APPENDIX 1

RECOMMENDATIONS OF THE ROYAL COMMISSION INTO ABORIGINAL DEATHS IN CUSTODY

Post Death Investigations

RECOMMENDATION 23 – Legal representation for families at inquests

That the family of the deceased be entitled to legal representation at the inquest and that government pay the reasonable costs of such representation through legal aid schemes or otherwise.

Custodial Health and Safety

RECOMMENDATION 122 – Legal duty of care of persons in the custody of Police Services, Corrective Services and authorities in charge of juvenile centres

That Governments ensure that:

a. Police Services, Corrective Services, and authorities in charge of juvenile centres recognize that they owe a legal duty of care to persons in their custody;

b. That the standing instructions to the officers of these authorities specify that each officer involved in the arrest, incarceration or supervision of a person in custody has a legal duty of care to that person, and may be held legally responsible for the death or injury of the person caused or contributed to by a breach of that duty; and

c. That these authorities ensure that such officers are aware of their responsibilities and trained appropriately to meet them, both on recruitment and during their service.

RECOMMENDATION 124 – Police and Corrective Services establish procedures for the conduct of de-briefing sessions following incidents of importance such as deaths, medical emergencies or actual or attempted suicides

That Police and Corrective Services should each establish procedures for the conduct of de-briefing sessions following incidents of importance such as deaths, medical emergencies or actual or attempted suicides so that the operation of procedures, the actions of those involved and the application of instructions to specific situations can be discussed and assessed with a view to reducing risks in the future.

RECOMMENDATION 130 – Establishment of protocols for the transfer between Police and Corrective Services of information about the physical and mental condition of an Aboriginal person which may create or increase the risks of death or injury to that person when in custody

That:

a. Protocols be established for the transfer between Police and Corrective Services of information about the physical or mental condition of an Aboriginal person which may create or increase the risks of death or injury to that person when in custody;

b. In developing such protocols, Police Services, Corrective Services and health authorities with Aboriginal Legal Services and Aboriginal Health Services should establish procedures for the transfer of such information and establish necessary safe-guards to protect the rights of privacy and confidentiality of individual prisoners to the extent compatible with adequate care; and

c. Such protocols should be subject to relevant ministerial approval.
RECOMMENDATION 140 – Installation of cell alarms in all cells

That as soon as practicable, all cells should be equipped with an alarm or intercom system which gives direct communication to custodians. This should be pursued as a matter of urgency at those police watch-houses where surveillance resources are limited.

RECOMMENDATION 145 – Implementation of cell visitor schemes in consultation with Aboriginal communities and their organizations

That:

a. In consultation with Aboriginal communities and their organizations, cell visitor schemes (or schemes serving similar purposes) should be introduced to service police watch-houses wherever practicable;

b. Where such cell visitor schemes do not presently exist and where there is a need or an expressed interest by Aboriginal persons in the creation of such a scheme, government should undertake negotiations with local Aboriginal groups and organizations towards the establishment of such a scheme. The involvement of the Aboriginal community should be sought in the management and operation of the schemes. Adequate training should be provided to persons participating in such schemes. Governments should ensure that cell visitor schemes receive appropriate funding;

c. Where police cell visitor schemes are established it should be made clear to police officers performing duties as custodians of those detained in police cells that the operation of the cell visitor scheme does not lessen, to any degree, the duty of care owed by them to detainees; and

d. Aboriginal participants in cell visitor schemes should be those nominated or approved by appropriate Aboriginal communities and/or organizations as well as by any other person whose approval is required by local practice.

RECOMMENDATION 150 – Prison health services equivalent to community standards and available 24 hours a day

That the health care available to persons in correctional institutions should be of an equivalent standard to that available to the general public. Services provided to inmates of correctional institutions should include medical, dental, mental health, drug and alcohol services provided either within the correctional institution or made available by ready access to community facilities and services. Health services provided within correctional institutions should be adequately resourced and be staffed by appropriately qualified and competent personnel. Such services should be both accessible and appropriate to Aboriginal prisoners. Correctional institutions should provide 24 hour access to medical practitioners and nursing staff who are either available on the premises, or on call.

RECOMMENDATION 152 – Review of prison health services

That Corrective Services in conjunction with Aboriginal Health Services and such other bodies as may be appropriate should review the provision of health services to Aboriginal prisoners in correctional institutions and have regard to, and report upon, the following matters together with other matters thought appropriate:

a. The standard of general and mental health care available to Aboriginal prisoners in each correctional institution;

b. The extent to which services provided are culturally appropriate for and are used by Aboriginal inmates. Particular attention should be given to drug and alcohol treatment, rehabilitative and preventative education and counselling programs for Aboriginal prisoners. Such programs should be provided, where possible, by Aboriginal people;

c. The involvement of Aboriginal Health Services in the provision of general and mental health care to Aboriginal prisoners;

d. The development of appropriate facilities for the behaviourally disturbed;

e. The exchange of relevant information between prison medical staff and external health and medical agencies, including Aboriginal Health Services, as to risk factors in the detention of any Aboriginal inmate, and as to the protection of the rights of privacy and confidentiality of such inmates so far as is consistent with their proper care;
Appendix 1 Recommendations of the Royal Commission into Aboriginal Deaths in Custody

