. So, 2017 to 2018 was an incredibly difficult year for us. I will acknowledge that we were not on the front foot with as much recruitment as we should have been because we were just playing catch-up. We have increased the capacity in the training academy to put more recruits through and we are running regional schools now, which has been beneficial because we have been able to attract more people who basically do not have to come to Perth. We have run regional schools in the eastern goldfields, Albany and Greenough, and they have been incredibly successful.

[11.10 am]

The CHAIR: In your staffing profile, do you have a breakdown of Indigenous staff?

Mr Hassall: We can certainly take that on notice.

The CHAIR: Has that number increased over the last couple of years? To be frank, the last time I looked at those numbers, they were pretty low.

Mr Hassall: They are low, and I will take it on notice to get you the exact figure. I had a briefing this week from the HR team on the work that they are doing in this space. We have got an Aboriginal development team in the department that is looking at that. We are working in the eastern goldfields, for example, with some agencies where we are doing the bulk of our recruitment not just of Aboriginal people, but women as well. We are looking to improve diversity across the “Ps”. As I said, we have no problem attracting in the metro region; our challenge is in the regions. We have to be a bit more flexible and a bit more responsive in terms of how we deliver training, which is why we have done the regional schools. For example, we certainly want to have a look at part-time prison officers so we might be a bit more appealing to a different group of workers who might want to join us—people with young children and stuff like that. We are certainly looking at that at the moment.

Mr D.T. PUNCH: There is a Bunbury training school as well, I think.

Mr Hassall: There was, yes.

The CHAIR: In relation to part-time corrections officers, is there a model elsewhere in Australia that has part-time officers?

Mr Hassall: The nearest one that I know of—we could do a jurisdictional scan quite easily and get that information—is New South Wales. They went down a route of more casualisation of their workers, so they were able to scale up and scale down. But I would have to take that on notice.

Mr Z.R.F. KIRKUP: Do you find, commissioner, in Hakea and Casuarina, after you have new recruits coming through—is the process for Corrections to usually put the new junior, less experienced, staff in somewhere like Hakea to just sort of get their experience up and then shift them out to different prisons? How do you manage that? Is there an inclination at Hakea, given that it is a remand prison, or Casuarina, for those more junior/inexperienced staff?

Mr Hassall: Recently, we have gone to recruit in the regions. That is where our focus and attention has been. We have had some schools this year and last year where they have gone to the metro. We had one school, for example, where we over-recruited, so we had 24 prison officers—we had basically come to the end of a campaign. They were sitting in a pool. The pool was going to run out. So, we just took the decision to take those people, knowing that we would have some attrition. Why

waste the effort that we had put in? We just split those officers between Hakea and Casuarina and just run over their complement and just reduced having the knock-on effect: the overtime, or covering sickness. We do get some new officers go there, but our focus, as I say, over the last year, has been in those regional prisons because that is where we get the highest turnover. Our most problematic prison for that is the eastern goldfields.

Mr Z.R.F. KIRKUP: But just within that metro context then and just so I can understand if I am reading you right then, commissioner—in the metro context only for the place that you typically send those more fresh recruits —

Mr Hassall: Yes, the new people.

Mr Z.R.F. KIRKUP: —have gone into Hakea and Casuarina?

Mr Hassall: Some will have done, yes. Yesterday I was there and there were certainly some probationary officers there. Absolutely.

Mr Z.R.F. KIRKUP: Is that usually higher there than anywhere else?

Mr Hassall: Not that I know. I am happy to get the information, Chair.

The CHAIR: Thank you for your time today. Thank you for your evidence before the committee. A transcript of the hearing will be forwarded to you in the usual way for correction of transcribing errors. You need to make any such corrections on the transcript and return it within 10 working days. If you do not, we will just deem that you treat it to be correct. I think you know you cannot use the corrections process to introduce new material or change the sense of your evidence, but if you want to provide any clarifying information, elaborate on anything or just give us any new information you think might be useful, you are very welcome to do so and you can return it at the same time as you return the transcript of evidence. We will also formally write to you with the questions that you have indicated you will take on notice today during the hearing. You can respond to that in the usual way. Once again, thank you for your evidence. We appreciate the time that you have taken to talk to us. Good luck in managing what is a difficult and complex portfolio.

Mr Hassall: Thank you. I forgot to mention, sorry. I did bring some data on remand numbers and growth over 10 years, and jurisdictional scans. I am happy to leave that if that is helpful.

The CHAIR: Yes, if you could, that would be helpful advice. Thank you. We will conclude the hearing.

Hearing concluded at 11.15 am
