



OFFICE OF THE INSPECTOR
OF CUSTODIAL SERVICES

OCTOBER 2014

REPORT OF AN ANNOUNCED INSPECTION
OF BANDYUP WOMEN'S PRISON

93

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that contributes to a more
accountable public sector.*

**Report of an Announced Inspection
of Bandyup Women's Prison**

Office of the Inspector of Custodial Services
Level 5, Albert Facey House,
469 Wellington Street,
Perth WA 6000

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The Inspector's Overview

BANDYUP: THE HARDEST AND MOST NEGLECTED PRISON IN THE STATE

2008–2011: NEGLECT OF BANDYUP AND NEGLECT OF WOMEN

This is the report of an inspection of Bandyup Women's Prison ('Bandyup'), the state's primary and pivotal prison for women. I recently characterised women's imprisonment in Western Australia as being in crisis and Bandyup as bearing the brunt of that crisis.ⁱ In essence, the story over recent years has been one of massive investment in male prisons and minimal investment in female prisons. This is despite the fact that women form close to 10 per cent of the prisoner population; that the number of women in prison has been growing rapidly and at twice the rate of males;ⁱⁱ that Bandyup was already facing issues in 2008;ⁱⁱⁱ and that official policy documents have proclaimed that female offenders need to be afforded greater, and targeted, priority.

Since 2009 I have been consistently urging increased investment in women's prisons and our 2011 report on Bandyup was bleak and pessimistic.^{iv} That pessimism proved well-founded. The report called for urgent action and investment in relation to strategic direction, funding, health/mental health services and a range of other matters. The Department of Corrective Services ('the Department') did formally accept most of the report's recommendations, but there was little sense of urgency, forward planning or lateral thinking. Many of its responses were non-committal, and some were out of touch or factually wrong. As this report shows, Bandyup has paid a price for this over the following three years.

PUBLIC ADMINISTRATION COMMITTEE

The Legislative Council Public Administration Committee was so concerned by our 2011 findings that in March 2012 it visited Bandyup to check for itself. This is exactly as it should be: the Inspector reports to Parliament, and proactive Parliamentary engagement enhances accountability on the part of this Office as well as the Department.

The Committee was clearly troubled by the conditions it observed and, in August 2012, summonsed the then Commissioner for Corrective Services and other executives to give evidence.^v The Committee's questioning and its follow-up report left no doubt as to its concerns about the problems at Bandyup and the inadequacy of past and forward planning.^{vi}

i Office of the Inspector of Custodial Services (OICS), *Female Prisons in Western Australia and the Greenough Women's Precinct*, Report No. 91 (July 2014).

ii Between March 2009 and March 2014, female prisoner numbers in Western Australia grew by 50 per cent and male numbers by 25 per cent.

iii OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 57 (January 2009).

iv OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 73 (August 2011).

v The Committee considered it necessary to issue a summons because the Department failed to provide information it had requested following its visit: see <[http://www.parliament.wa.gov.au/Parliament/commit.nsf/\(Report+Lookup+by+Com+ID\)/A94FF05327EE03D748257AAE000B55AF/\\$file/pc.ann.121106.rpf.015.xx.pdf](http://www.parliament.wa.gov.au/Parliament/commit.nsf/(Report+Lookup+by+Com+ID)/A94FF05327EE03D748257AAE000B55AF/$file/pc.ann.121106.rpf.015.xx.pdf)>

vi For the report, see: <[http://www.parliament.wa.gov.au/Parliament/commit.nsf/\(Report+Lookup+by+Com+ID\)/A94FF05327EE03D748257AAE000B55AF/\\$file/pc.ann.121106.rpf.015.xx.pdf](http://www.parliament.wa.gov.au/Parliament/commit.nsf/(Report+Lookup+by+Com+ID)/A94FF05327EE03D748257AAE000B55AF/$file/pc.ann.121106.rpf.015.xx.pdf)>, 33–38. For the transcript of evidence, see: <[http://www.parliament.wa.gov.au/Parliament/commit.nsf/\(ProceedingsOnly\)/33A4A6E22661AFF748257A7F001387F9?opendocument](http://www.parliament.wa.gov.au/Parliament/commit.nsf/(ProceedingsOnly)/33A4A6E22661AFF748257A7F001387F9?opendocument)>

2013–2014: GREATER SENSE OF URGENCY BUT ACTION STILL NEEDED

Fortunately, the Minister for Corrective Services and the Commissioner are now affording high priority to addressing the issue of women's imprisonment. Relatively early in his time as Minister, Hon Joe Francis MLA visited Bandyup. He recently delivered a candid assessment of this visit and his concern and commitment to change are clear:

I was pretty appalled at the state of much of the facility. Some of it's very new but some of it's very old and dilapidated, and I don't think that's the right way to treat women.^{vii}

However, action to provide new facilities for women is still some way off and the decision to send more women to Greenough Regional Prison from early 2013 was never going to meet predictable demand.^{viii} There are no immediate plans for any new prisons for women (or men) so the Minister has directed the Department to review all its existing facilities and assets and to determine their optimal use, including turning parts of the male system over to women.

The Commissioner, Mr James McMahon, now faces an unenviable challenge. His options are limited, none are straightforward, and if units at Hakea Prison are to be used, as has been suggested, this will require time for planning, preparation of business cases, funding approvals and action.