f. The establishment of detailed guidelines governing the exchange of information between prison medical staff, corrections officers and corrections administrators with respect to the health and safety of prisoners. Such guidelines must recognize both the rights of prisoners to confidentiality and privacy and the responsibilities of corrections officers for the informed care of prisoners. Such guidelines must also be public and be available to prisoners; and
g. The development of protocols detailing the specific action to be taken by officers with respect to the care and management of:
   i. persons identified at the screening assessment on reception as being at risk or requiring any special consideration for whatever reason;
   ii. intoxicated or drug affected persons, or persons with drug or alcohol related conditions;
   iii. persons who are known to suffer from any serious illnesses or conditions such as epilepsy, diabetes or heart disease;
   iv. persons who have made any attempt to harm themselves or who exhibit, or are believed to have exhibited, a tendency to violent, irrational or potentially self-injurious behaviour;
   v. apparently angry, aggressive or disturbed persons;
   vi. persons suffering from mental illness;
   vii. other serious medical conditions;
   viii. persons on medication; and
   ix. such other persons or situations as agreed.

RECOMMENDATION 153 – Prison health services should be the subject of ongoing review

That:

   a. Prison Medical Services should be the subject of ongoing review in the light of experiences in all jurisdictions;
   b. The issue of confidentiality between prison medical staff and prisoners should be addressed by the relevant bodies, including prisoner groups; and
   c. Whatever administrative model for the delivery of prison medical services is adopted, it is essential that medical staff should be responsible to professional medical officers rather than to prison administrators.

RECOMMENDATION 154 – Availability of cross-cultural training for all prison health staff; employment of Aboriginal persons in delivery of health services

That:

   a. All staff of Prison Medical Services should receive training to ensure that they have an understanding and appreciation of those issues which relate to Aboriginal health, including Aboriginal history, culture and lifestyle so as to assist them in their dealings with Aboriginal people;
   b. Prison Medical Services consult with Aboriginal Health Services as to the information and training which would be appropriate for staff of Prison Medical Services in their dealings with Aboriginal people; and
   c. Those agencies responsible for the delivery of health services in correctional institutions should endeavour to employ Aboriginal persons in those services.

RECOMMENDATION 155 – Availability of training for prison officers in cross-cultural matters and in identification of persons at risk of self harm

That recruit and in-service training of prison officers should include information as to the general health status of Aboriginal people and be designed to alert such officers to the foreseeable risk of Aboriginal people in their care suffering from those illnesses and conditions endemic to the Aboriginal population. Officers should also be trained to better enable them to identify persons in distress or at risk of death or harm through illness, injury or self-harm. Such training should also include training in the specific action to be taken in relation to the matters which are to be the subject of protocols referred to in Recommendation 152 (g).
RECOMMENDATION 156 – Initial medical assessment on admission to prison

That upon initial reception at a prison all Aboriginal prisoners should be subject to a thorough medical assessment with a view to determining whether the prisoner is at risk of injury, illness or self-harm. Such assessment on initial reception should be provided, wherever possible, by a medical practitioner. Where this is not possible, it should be performed within 24 hours by a medical practitioner or trained nurse. Where such assessment is performed by a trained nurse rather than a medical practitioner then examination by a medical practitioner should be provided within 72 hours of reception or at such earlier time as is requested by the trained nurse who performed such earlier assessment, or by the prisoner. Where upon assessment by a medical practitioner, trained nurse or such other person as performs an assessment within 72 hours of prisoners’ reception it is believed that psychiatric assessment is required then the Prison Medical Service should ensure that the prisoner is examined by a psychiatrist at the earliest possible opportunity. In this case, the matters referred to in Recommendation 151 should be taken into account.

RECOMMENDATION 157 – Records of previous medical history to be obtained by prison health staff

That, as part of the assessment procedure outlined in Recommendation 156, efforts must be made by the Prison Medical Service to obtain a comprehensive medical history for the prisoner including medical records from a previous occasion of imprisonment, and where necessary, prior treatment records from hospitals and health services. In order to facilitate this process, procedures should be established to ensure that a prisoner’s medical history files accompany the prisoner on transfer to other institutions and upon re-admission and that negotiations are undertaken between prison medical, hospital and health services to establish guidelines for the transfer of such information.

RECOMMENDATION 158 – First priority on finding an apparently dead person

That, while recognizing the importance of preserving the scene of a death in custody for forensic examination, the first priority for officers finding a person, apparently dead, should be to attempt resuscitation and to seek medical assistance.

RECOMMENDATION 159 – Prisons and police watch-houses should have resuscitation equipment and trained staff

That all prisons and police watch-houses should have resuscitation equipment of the safest and most effective type readily available in the event of emergency and staff who are trained in the use of such equipment.

RECOMMENDATION 160 – Training in resuscitative measures

That:

a. All police and prison officers should receive basic training at recruit level in resuscitative measures, including mouth to mouth and cardiac massage, and should be trained to know when it is appropriate to attempt resuscitation; and

b. Annual refresher courses in first aid be provided to all prison officers, and to those police officers who routinely have the care of persons in custody.