In summary, everyone agrees that something needs to be done and there are some possible options, though none is ideal. However, the issue was left unaddressed for too long and time is not on the Department's side. Bandyup was extremely stressed and crowded at the time of this inspection (March 2014) and has since become even more crowded. Over recent years it has had the highest rate of assaults by prisoners on staff of any prison,^{ix} and has been performing below expectations in terms of reducing the risk of prisoners re-offending after release.^x

I am pleased to report that in addition to scoping future options, the Department has taken concrete action in two main areas after the inspection. First, in line with suggestions we made, it has added additional capacity for women at other prisons by re-opening the women's unit at Roebourne Regional Prison^{xi} and has also placed more women at the Boronia Pre-release Centre. Secondly, it has started work to improve some of the facilities and conditions at Bandyup (see below). However, the key points remain: Bandyup is even more crowded now than it was in March and it is not acceptable to have so many women there, and it is not appropriate to crowd other prisons to compensate for Bandyup's deficiencies. Additional, appropriate, prison space must be developed and this must be done soon.

vii Interview with Minister Francis, 6PR Morning Show 9 October 2014 (interviewer, Gary Adshead).
viii OICS, *Female Prisons in Western Australia and the Greenough Women's Precinct*, Report No. 91 (July 2014).
ix OICS, *Assaults on Staff in Western Australian Prisons* (September 2014).
x OICS, *Recidivism Rates and the Impact of Treatment Programs* (October 2014).
xi The Department initially rejected our recommendation: see OICS, *Report of an Announced Inspection of Roebourne Regional Prison*, Report No. 89 (February 2014).

BANDYUP 2014

In 2011, the contrast between the poverty of Bandyup's conditions and the level of new investment at six male metropolitan prisons (Casuarina, Hakea, Acacia, Wandoo, Wooroloo and Karnet) was unacceptable. It is even more so now. The issues Bandyup faces include the following:

The Most Overcrowded Prison

Bandyup has an 'operational capacity' of 259 (a term which includes bunk beds installed in cells that were never intended for two people). In my view, given the prison's size and services, a decent population level, and one that would allow improved interventions to reduce recidivism, would be 200–230.

Recently, numbers reached 312 and they are consistently at or over 300. No other prison is this overcrowded. Women who do not have a bed must sleep on mattresses on the floor, often with their heads adjacent to a toilet. The situation is unhygienic, lacking in privacy and totally unacceptable. It does not happen in male prisons.

The Most Complex Prisoner Profile

Men's prisons are based on the premise of separating functions and a degree of specialisation. Thus, for male prisoners, there are a range of maximum-, medium- and minimum-security prisons and also a prison dedicated to remand and assessment. Bandyup, by contrast, must house sentenced and remand women of every security classification, including some mothers with young babies.

Only 10 per cent of Bandyup's population is maximum-security and yet it must function as a maximum-security prison. This leaves minimum-security women seriously disadvantaged. It has also been poorly equipped to perform the remand function: its resources and facilities are poor and lawyers universally say that contact with clients has been compromised and compares poorly with metropolitan male prisons.

Complexity also has another dimension. It is universally acknowledged that women prisoners have higher needs than men: as women, as mothers, as health/mental health 'consumers', and in other ways. Using these measures, the complexity of Bandyup's 'average prisoner' has increased over recent years because generally speaking, only settled sentenced women who do not have significant mental health issues can access prisons such as Boronia, Greenough and West Kimberley. This means that every woman with behavioural or mental health issues must be held in Bandyup's stressed and stressful environment. This has exacerbated Bandyup's problems but has not been reflected in additional resources or investment.

A Crowded, Disorganised and Run-down Site

Bandyup's organisation and layout are complicated and irrational. This is partly the result of additions over the years, some of which are excellent, but some of which have been ad hoc and poorly planned. The prison reflects not only different architectural eras but different philosophies of custodial management and there are confronting contrasts,

with some impressive modern additions (such as the gatehouse and Unit 5) alongside decrepit and out-dated buildings. There is also a visible racial divide, with the ‘best’ parts of the prison dominated by non-Aboriginal women and the more decrepit parts dominated by Aboriginal women.

The layout of the prison, combined with the supervision arrangements and movement controls in place at the time, had generated some chaotic movement patterns, a noisy confrontational environment, and some unsafe interactions. These required more proactive monitoring than was occurring. Fortunately, local management accepted our criticisms and is examining ways to address the issue.

Compared with male prisons, most of Bandyup lacks space. Unlike the male prisons, there is no oval and too many people are compressed into too small a space. The gardens are generally well-maintained but it was unforgivable that some potential spaces (such as an area previously used as a tennis court and the small walking track) were either out of bounds or run down and barely used.

Inadequate Health and Mental Health Services

Generally speaking, Bandyup staff do what they can with what they have to provide services to prisoners, and we were impressed with what some areas (such as education) were achieving within limited space and stretched resources. However, most areas are under too much pressure. The most obvious example is health and mental health services.

The Health Centre at Bandyup is too small and this presents both health and safety concerns. General health services are over-stretched and mental health services are wholly inadequate to meet demand. Bandyup houses a large and increasing number of women with serious mental health needs and whilst the level of psychiatric services into the prison has increased since 2011 it falls far short of what is required. In many parts of Bandyup, the levels of mental illness or impairment are palpable and distressing. It is no surprise that it has a high level of assaults and other serious incidents, a large proportion of which are linked to mental health issues.

This is, of course, an issue that needs action beyond corrective services. The state suffers from a paucity of secure forensic mental health beds in a hospital setting and prisons become the default placement – something they are not designed or equipped to do. Staff often do a very good job in difficult circumstances, but they are not recruited as mental health experts and feel inadequately trained.

Visits and Visitors

As in 2011, one of the most telling shortfalls at Bandyup relates to visits. Despite paper commitments to recognising women as mothers and primary caregivers, both the external Outcare facility (which social visitors attend on arrival) and the main internal visits area are the worst of any prison in the state and unfit for purpose. This has been accepted for years but never addressed, even though large amounts have been invested to upgrade visits centres at male prisons.^{xii}

xii See: [6.43]–[6.54]; and OICS, *Report of an Announced Inspection of Bandyup Women’s Prison*, Report No. 73 (August 2011) Chapter 6.

The official visits area, used by lawyers and others, is too small and unfit for purpose. Many service providers also complained that Bandyup compared poorly with other prisons in terms of customer service, attitudes to visitors, and facilitating contact.

Management and Staff

During 2012 and much of 2013, management/staff/union relations reached a new low at Bandyup. To some extent this was inevitable because neglected workplaces tend to generate pressures and breed conflict. I have no intention of raking over these events but it is most unfortunate that issues and relationships deteriorated to the extent that the WA Prison Officers Union considered it necessary to mount a postcard campaign alleging bullying by management. The long-serving Superintendent left shortly afterwards in undignified circumstances. In my view, head office should have provided stronger, documented central support to the prison (through both its HR and operational divisions) during this difficult time.

By March 2014, staff/management relations had become less fractious but the Acting Superintendent still faced significant ongoing challenges. The management team as a whole had been affected by events and the general staff culture had declined since 2011. As I have said earlier, a large number of staff have stayed engaged and have continued to do their best in trying circumstances. However, we encountered too many examples of negative staff attitudes: negative towards the job, negative towards the women who are prisoners at Bandyup, and negative to colleagues and management. Clearly this needs to be addressed.

DEVELOPMENTS SINCE MARCH 2014

Every inspection concludes with an 'exit debrief' in which we outline our key findings to staff, local management and head office personnel. Copies of the exit debrief are also sent to the Minister and to the Public Administration Committee. This is an extremely important stage in the inspection process because it allows all parties to be informed and the Department to start to address issues immediately rather than awaiting our report. In addition, we undertake regular inspection/liaison visits to all prisons, and this allows us to get a sense of progress.

Since the exit debrief, there have been some practical and intelligent improvements at Bandyup. These do not in any way solve the systemic problems of women's imprisonment or Bandyup's bigger problems, and progress has not been swift. However, they do stand in contrast to the inertia and passivity of earlier years and reflect positively on local management and head office.

These developments include the following:

- In order to eliminate women sleeping on mattresses on the floor, a number of bunk beds have been installed and approval has been given for more. Also, in a number of cells, trundle beds are being used. However, trundle beds are not an acceptable solution, and still leave heads next to toilets. In any event, at the time of writing, more than 30 women are still sleeping on mattresses on the floor.

- Local management has been actively working with head office to develop plans to improve amenities and services in Unit 1 A-wing, which houses a large number of women with mental health issues. However, approval is still pending for some of the improvements.
- The ablution blocks in Unit 1 have been repainted and repaired.
- The small walking track, which was in an appalling condition in March, has been resurfaced
- The tennis court area and the areas around the running track will be repaired and made multi-functional.
- There have been initiatives to reduce tension and bullying between prisoners during recreation times.
- Case management, which had fallen well behind on its work, is now back on track.
- An old archives room has been cleared and will be converted to a new official visits and Skype facility.
- Water fountains and additional phones are being installed in some units.
- Management is promoting mechanisms to improve communication and engagement between staff and prisoners.

CONCLUSION

The small and generally inexpensive changes made post-inspection have had a positive effect but they do not change the fundamental issue: women's imprisonment is in crisis and Bandyup is the most complex and most neglected prison in the state.

But prison performance can move up and down and Bandyup is testimony to this. In the early 2000's, it was not functioning well.^{xiii} Over the next few years, a combination of a strong strategic focus, political and corporate drive, and a supporting organisational structure led to tangible improvements, but by 2008 momentum was slowing.^{xiv} By 2011 Bandyup was in serious difficulty. The prison, staff and prisoners were expected to tolerate conditions, service deficits and resourcing limitations that would generally not be tolerated at men's prisons and were having to 'make do' compared with their male counterparts.^{xv}

Bandyup has continued to pay a high price for the neglect and indifference. While there is no suggestion that the sidelining of women's needs has been intentional, the effect of policies and priorities has been for women to be disadvantaged. In 2014 structural inequality is even more marked than in 2011.

xiii OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 13 (June 2002).

xiv OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 36 (June 2006);
OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 57 (January 2009).

xv OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 73 (August 2011) vi.

The Department no longer has a high level position dedicated to driving improvement in the treatment of female offenders. However, if it can now truly sharpen its focus on women, and develop additional appropriate accommodation that meets women's specific needs, it should be able to revitalise Bandyup. That is something that can, and must, be done, and I look forward to tracking progress.

Our next inspection will be in March 2017, earlier if necessary.

Neil Morgan

14 October 2014

Fact Page

NAME OF FACILITY

Bandyup Women's Prison

ROLE OF FACILITY

Bandyup is the only female prison in Western Australia that caters for all security classifications. Bandyup acts as a receipt, remand, assessment, and sentenced prisoner facility.

LOCATION

22 kilometres north-east of Perth.

The traditional owners of the land are the Noongar people.

BRIEF HISTORY

Bandyup opened in 1970. The facility is owned by the Department of Corrective Services.

LAST INSPECTION

27 March – 1 April 2011

ORIGINAL DESIGN CAPACITY OF PRISON

68

OPERATIONAL CAPACITY OF PRISON

259

NUMBER OF PRISONERS HELD AT TIME OF INSPECTION

293^{xvi}

RESIDENTIAL UNITS

Unit	Description	Design Capacity	Confirmed Count at 24 March 2014 ^{xvii}
1	Standard supervision	63	87
2	Standard supervision	64	88
3	Management and crisis care	16	6
4	J Block – orientation	38	26
	K Block – self-care (shared cells)		
	L Block – self-care (single cells)		
5	'The Village' self-care cottages	56	53
6	Minimum-security/Standard supervision	32	26
7	Minimum-security/Earned supervision	8	5

xvi Total Offender Management System (TOMS), *Bandyup Women's Prison: Count Facility – Historical, as at 23/04/2014 23:59* (accessed 19 September 2014).

xvii TOMS, *Bandyup Women's Prison: Count History – Unit, 24/03/2014 to 24/03/2014* (accessed 19 September 2014).