RECOMMENDATION 163 – Training in restraint techniques

That police and prison officers should receive regular training in restraint techniques, including the application of restraint equipment. The Commission further recommends that the training of prison and police officers in the use of restraint techniques should be complemented with training which positively discourages the use of physical restraint methods except in circumstances where the use of force is unavoidable. Restraint aids should only be used as a last resort.
RECOMMENDATION 165 – Elimination and/or reduction of potentially dangerous items including hanging points

The Commission notes that prisons and police stations may contain equipment which is essential for the provision of services within the institution but which may also be capable, if misused, of causing harm or self-harm to a prisoner or detainee. The Commission notes that in one case death resulted from the inhalation of fumes from a fire extinguisher. Whilst recognizing the difficulties of eliminating all such items which may be potentially dangerous the Commission recommends that Police and Corrective Services authorities should carefully scrutinize equipment and facilities provided at institutions with a view to eliminating and/or reducing the potential for harm. Similarly, steps should be taken to screen hanging points in police and prison cells.

RECOMMENDATION 166 – Exchange of information

That machinery should be put in place for the exchange, between Police and Corrective Services authorities, of information relating to the care of prisoners.

The Prison Experience

RECOMMENDATION 168 – Placement and transfer of Aboriginal prisoners

That Corrective Services effect the placement and transfer of Aboriginal prisoners according to the principle that, where possible, an Aboriginal prisoner should be placed in an institution as close as possible to the place of residence of his or her family. Where an Aboriginal prisoner is subject to a transfer to an institution further away from his or her family the prisoner should be given the right to appeal that decision.

RECOMMENDATION 169 – Financial assistance to family for visiting purposes

That where it is found to be impossible to place a prisoner in the prison nearest to his or her family sympathetic consideration should be given to providing financial assistance to the family, to visit the prisoner from time to time.

RECOMMENDATION 170 – Facilities for visits

That all correctional institutions should have adequate facilities for the conduct of visits by friends and family. Such facilities should enable prisoners to enjoy visits in relative privacy and should provide facilities for children that enable relatively normal family interaction to occur. The intervention of correctional officers in the conduct of such visits should be minimal, although these visits should be subject to adequate security arrangements.

RECOMMENDATION 174 – Employment of Aboriginal welfare officers

That all Corrective Services authorities employ Aboriginal Welfare Officers to assist Aboriginal prisoners, not only with respect to any problems they might be experiencing inside the institution but also in respect of welfare matters extending outside the institution, and that such an officer be located at or frequently visit each institution with a significant Aboriginal population.

RECOMMENDATION 175 – Transition period for prisoners entering a custodial setting

That consideration be given to the principle involved in the submission made by the Western Australian Prison Officers’ Union that there be a short transition period in a custodial setting for prisoners prior to them entering prison routine.
RECOMMENDATION 176 – Establishment of a Complaints Officer

That consideration should be given to the establishment in respect of each prison within a State or Territory of a Complaints Officer whose function is:

a. To attend at the prison at regular (perhaps weekly) intervals or on special request for the purpose of receiving from any prisoner any complaint concerning any matter internal to the institution, which complaint shall be lodged in person by the complainant;
b. To take such action as the officer thinks appropriate in the circumstances;
c. To require any person to make enquiries and report to the officer;
d. To attempt to settle the complaint;
e. To reach a finding (if possible) on the substance of the complaint and to recommend what action if any, should be taken arising out of the complaint; and
f. To report to the complainant, the senior officer of the prison and the appointing Minister (see below) the terms of the complaint, the action taken and the findings made.

This person should be appointed by, be responsible to and report to the Ombudsman, Attorney-General or Minister for Justice. Complaints receivable by this person should include, without in any way limiting the scope of complaints, a complaint from an earlier complainant that he or she has suffered some disadvantage as a consequence of such earlier complaint.

RECOMMENDATION 177 – Implementation of cross-cultural education to Corrective Services officers

That appropriate screening procedures should be implemented to ensure that potential officers who will have contact with Aboriginal people in their duties are not recruited or retained by police and prison departments whilst holding racist views which cannot be eliminated by training or re-training programs. In addition Corrective Services authorities should ensure that all correctional officers receive cross-cultural education and an understanding of Aboriginal-non-Aboriginal relations in the past and the present. Where possible, that aspect of training should be conducted by Aboriginal people (including Aboriginal ex-prisoners). Such training should be aimed at enhancing the correctional officers’ skills in cross-cultural communication with and relating to Aboriginal prisoners.

RECOMMENDATION 178 – Recruitment of Aboriginal staff

That Corrective Services make efforts to recruit Aboriginal staff not only as correctional officers but to all employment classifications within Corrective Services.

RECOMMENDATION 179 – Simplification of procedures for making of requests by prisoners

That procedures whereby a prisoner appears before an officer for the purpose of making a request, or for the purpose of taking up any matter which can appropriately be taken up by the prisoner before that officer, should be made as simple as possible and that the necessary arrangements should be made as quickly as possible under the circumstances.