Chapter 1

BANDYUP WOMEN'S PRISON: WESTERN AUSTRALIA'S HARDEST PRISON?

- 1.1 Bandyup Women's Prison ('Bandyup') was opened in January 1970, and is located 22 kilometres north-east of Perth in the Swan Valley. It acts as a receipt, remand, assessment, and sentenced prisoner facility. Bandyup is the only maximum-security prison for women in the state, and therefore accommodates all regional female prisoners who are assessed as maximum-security. However, while it must run as a maximum-security prison, it holds far more medium and even minimum-security prisoners.
- 1.2 Bandyup has a high proportion of Aboriginal prisoners. During the inspection, Aboriginal women made up 45 per cent of Bandyup's population.¹ This is the highest proportion of Aboriginal prisoners in any metropolitan prison, and is only exceeded by the regional prisons of Eastern Goldfields, Greenough, Roebourne, and West Kimberley.
- 1.3 The prison has an 'operational capacity' of 259.² However, when Bandyup was inspected in March 2014, its population was as high as 295.³ Bandyup has been experiencing high levels of overcrowding for some years, yet despite piecemeal attempts to rectify the shortage of beds with leftovers from the male estate,⁴ and the addition of second beds into cells designed for one,⁵ female prisoners are still in the undignified position of having to sleep on mattresses on the floor of cells designed for a single occupant.
- 1.4 The governing legislation of the Office of the Inspector of Custodial Services ('the Office') requires that all prisons and places of custody are inspected at least once every three years.⁶ In 2014, Bandyup was inspected by this Office for the fifth time.⁷

BACKGROUND

- 1.5 This Office's first inspection of Bandyup took place in 2002.⁸ While the report was critical of the prison itself, the greater issue it identified was a lack of planning and philosophical direction for female prisoners across the state. The report helped to pioneer a more strategic focus on the needs of women prisoners by the (then) Department of Justice and the government.⁹

1 *Total Offender Management System (TOMS) Data Extraction*, 6 March 2013.

2 <<https://www.correctiveservices.wa.gov.au/prisons/prison-locations/bandyup.aspx>>

3 *TOMS Data Extraction*, 24 March 2014.

4 See: [1.19], [3.27]–[3.28].

5 Additional beds have been placed into the houses in Unit 5 and part of Unit 4.

6 *Inspector of Custodial Services Act 2003* (WA) s 19.

7 Office of the Inspector of Custodial Services (OICS), *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 13 (June 2002); OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 36 (June 2006); OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 57 (December 2008); OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 73 (August 2011).

8 OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 13 (June 2002).

9 In 2002, the then Minister Hon. Jim McGinty MLA reported to Parliament on the results of a study trip to examine women's imprisonment in other countries (*Report on a visit to Canada, Minnesota and England by Attorney General, Jim McGinty, MLA, Minister for Justice and Legal Affairs 11–20 August 2001*, Perth, 2001). In early 2003, the former Inspector provided a briefing paper for the then Minister outlining the measures he thought should be taken to reform women's imprisonment.

- 1.6 In 2003, the Department of Justice established the Director of Women's Corrective Services position. This senior executive role ensured that women's issues had a designated voice at key decision making levels, and provided a bridge between head office and the prisons. In the period from 2003 to 2008, a women-centred approach to the custodial management of female prisoners developed, with high-level policies to support it. The role of the Director of Women's Corrective Services was pivotal to these developments.
- 1.7 The combination of a clear strategic focus, political and corporate drive and a supporting organisational structure saw tangible improvements. Bandyup implemented a stronger women-centred approach and the benefits of this were clear.¹⁰ In 2004, Boronia Pre-release Centre for Women opened, and approval was granted for the addition of new 'cottage-style' self-care accommodation at Bandyup.¹¹
- 1.8 The 2008 inspection of Bandyup found improvements in some areas but warned that that momentum was slowing. During 2009 and 2010, the Office raised the issue of investment in women's prisons on multiple occasions with the Department of Corrective Services ('the Department') and government. In 2010 however, the Department decided to abolish the critical Director of Women's Corrective Services position.
- 1.9 The 2011 inspection therefore sought to identify the extent to which strategic direction had been maintained and progress made. It found that while there were some encouraging findings, progress had stalled in many key areas. The Department's 'eye had been taken off the ball' in terms of meeting the needs of women and in particular, Aboriginal women, as well as the implementation of key policies relating to services for female prisoners.
- 1.10 The 2011 report concluded that planning and investment for Bandyup and the broader women's estate were urgently required, and that a failure to do so could result in past achievements being even further eroded. The report contained many more recommendations (33) than previous Bandyup reports for two main reasons. Firstly, due to the complexity of the prison and its population's needs, and secondly, because of the significant slippage in terms of the prison's strategic direction and performance.
- 1.11 Unfortunately, the Department's responses to the 2011 report simply elevated the Office's concerns. Recommendations had been made across a range of areas, particularly in relation to strategic focus, funding, and health/mental health services. Some of the Department's responses to the report were factually wrong, some were out of touch, and there seemed to be little sense of urgency.¹² The Inspector subsequently described the situation as a 'passive acceptance of the unacceptable'.¹³

10 OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 36 (June 2006).

11 This culminated in 'the Village' (Unit 5) being opened in 2009.

12 See OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 73 (August 2011), Inspector's Overview and Appendix 1.

13 Morgan, N, *Bandyup Women's Prison 2014 Exit Debrief* (24 March 2014).

THE GREATER WOMEN'S ESTATE: THE GREENOUGH WOMEN'S PRECINCT

- 1.12 In July 2012 Bandyup's population passed the 300 mark for the first time, resulting in high numbers of women sleeping on mattresses on the floor. The Department's *Female Prisoners Plan 2012–2022* states that the preferred level of prison utilisation falls between 85 and 95 per cent.¹⁴ Around this time however, Bandyup's capacity was over 161 per cent.¹⁵
- 1.13 In response to rising numbers of female prisoners and the increasingly intolerable conditions at Bandyup, in 2012 the Department opted to increase the female population at Greenough Regional Prison ('Greenough').
- 1.14 Greenough had previously housed female prisoners in Unit 5, a claustrophobic, confined, and run down area in an otherwise male prison.¹⁶ In late 2012 however, Unit 4 (a men's unit) was reallocated to the female prisoners, increasing the prison's female capacity from 25 to 69 (a net increase of 44 beds for female prisoners statewide). This enabled the creation of a 'women's precinct' – a stand-alone unit with expansive grounds, and an industrial area for the provision of programs, education and health services. Additional women were transferred in from other prisons,¹⁷ particularly Bandyup and Roebourne Regional Prison,¹⁸ from late January 2013.
- 1.15 In 2013 this Office conducted a review of services for women prisoners at Greenough and a thematic overview of the state of women's imprisonment. This culminated in the release of *Female Prisons in Western Australia and the Greenough Women's Precinct*.¹⁹ The broad conclusion of this report was that Greenough now offers an improved environment, culture and services to its female prisoners, and is a credit to prison management and staff. Ultimately however, it is a Band-Aid in the wrong place: it is too small to meet the ever growing numbers of female prisoners, too far from home for the prisoners who end up there, and simply put the wrong choice for further expansion of the female estate.

14 DCS, *Female Prisoners Plan 2012–2022* (2013) 11.

15 Ibid. The Department describes Bandyup as having an operational capacity of 259. <<http://www.correctiveservices.wa.gov.au/prisons/prison-locations/bandyup.aspx>> (Last updated 31 October 2013). However during the 2014 Bandyup inspection, the prison's population peaked at 292. By the time it took to prepare this report the population had been as high as 305.

16 OICS, *Report of an Announced Inspection of Greenough Regional Prison*, Report No. 21 (May 2003); OICS, *Report of an Announced Inspection of Greenough Regional Prison*, Report No. 44 (May 2007); OICS, *Report of an Announced Inspection of Greenough Regional Prison*, Report No. 66 (June 2010); OICS, *Report of an Announced Inspection of Greenough Regional Prison*, Report No. 83 (March 2013).

17 The issue of women being transferred from Bandyup to Greenough has been controversial since the opening of the women's precinct, and was ongoing throughout the 2014 inspection of Bandyup. However because this issue was the subject of considerable investigation in the Greenough review, it has not been discussed again in this report. See: OICS, *Female Prisons in Western Australia and the Greenough Women's Precinct*, Report No. 91 (July 2014), [3.8]–[3.14].

18 The women from Roebourne Regional Prison were transferred to Greenough following the closure of the Roebourne women's unit in mid-2013.

19 OICS, *Female Prisons in Western Australia and the Greenough Women's Precinct*, Report No. 91 (July 2014).

THE 2014 BANDYUP INSPECTION – THE STATE'S HARDEST PRISON?

1.16 Bandyup is a complex and challenging prison in many respects. It has an increasing number of remandees who are managed along with sentenced prisoners. Furthermore Bandyup holds women assessed at all security levels, including those with cognitive impairment and extremely high mental health needs. It accommodates a high proportion of Aboriginal women including those who are out of country, as well as women with infants, and pregnant women from across the state. In recent years, a number of additional factors have contributed to Bandyup becoming increasingly tense and volatile.

Western Australia's Most Crowded Prison

1.17 Bandyup is the most crowded prison in the state. There is no official 'cap' on the number of women that can be held there. If a woman is remanded or sentenced in the metropolitan area, Bandyup is the first and only option. As a result, in recent years Bandyup's population has reached as high as 300 on a number of occasions.²⁰ As has been noted, the increasing demand on Bandyup has not been adequately met by the introduction of more 'beds', but rather by more and more mattresses being placed on cell floors.

1.18 Departmental projections have consistently failed to meet the rapid increase in numbers of female prisoners. The Department's 10-year *Female Prisoner Plan 2012–2022*, predicted that the upper bound female prisoner population could possibly exceed the operational capacity of the women's estate (489) in June 2015.²¹ Instead, this number was surpassed a year earlier than predicted.²²

1.19 Despite a massive surge in the amount of accommodation for male prisoners (more than 1500 beds will have been added from 2009 to 2014) Bandyup, and the women's estate as a whole, has received very little. Investment in accommodation for the women's estate has been reactive, stop-gap and insufficient. It has included:

- 2011: Bandyup Unit 6 (32 beds) – reallocated dongas from a new unit at Karnet Prison Farm;
- 2012: West Kimberley Regional Prison (25 beds); and
- 2012: Greenough Unit 4 (44 beds).

1.20 However, the benefit of these additions was mitigated by the closure of the women's units at Roebourne and Broome Regional Prisons (12 and 14 beds respectively), reducing the total number of beds available and displacing many Aboriginal women from their country.²³

20 In July 2012, December 2012, May 2014, and June 2014. DCS, *Weekly Offender Statistics Report* (6 December 2012 – 19 June 2014 inclusive). <<http://www.correctiveservices.wa.gov.au/about-us/statistics-publications/statistics/default.aspx>>

21 DCS, *Female Prisoners Plan 2012–2022* (2013) 21.

22 On 2 June 2014 the total number of women imprisoned in the state reached 493. TOMS Data Extraction (2 June 2014).

23 The new Eastern Goldfields Regional Prison is due to be commissioned in July 2015, and is projected to add a further 30 beds for female prisoners.