RECOMMENDATION 180 - Dealing with prisoners who are charged with offences

That where a prisoner is charged with an offence which will be dealt with by a Visiting Justice, that Justice should be a Magistrate. A charge involving the possibility of affecting the period of imprisonment should always be dealt with in this way. All charges of offences against the general law should be heard in public courts.
RECOMMENDATION 181 – Isolation or segregation of Aboriginal prisoners

That Corrective Services should recognize that it is undesirable in the highest degree that an Aboriginal prisoner should be placed in segregation or isolated detention. In any event, Corrective Services authorities should provide certain minimum standards for segregation including fresh air, lighting, daily exercise, adequate clothing and heating, adequate food, water and sanitation facilities and some access to visitors.

RECOMMENDATION 182 – Interaction with prisoners

That instructions should require that, at all times, correctional officers should interact with prisoners in a manner which is both humane and courteous. Corrective Services authorities should regard it as a serious breach of discipline for an officer to speak to a prisoner in a deliberately hurtful or provocative manner.

Training for Prisoners

RECOMMENDATION 183 – Establishment of Aboriginal support groups within institutions

That Corrective Services authorities should make a formal commitment to allow Aboriginal prisoners to establish and maintain Aboriginal support groups within institutions. Such Aboriginal prisoner support groups should be permitted to hold regular meetings in institutions, liaise with Aboriginal service organisations outside the institution and should receive a modest amount of administrative assistance for the production of group materials and services. Corrective service authorities should negotiate with such groups for the provision of educational and cultural services to Aboriginal prisoners and favourably consider the formal recognition of such bodies as capable of representing the interests and viewpoints of Aboriginal prisoners.

RECOMMENDATION 184 – Opportunity to perform meaningful work and education

That Corrective Services authorities ensure that all Aboriginal prisoners in all institutions have the opportunity to perform meaningful work and to undertake educational courses in self-development, skills acquisition, vocational education and training including education in Aboriginal history and culture. Where appropriate special consideration should be given to appropriate teaching methods and learning dispositions of Aboriginal prisoners.

RECOMMENDATION 185 – Development of a comprehensive national strategy for education and training of those in custody

That the Department of Education, Employment and Training be responsible for the development of a comprehensive national strategy designed to improve the opportunities for the education and training of those in custody. This should be done in co-operation with state Corrective Services authorities, adult education providers (including in particular independent Aboriginal-controlled providers) and State departments of employment and education. The aim of the strategy should be to extend the aims of the Aboriginal Education Policy and the Aboriginal Employment Development Policy to Aboriginal prisoners, and to develop suitable mechanisms for the delivery of education and training programs to prisoners.

RECOMMENDATION 186 – Prisoners should receive remuneration for work performed

That prisoners, including Aboriginal prisoners, should receive remuneration for work performed. In order to encourage Aboriginal prisoners to overcome the educational disadvantage, which most Aboriginal people presently suffer, Aboriginal prisoners who pursue education or training courses during the hours when other prisoners are involved in remunerated work should receive the same level of remuneration. (This recommendation is not intended to apply to study undertaken outside the normal hours of work of prisoners.)
RECOMMENDATION 187 – Involvement of Aboriginal communities and organisations in correctional processes

That experiences in and the results of community corrections rather than institutional custodial corrections should be closely studied by Corrective Services and that the greater involvement of communities and Aboriginal organisations in correctional processes be supported.

Conforming with International Obligations

RECOMMENDATION 328 – Maintenance of humane prison conditions

That as Commonwealth, State and Territory Governments have adopted Standard Guidelines for Corrections in Australia which express commitment to principles for the maintenance of humane prison conditions embodying respect for the human rights of prisoners, sufficient resources should be made available to translate those principles into practice.

RECOMMENDATION 329 – Legislation for Standard Guidelines

That the National Standards Body comprising Ministers responsible for corrections throughout Australia give consideration to the drafting and introduction of legislation embodying the Standard Guidelines and in drafting such legislation give consideration to prisoners’ rights contained in Division 4 of the Victorian Corrections Act 1986.
APPENDIX 2

SUMMARY OF RECOMMENDATIONS

CHAPTER 4

4.1 That the Ministry should instigate a research project that examines funding for health services in prisons in Australian and comparable overseas jurisdictions with a view to establishing a resourcing model that reflects best practice and provides a level of prison health services that are the equivalent of health services in prisons in other jurisdictions and in the wider community.

CHAPTER 5

5.1 That the Ministry:

(a) in the short term, formalise the current procedure for sending a prisoner’s medical records with him/her on transfer to another prison to ensure the minimum risk of a breakdown in communication between prison staff; and

(b) in the medium to long term, give a high priority to the introduction of a computerised system of storing medical records to ensure that they are accessible at all prisons to authorised personnel without delay.

5.2 That the Ministry:

(a) ensure that there is an efficient and effective system in place so that an appropriate record is made of every telephone consultation concerning the health care of a prisoner and that such record is placed on the prisoner’s medical file; and

(b) monitor regularly, by audit or other means, the quality of record-keeping by health services personnel and implement a strategy of action for any staff member not meeting the required standard.

5.3 That the Ministry make a greater effort to encourage the involvement of Aboriginal medical services, nursing staff and health workers at all prisons to assist in making prison health services more culturally appropriate and therefore more accessible to Aboriginal prisoners.