- 1.21 Underinvestment in the women's estate is felt acutely at Bandyup, which has borne the brunt of overcrowding and underinvestment in the women's estate. The increasing number of prisoners held in the facility has intensified pressure on Bandyup's infrastructure, services, population, and staffing groups.

Criteria For Transfer Out of Bandyup

- 1.22 The addition of the Greenough Women's Precinct reduced population pressure on Bandyup for a time.²⁴ However, in doing so, it has inadvertently concentrated the women's estates' most damaged and challenging women into one location.
- 1.23 Dispersal options for female prisoners remain limited. Boronia offers little relief from overcrowding due to the restricted profile of those it is able to accommodate,²⁵ and aside from very few exceptions, the same is true of the regional prisons that accommodate women.
- 1.24 Any female prisoners with major mental health needs, outstanding prison charges, or poor conduct history, are deemed ineligible for transfer due to the limited management options and mental health support that Greenough can provide. As a result, it is Bandyup's more settled and compliant prisoners who are transferred out, leaving the most complex women with challenging treatment needs at Bandyup.

Rate of Assaults on Staff

- 1.25 This Office recently completed a review of staff assaults in Western Australian prisons over a five-year period.²⁶ The review found that Bandyup had – by far – the highest rate of staff assaults in the state. In fact, the number of assaults against staff at Bandyup was two and half to three times higher than those found at the two largest maximum-security male prisons.²⁷ By the end of 2013 Bandyup had amassed 40 staff assaults for the year. This was vastly higher than any other prison in the state, and almost double the next highest count of 22 staff assaults at Hakea Prison, which houses two and a half times as many prisoners.²⁸

24 In December 2012, when the Greenough women were moved from Unit 5 to the new women's precinct, Bandyup's population hovered at around 300. Bandyup women began being transferred to Greenough a few months later, and by September 2013 the prison's population had fallen as low as 245. This reprieve however was short lived, and by the end of May 2014 Bandyup's population had once again risen above 300. DCS, *Weekly Offender Statistics Report* (6 December 2012 – 19 June 2014 inclusive). <<http://www.correctiveservices.wa.gov.au/about-us/statistics-publications/statistics/default.aspx>>

25 OICS, *Report of an Announced Inspection of Boronia Pre-release Centre for Women*, Report No. 79 (July 2012) [2.22]–[2.29].

26 1 January 2008 to 31 December 2012. OICS, *Assaults on Staff in Western Australian Prisons* (July 2014).

27 Hakea and Casuarina Prisons.

28 OICS, *Assaults on Staff in Western Australian Prisons* (July 2014) [5.26].

1.26 These findings correspond with the high rate of mental health issues present among female prisoners. Departmental research indicates that 39 per cent of incarcerated women had a history of mental health illness and 28 per cent had specifically identified mental health ailments.²⁹ Of those women who assaulted staff members, almost 60 per cent were medically assessed as requiring psychiatric care, compared with only 35 per cent of male assaulters.³⁰ Additionally, more than 15 per cent of women who assaulted staff were assessed by the Department as having an apparent intellectual disability.³¹

2014 Inspection Themes

1.27 In announcing the 2014 inspection of Bandyup this Office indicated that particular attention would be given to the following areas:

- The role of Bandyup as the primary women's prison for Western Australia (in that it deals with all security classifications, and acts as a receipt, remand, assessment, and sentenced prisoner facility) and its context within the women's estate as a whole;
- Strategic planning for female offenders and prisoners across the state in light of their increasing numbers;
- How effectively Bandyup supports women in light of their family responsibilities;
- The services and options available for female offenders and prisoners aged 18 to 24;
- Mental health services for female prisoners and the provision of appropriate training for officers and staff; and
- The prison's journey in the three years following the previous inspection (March/April 2011).

1.28 All of these themes were underpinned by the fact that Aboriginal women make up almost 50 per cent of Bandyup's population, and thus each theme included consideration of their particular needs and concerns.

INSPECTION METHODOLOGY

1.29 Between inspections of Bandyup, regular liaison visits were conducted in order to monitor the prisons' performance and progress in implementing previous recommendations. Given the noted instability at the highest levels of the Department, Bandyup itself, and continuing pressure on the women's estate, it was clear from the outset that the 2014 inspection of Bandyup would be complex and challenging. Recognition of this informed the planning of the inspection.

29 DCS, *Profile of Women in Prison 2008* (2009) 7.

30 As part of the data extraction each individual's medical status was analysed. For 48 out of 83 female prisoners who assaulted staff the psychiatric status as part of a medical assessment was checked in the affirmative.

31 OICS, *Assaults on Staff in Western Australian Prisons* (July 2014) [6.24].

- 1.30 Prior to the commencement of the inspection, background information was gathered via a consultation meeting with external service providers, Independent Visitor Scheme reports, and anonymous staff and prisoners surveys.³² Findings provided the inspection team with a clear indication of issues of interest prior to the commencement of on-site activities.
- 1.31 In recognition of the prison's complexity, for the first time the on-site phase of the inspection was extended from one week to two, running from Sunday 9 March to Monday 24 March 2014. This enabled inspection team members to observe a broader scope of prison operations, and to conduct follow-up interviews and investigations as required.
- 1.32 The size of the inspection team was also extended to include 14 individuals, and was made up of staff from the Office and expert consultants in the following areas:
- Forensic mental health services;
 - Education and training;
 - Infection control and environmental health; and
 - Human resource management.
- 1.33 Inspection team members worked in pairs in order to enhance both information collection and accountability, and the team was guided by the Office's *Code of Inspection Standards*.³³

32 One hundred and eight prisoners were surveyed in February 2014. Prisoners were surveyed in group settings, and via delivery and collection. Eighty-three staff took part in the staff survey. The staff survey was conducted online, and staff had three weeks to complete the survey. Both the prisoner and staff response rates represent an improvement on previous inspection surveys results.