5.4 That the Ministry include regular health reviews of certain groups of high health risk prisoners, such as long term prisoners (perhaps over the age of 40) and those who have been identified as having chronic health problems, as a matter of routine in a formal health management plan for each prisoner.

5.5 That the Ministry examine the possibility of including an assessment by a medical practitioner at the initial reception of all new prisoners.

5.6 That the Ministry ensure that officers are provided with sufficient training and guidance to ensure the sensitive and proper use of their discretion in relation to the application of restraints to prisoners in hospitals.

5.7 That the Ministry ensure that a culture prevails within prisons that permits health services personnel to make decisions about the health care of prisoners which pay proper regard to non-health issues but which are, essentially, based only on an assessment of what is in the best medical/health interests of the prisoner.
5.8 That the Ministry constantly monitor the standard of prison diet and ensure that it meets the needs of those groups of prisoners for whom an appropriate diet is essential in the management of their health.

5.9 That the Ministry include in its future accommodation plans for the prison system the likely requirement to house and care for an increasing number of elderly and geriatric prisoners and provide appropriate resources and facilities.

5.10 That as a priority all prison staff be given initial or refresher first aid training, including the use of resuscitation techniques and equipment.

CHAPTER 6

6.1 That the Ministry:

(a) monitor the level of accommodation and service required by special needs groups of prisoners particularly those suffering the effects of substance abuse; those with a psychiatric disorder; and female prisoners (particularly those in regional prisons) and ensure that its future accommodation plans include adequate facilities for their placement and care;

(b) enhance its current health services for Aboriginal prisoners by:-

• initiating formal discussions with community health groups such as Derbarl Yerrigan Health Services and the Albany Health Promotion Unit with a view to encouraging and establishing their greater involvement in the provision of health services to Aboriginal prisoners; and

• providing adequate funding to enable the Ministry to take advantage of and co-ordinate any specialist services, advice and training that Derbarl Yerrigan and other Aboriginal health groups may be able to provide to prison staff.

(c) provide routine health reviews for long term prisoners as part of a structured and certain sentence plan which includes education, employment and rehabilitation programs.

6.2 That the Ministry consider the following strategies to address the shortage of nursing staff:

(a) promotion of prison nursing as a specialised field of expertise which should be accredited and taught as a unit in the tertiary nursing qualification;

(b) the greater involvement of trainee nurses in prison nursing to increase awareness of the range of skills required in this field of expertise and similar encouragement of medical students from teaching hospitals to increase community involvement and awareness;

(c) introduction of a structured career development program for staff by including training and the acquisition of additional qualifications in a continuing education model similar to that available in other professions; and

(d) given that the nursing community is small and shares experiences, commitment to improvement of its profile as a ‘good employer’ by addressing the concerns of its staff that they are under-valued, not appreciated and are more likely to be blamed than receive support.

6.3 That, as a matter of priority, the Ministry develop a strategy for the employment of all nursing staff under the ANF award as part of a strategy to encourage a cultural change and to enhance the independence of health services from operational staff.
6.4 While acknowledging that the Ministry has taken steps to significantly increase the level of training for health staff, that it review its current training programs for health staff in consultation with staff and HDWA in order to evaluate their relevance and adequacy; to identify any deficiencies and to formulate appropriate strategies to rectify those deficiencies.

6.5 That, for consistency with community initiatives and in the interests of improving the general health of prisoners and the occupational safety of prison staff, the Ministry develop, fund and implement a comprehensive range of health education and preventative programs utilising the expertise of appropriate community organisations and selected prison staff and prisoners.

6.6 That the Ministry:

(a) ensure that the health of prisoners receives, and is seen to receive, the same level of commitment as prison operations; and,
(b) take steps to improve the working conditions of health services staff and enhance their status within the system with the aim of emphasising their independence and raising the standard of health services generally.

6.7 That the Ministry monitor the capacity of its new information technology system to ensure that it is adequate to enable it to ascertain the effectiveness of its initiatives, programs and strategies and determine priorities for service modification and development.

6.8 That the Ministry raise the issue of the exclusion of prisoners from Medicare coverage with the JJ/HIDC with a view to it being referred to the appropriate State and Federal authorities for comprehensive review and investigation.

6.9 That the objectives and operation of the JJ/HIDC be reviewed in order to utilise the full potential of the joint expertise of such a body.

6.10 That the planning and delivery of prison health services should be the responsibility of a body entirely external to the Ministry - with independent funding - to ensure the treatment of prisoners as patients and that prison health services are equivalent to those available in the community. Until this change can be brought about the other recommendations in this Report concerning health services should be implemented.

**CHAPTER 7**

7.1 Where there are difficulties in ensuring compliance by some Aboriginal prisoners with Western medication regimes, prison health staff should be willing and able to involve appropriate community members with knowledge of traditional healing methods and/or who may be able to persuade prisoners to accept medication regimes.

7.2 That a DGR be introduced to ensure that non-issue of prescribed medication to, or non-consumption of prescribed medication by, a prisoner for any reason is recorded and drawn immediately to the attention of the senior nurse on duty at the time and of the prescribing medical practitioner.