33 OICS, *Code of Inspection Standards for Adult Custodial Services* (April 2007).

Chapter 2

POLICY, MANAGEMENT AND STAFFING

- 2.1 As discussed in our recent review of women's imprisonment, the past decade has been one of two distinct halves.³⁴ 2003 to 2008 was a period of focus, optimism and improvement. The Department developed a new policy framework for women's imprisonment and backed this up with the creation of an executive-level Director for Women's Services and the development of system-wide and Bandyup-specific philosophies. The Boronia Pre-release Centre for Women also opened. The positive results were obvious.³⁵
- 2.2 However, 2008 to 2014 saw this focus decline. The Director's position was first watered down and then abolished. And while the Department continued to produce policy and research documents which showed the differences between male and female prisoners, and asserted a women-centred model of custodial management, there was little investment in new accommodation. To the contrary, there has been a prison expansion program on an unprecedented scale which has focused almost exclusively on male prisoners, leaving women with the unwanted leftovers of the male estate.³⁶
- 2.3 Bandyup had improved markedly from 2002 to 2008 but, as the previous chapter has shown, the subsequent neglect of women prisoners has had profound effects, with the prison under enormous stress due to overcrowding and the complexity of its population. At this inspection, it was not surprising to find that this had resulted in management turnover, staff frustration and angst, and tension across prison. It was also troubling to find a large number of staff voicing negative attitudes towards female prisoners that were completely at odds with their own Department's expectations. In fact, the key head office policy documents appeared unknown and irrelevant.

POLICY/PRISON DIVIDE

- 2.4 At the time of the 2011 inspection, the Department had three main policies in place for female offenders: *Women's Way Forward: Women's Corrective Services Future Directions 2008–2012*; *Women's Treatment and Intervention Model*; and *Strategic Directions 2008–2012: Health Care for Women and Girls*. Unfortunately, the inspection found that, while these documents were still referred to, they did not translate into custodial management practice.
- 2.5 Since then, the Department has developed three more policy documents: *Female Prisoners Plan 2012–2022*; *Female Offender Policy*; and *Female Offender Framework*. These documents have not been translated into practice at Bandyup. Even worse, most staff seemed unaware of their existence and some were overtly sceptical.
- 2.6 This Office has persistently argued for women at Bandyup to be managed appropriately and the 2011 report recommended that 'dedicated resources [be committed] to the task of driving the Department's strategic direction of women's corrective services'. The Department said it supported this recommendation 'in part' but its response lacked substance and made no concrete commitment.³⁷

34 OICS, *Female Prisons in Western Australia and the Greenough Women's Precinct*, Report No. 91 (July 2014), Chapter 2.

35 OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 57 (December 2008).

36 OICS, *Female Prisons in Western Australia and the Greenough Women's Precinct*, Report No. 91 (July 2014). [1.34]–[1.43].

37 OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 73 (August 2011) Recommendation 4.

The Department recognises the importance of maintaining a strategic focus on addressing the needs of women prisoners. A dedicated framework, policy and monitoring process exist which are complemented with a strategic research focus. The Department recognises, however, as with all matters, there is a need to maintain a continuous improvement approach. As such, the current focus on women prisoners is currently being assessed.

- 2.7 Some of the other responses to other 2011 recommendations were also out of touch, sometimes factually wrong.³⁸ The key to the improvements seen from 2003 to 2008 was that women's imprisonment was given strategic priority and corporate support, and this was driven out 'on the ground' and these elements need to be re-built. In responding to our recent report on women's imprisonment, the Department rejected a recommendation to re-establish a senior executive position to drive women's interests but did commit to a stronger focus on improved services and outcomes.³⁹

Recommendation 1

The Department should ensure that Bandyup's practices and procedures align with Departmental strategic policy documents relating to women in prison, and that all its employees are aware of its core values and expectations. There should be an action plan to address deficiencies.

UNDERSTANDING GENDER IN THE MANAGEMENT OF FEMALE PRISONERS

- 2.8 An understanding of gender and the particular problems faced by female prisoners is vital to the effective management of female prisoners. The Department's Training Academy course *Working With Female Offenders* covers many issues faced by female offenders and strategies for their effective engagement. The course runs over three days and is a requirement for staff to work with female prisoners at both Boronia and Greenough. Inexplicably though, it is still not a requirement for staff working at Bandyup, despite the prison holding by far the most complex mix of women.⁴⁰
- 2.9 Pre-inspection surveys found that only half of Bandyup's staff felt they had been adequately trained to manage female prisoners and training data indicated that only 37 per cent of targeted staff had completed *Working With Female Offenders*.⁴¹ Custodial staff expressed understandable frustration that officers working at other prisons, generally with more settled women, were receiving this training ahead of them.
- 2.10 It makes no sense for the *Working With Female Offenders* course to be compulsory at prisons other than the one at which it is most needed. Courses to assist staff should be a core competence for all staff, along with mandatory ongoing training and refresher courses.

38 See OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 73 (August 2011), Inspector's Overview and Appendix 1.

39 OICS, *Female Prisons in Western Australia and the Greenough Women's Precinct*, Report No. 91 (July 2014).

40 The 2011 report recommended that all existing and prospective staff at Bandyup undertake the course as a condition of their employment. This was supported by the Department (OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 73 (August 2011) 101.) but never actioned.