7.3 That the Ministry as a matter of priority devise a means of providing prescribed medication to prisoners at the time which optimises the therapeutic effect of the medication and not at a time that best suits administrative convenience.
7.4 That the Ministry finalise its legal position in relation to the prescribing of Schedule 4 medication by telephone in a custodial setting and publish a policy to that effect.

7.5 That, with the objective of achieving equivalence with community standards, the Ministry monitor the efficacy and adequacy of its current pharmacy supply service to all prisons.

7.6 That the Ministry take steps to legalise the current supply of Schedule 4 drugs to Eastern Goldfields Regional Prison.

7.7 That, using the staff establishment estimated by the 1999 outsourcing study, the Ministry determine the appropriate staffing levels for the Pharmacy to enable the recommendations of the 1998 Review to be implemented and engage the necessary personnel for that purpose.

7.8 That:

(a) the Ministry should create a field of “specialisation” for prison officers accompanied by appropriate training to produce well-qualified prison officers with particular knowledge and skills in first aid and general health care to supplement prison health services;
(b) the Chief Pharmacist regularly review and evaluate the issue of medication by prison officers to establish whether the practice should continue.

7.9 That the Ministry continue to explore and develop a comprehensive range of properly resourced therapeutic management strategies using the expertise of organisations outside the prison system in addition to internal experience to provide alternatives to medication in managing prisoners with problems.

CHAPTER 8

8.1 That the Ministry formulate a single means of reporting incidents of self harm, attempted self harm and threats of self harm to facilitate the reliable collection of data and to enable comprehensive and regular research into the characteristics of the prisoners involved and the circumstances in which incidents occur.

CHAPTER 10

10.1 When recruiting prison officers sufficient weight must be given to their interpersonal and communication skills and their overall attitude towards prisoners and the prison environment in general.

10.2 That a system be devised that:

(a) encourages family members to telephone a prison to express concerns about the welfare of a prisoner; and
(b) ensures such information is recorded – either by an individual taking the call and recording the information or by having the calls tape recorded and monitored regularly.

10.3 That the Ministry:

(a) monitor the adequacy of the information in the new form used by CCA and the new handover procedure; and
(b) conduct an overall review of information-sharing procedures as recommended in RCIADIC Recommendation 166.
10.4 That the Ministry:

(a) endeavour to establish a network of elders from Aboriginal communities surrounding each prison to provide support and counselling; and
(b) enlist the help of established Aboriginal health service providers to enhance its provision of appropriate services to Aboriginal prisoners.

10.5 That the Ministry:

(a) take immediate steps to replace the light fittings in Hakea Prison with ‘safe cell’ fittings;
(b) progressively replace similar light fittings at other prisons;
(c) progressively remove frequently used hanging points in all prisons, not just the prison where its use as an anchor point has identified its potential as a hanging point; and
(d) constantly emphasise the importance of, and encourage, positive interaction between officers and prisoners.

10.6 That the Ministry review the availability and use of plastic bags across the prison system, particularly to those prisoners identified as at risk of self harm, and introduce a uniform approach on the issue.

10.7 That the Ministry:

(a) provide sufficient resources to enable the FCMT to provide both crisis care and to become involved in:-

- suicide prevention and harm minimisation strategies and educational and self-help programs;
- therapeutic counselling and support to prisoners with behavioural disorders; and

(b) in recognition of the acute self harm risk of long term prisoners, expedite the introduction of a specific management system for such prisoners to include regular reviews of their health and at risk status and a formalised progressive program of work, education and rehabilitation.

10.8 That the Director, Health Services reinforce the importance of an integrated medical record to all Health Services staff through periodic file audits to monitor the standard of record-keeping. Disciplinary action should be considered for repeated failure to maintain comprehensive records and to integrate them with other relevant records.

10.9 That the Ministry provide funding and resources to facilitate routine weekend coverage at the metropolitan prisons (ie Casuarina, the Hakea complex and Bandyup) by the FCMT and Prisoner Support Officers.

10.10 That the Ministry as a matter of priority provide separate facilities for female remand prisoners.

10.11 That the Ministry:

(a) evaluate doubling-up procedures to ensure the placement of at risk prisoners only with prisoners considered suitable and sufficiently skilled to be able to offer support; and
(b) ensure that the support prisoner is made aware of the nature and extent of the assessed risk presented by the prisoner he or she is meant to be assisting and consents to the doubling-up.
10.12 That the Ministry immediately discontinue use of medical observation cells as they are currently operated and establish alternative placement facilities for the separate placement of at risk prisoners at all prisons.

10.13 As far as possible, prisoners who are considered to present such a high level of risk of suicide that they require constant observation should be housed in cells which are as “normal” as possible but which permit observation by, and positive interaction with, selected officers.

CHAPTER 11

11.1 That the Ministry provide all health services staff with appropriate and ongoing training in the assessment of prisoners to establish any self harm or suicidal tendencies – both on admission to prison and during the term of imprisonment.

11.2 That the Ministry take all steps necessary to ensure that prison regimes are organised to permit sufficient time for the initial medical and risk assessment process to be completed properly.

11.3 That, recognising the importance of good prisoner/prison staff relations, the Ministry review its selection and recruitment process for all prison-based staff to ensure that sufficient priority is given to high level communication and interpersonal skills as basic requirements for all staff dealing with prisoners.

11.4 That the Ministry’s operational rules require that:

(a) the Director, Health Services and relevant health staff are consulted and involved in proposals and decisions relating to the health of prisoners and the management and placement of prisoners considered at risk; and that

(b) decisions made by qualified health professionals must not be over-ruled by unqualified prison staff.

11.5 That the Ministry provide the FCMT with sufficient resources to enable it to:

(a) become involved in harm minimisation and self-help educational programs for prisoners; and

(b) monitor and regularly review long term prisoners, those with severe behavioural disorders and/or suffering from the effects of substance abuse.

11.6 That the Ministry review the adequacy of its psychiatric services to prisoners and provide sufficient resources to cater for identified needs.

11.7 That the Ministry:

(a) encourage the Peer Support Group to make suggestions for improvements to the reception and orientation process for new prisoners;

(b) pay peer support prisoners a gratuity for performing the role;

(c) ensure that prison superintendents have regular meetings with the Peer Support Group and the Prisoner Support Officer and encourage their involvement in the planning of new initiatives aimed at improving prisoner welfare; and

(d) ensure that the prison superintendents, administrative staff and prison officers accept the concept of peer support as a serious and integral part of prisoner welfare.
Appendix 2 Summary of Recommendations

11.8 That the expertise of all relevant community support organisations be utilised and that the assistance of family members be sought wherever possible in the management of at risk prisoners. In particular, the Ministry should re-open discussions with The Samaritans to establish whether and how that organisation could become involved in prisoner welfare.

11.9 That:

(a) the recommendation of the Custodial Inspection Team in relation to the cost of calls from Albany Prison be extended to all prisoners who, because of their prison placement, are unable to call their family at local rates; and

(b) that the number of telephones be increased in line with rising muster levels to provide all prisoners with a reasonable opportunity to contact their families.

11.10 That the Ministry as a matter of priority provide therapeutically appropriate placement options for all categories of at risk prisoner including:

(a) rehousing the Intensive Sex Offenders Treatment Program to facilitate use of the vacated facilities within the Casuarina Infirmary as a detoxification centre for prisoners suffering the effects of substance abuse or to house psychiatrically disturbed prisoners;

(b) developing and providing alternative therapeutic facilities for at risk prisoners in need of ‘observation’ at all prisons; and

(c) discontinuing the confinement of at risk prisoners in medical observation cells as currently configured and operated at all prisons.

CHAPTER 12

12.1 That the Ministry allocate funds and resources to facilitate implementation of Recommendations 5 and 6 in the Report of the Drug Management Strategy Project as a matter of priority.

12.2 That in the interests of the welfare and better management of offenders entering prison in withdrawal or suffering from the effects of substance abuse the Ministry should:

(a) review the initial medical assessment form to ensure that it provides adequate data for the management of prisoners;

(b) provide health staff and other interested staff with the opportunity for specialised training in substance abuse problems; and

(c) ensure that medical and nursing staff gain access to newly-admitted prisoners early enough to complete all assessments without pressure from operational considerations.

12.3 That the Ministry take steps to produce reliable statistical data on the prevalence of drug use in the interests of the welfare of prisoners, the safety of staff and the efficient planning of its future prison requirements and management strategies.

12.4 That the Ministry reconsider its decision not to expand its methadone program and conduct a trial program for the purposes of assessing its effectiveness in Western Australian prisons.

12.5 That in recognition of the extent and seriousness of the problem of drugs in prisons the Ministry provide adequately funded and resourced substance use treatment programs for all affected prisoners from the beginning of their sentence.
12.6 That the Ministry provide funding for the provision of discrete detoxification areas in all major reception prisons, particularly within the proposed refurbishment of Bandyup Women's Prison.

12.7 That:

(a) the FCMT be provided with sufficient resources to enable it to routinely monitor prisoners suffering the effects of drug abuse and provide the counselling considered essential to the success of any intervention; and

(b) the opportunity for training in this specialist field be made available to health staff and other interested prison staff.

CHAPTER 13

13.1 That the Ministry:

(a) acknowledge the importance of constructive activity in the prevention of suicide and self-harm and in the rehabilitation of prisoners and ensure that all prisoners are provided with adequate opportunities for education, training, employment and treatment programs throughout their sentences at all prisons;

(b) take steps to remove the disincentives to participation in education identified by the Taskforce and in the course of my inquiry;

(c) provide funding, resources, trained staff and facilities to increase the opportunities for education (in its broadest sense), training, employment and rehabilitation throughout the sentence at all prisons; and

(d) obtain legal advice as to whether the *State Trading Concerns Act 1916* or any other legislation prevents the Ministry from offering particular forms of gainful employment to prisoners, and consider seeking amendment if it is found that there are legislative restrictions.

13.2 That, in line with United Nations *Standard Minimum Rule 77(1)*, in the interests of the mental and physical wellbeing of prisoners and as a means of creating better prisoner/officer relations, the Ministry:

(a) employ a full time Recreation Officer/Sports Coordinator at each prison;

(b) ensure that each prison provides adequately resourced and appropriately staffed recreational and exercise opportunities for all prisoners; and

(c) encourage prison officers (by internal recognition and additional remuneration) to take responsibility for particular recreational activities for which they have appropriate qualifications and/or aptitude.

13.3 That in recognition of the acknowledged therapeutic benefits of music and art for all prisoners, and particularly Aboriginal prisoners, the Ministry:

(a) ensure that adequate resources and facilities are available at all prisons for these activities; and

(b) accord art, music and cultural activities program status.

13.4 That the Ministry ensure that sufficient resources and funding are provided to enable prisoners to participate and complete treatment programs prescribed identified in the assessment process on admission to prison or by the Parole Board prior to their release date.

13.5 That the Ministry provide rehabilitation programs at an early stage in and throughout the sentence with refresher courses at the end.
Appendix 2  Summary of Recommendations

13.6 That the Ministry ensure that participation in culturally appropriate basic literacy and numeracy courses is encouraged in a sensitive way at all prisons.

13.7 That the Ministry provide appropriate cultural programs for Aboriginal prisoners at all prisons, involving local community and tribal elders, on the lines of those available elsewhere in Australia and New Zealand.

13.8 That the Ministry address the current inequality of education, training and employment opportunities for female prisoners throughout the State by providing a wider range of programs designed specifically to cater for their needs and ensuring that they are adequately staffed and funded.

13.9 That the Ministry take steps to review program provision for remand prisoners at Bandyup and at regional prisons and ensure that they have access to a range of education, meaningful employment and rehabilitation opportunities.

13.10 That the Ministry develop appropriate programs to assist ‘difficult’ prisoners address their behavioural problems as alternatives to progressively more severe disciplinary measures.

13.11 That the Ministry subject all of its programs to ongoing monitoring and evaluation as part of an assessment of efficiency and effectiveness to ensure that they meet prisoner and community needs.

CHAPTER 14

14.1 (a) That the Ministry of Justice respond to the Parole Board’s request for additional resources as soon as possible. In particular, the Parole Board should be resourced so that it can provide detailed reasons for its decisions to prisoners; and
(b) that with a view to maximising the effectiveness of the Ministry’s assessment process for prisoners, the Board and the Ministry review:-

• how the Board’s expectations about what prisoners should be required to do during a sentence can be better understood by the Ministry; and
• the nature and extent of programs to be offered by the Ministry and the timing of their delivery.

14.2 That the Ministry and the Parole Board review the procedures by which Board decisions and other correspondence from the Board are conveyed to prison staff and to prisoners to ensure that:

(a) prison personnel are aware that the prisoner is to receive a decision or correspondence from the Board;
(b) a prison officer personally delivers the correspondence or oral advice to the prisoner, thereby having the opportunity to observe the impact of the advice on the prisoner; and
(c) the records of both the Board and the prison document whether information about decisions or other correspondence has been conveyed to and received by, the prison and the prisoner in every case.

14.3 That the Ministry and the Parole Board institute a review of available data, current assessment procedures and eligibility criteria to determine whether female Aboriginal prisoners and Aboriginal prisoners generally are, or are likely to be, disadvantaged in relation to parole and work release orders respectively. Action to rectify any imbalance found should be taken, including the reconsideration of any legislated eligibility criteria.
14.4 That the Ministry:

(a) review the procedures followed in all Western Australian prisons to determine the level of knowledge officers have of the requirements of the Bail Act and the working arrangements between prison officers, police and Justices of the Peace;
(b) ensure that the requirements of the Bail Act are being complied with, in practice, in all prisons; and
(c) complete the review of the Bail Act as quickly as possible.

14.5 That the Ministry reconsider its response to RCIADIC Recommendation 23 and accept an obligation to make funds available - to the families of deceased prisoners directly or to legal aid organisations - to enable legal representation at inquests in all cases.

CHAPTER 15

15.1 That the Ministry reconsider its position regarding RCIADIC Recommendation 329 and consider incorporating a statement of prisoner rights into the Prisons Act.

15.2 That as part of its current internal review of prison deaths the Ministry commission an independent comparative study of the management of Albany Regional Prison and other prisons in order to identify any practices or other factors which should be more widely applied in the prison system.

15.3 That the Ministry complete its review of the independent report on prison disciplinary procedures as a matter of urgency and implement its recommendations. If implementation is delayed by a need to amend the Prisons Act or other legislation then RCIADC Recommendation 180 should be implemented in the meantime by continuing the role of magistrates or experienced legal practitioners as visiting justices at all prisons.

15.4 That the Ministry:

(a) finalise and implement the proposed grievance resolution process as quickly as possible; and
(b) ensure that prison officers and all those persons expected to be involved in resolving grievances are adequately trained in the aims and principles of the system and the skills needed to objectively evaluate and resolve grievances.

15.5 That the Ministry:

(a) ensure that the new DGR relating to prisoner transfers is strictly complied with by prison staff; and
(b) implement a uniform procedure whereby all prison officers and prison management are made aware of the contents and requirements of all amendments to DGRs, Standing Orders and other instructions.

15.6 That the Ministry contract appropriate welfare organisations to operate visitor centres at all prisons.
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