41 DCS, *Satellite Training Section: Training Summary* (undated).

STRATEGIC PLANNING AND STAFFING

- 2.11 If the gap between policy and the day-to-day management of female prisoners is to be bridged, effective communication and engagement is essential.

Management and Leadership Challenges

- 2.12 During 2012 and much of 2013, Bandyup staff and the Western Australian Prison Officer's Union ('WAPOU') became increasingly strident in their criticisms of Bandyup management, especially in relation to human resource and finance issues. When added to the pressures of overcrowding and managing a complex prisoner population, this led to a pervasive sense of dissatisfaction and undoubtedly affected the functioning of the prison. These issues were clearly reflected in the pre-inspection surveys of both staff and prisoners, which indicated a marked decline since 2011.
- 2.13 By the third quarter of 2013, the issues had escalated to the stage where WAPOU took the unprecedented step of launching a postcard campaign alleging management bullying at Bandyup. Shortly afterwards, the substantive Superintendent (who had been acting at another prison since August 2013) effectively departed along with another senior manager. The circumstances were undignified and disrespectful, especially for a Superintendent with so many years of dedicated service.
- 2.14 The Office examined material regarding this series of events and also brought in external human resource (HR) expertise. It is unnecessary and inappropriate to comment further at this stage on the 'rights and wrongs' of what happened, as relationships and practices were improving by March 2014. However, the saga does raise important questions about why and how the situation escalated to the point of a targeted postcard campaign. In addition to considering the roles of Bandyup management and staff, and WAPOU, questions must also be asked about the role of the HR and Adult Custodial branches of the Department's head office. The evidence available to the inspection team, including responses to specific information requests, suggests that these branches did not provide strong high-level support and input in a timely manner, and that when support was offered it was ineffective. Although the situation has improved, it is vital that lessons are learned to ensure the Bandyup experience is not repeated elsewhere.

Recommendation 2

The Department institute a 'lessons learned' exercise arising out of events at Bandyup in 2012 and 2013 to ensure that, in the future, appropriate, timely, and effective corporate support is given to prisons.

Staffing Bandyup

- 2.15 Bandyup is a \$16.5 million dollar a year facility.⁴² It is the largest women's prison in the state, with a total approved staffing level of 157 employees. In terms of HR management however, Bandyup's staff are far from homogenous.⁴³ As at all prisons, employees include:
- Custodial officers, ranging from new graduates to Principal Officers;
 - Health and mental health professionals; and
 - Public service staff in administrative, specialist and management areas.
- 2.16 This is further complicated by differing line management responsibilities. Some specialist staff report to managers in Head Office rather than at the prison. Others have dual reporting systems, with managers for some issues on-site, and managers for other issues off-site. These staff receive little professional development and support, and experience unclear lines of leadership at the prison itself.

The Role of the Superintendent

- 2.17 The position of Superintendent at Bandyup is a complex and challenging role unlike any other Superintendent position. Among the issues that contribute to this are the complexity of prisoner issues, the range of security ratings, the mix of both sentenced and remand prisoners, and the increasingly high average daily count.⁴⁴ Management of Bandyup is furthermore affected by the prison's ageing infrastructure, ongoing budget cuts, and the limited options for 'dispersing' prisoners to other facilities.
- 2.18 Following the abolition of the Director of Women's Corrective Services, the Superintendent of Bandyup was expected not only to oversee the most complex prison in the state but also to be the key representative of the women's estate along with the Superintendent of Boronia. However, the role has received minimal strategic support from the Department. Managing an additional portfolio of this importance required strategic management knowledge and skills beyond those required for Superintendents at prisons of comparable size. The added responsibility was not properly recognised and took the Superintendent away from critical day-to-day focus.
- 2.19 Since the departure of the substantive Superintendent, the position has been filled on a temporary basis. The Acting Superintendent was originally appointed for a four week term in August 2013, and has since remained in the role. Despite Bandyup's unique challenges, he was provided very little training or mentoring prior to taking on the role.⁴⁵ Nevertheless, within a relatively short timeframe, he has made considerable progress in addressing the critical issues affecting staff/management relations. He has demonstrated strong operational leadership, and the ability to develop positive relationships with custodial and non-custodial staff.

42 Bandyup Women's Prison, *Annual Business Plan 2013-14* (undated).

43 Ibid.

44 The average daily count at Bandyup increased 16.98% between 2011 and 2013, while the state average increase was only 3.24%. Bandyup Women's Prison, *Annual Business Plan 2013-14* (undated) 7.

45 This Office acknowledges that during his tenure in the role of Superintendent, the incumbent has received mentoring from the Superintendent of Boronia Pre-release Centre for Women.

- 2.20 However, the temporary nature of this arrangement contributes to a sense of uncertainty which does little to support necessary cultural and operational change. If progress is to be maintained, especially in the area of prisoner services, the position must be granted ongoing strategic support and mentoring. A determination must also be made regarding the longer-term future of the current incumbent, by way of either a long-term acting position or a substantive placement.
- 2.21 Given the challenges faced at Bandyup, it is important that the Superintendent is not ‘pulled away’ too far and too often into strategic leadership roles. The prison itself needs full focus. However, it is vital the person remains an integral player in strategic planning.
- 2.22 Once the Superintendent’s role and incumbency are decided, the Department will need to consider the most appropriate management structure at the prison. This will necessarily include an examination of the required skills base and training needs of the whole management team if there is to be innovation and improvement. It may well be that additional resources will be required, at least for a period of refreshment and rebuilding. It should be noted that when a similar recommendation was made to this effect at Acacia Prison, Serco responded immediately. The positive impact at Acacia is already evident.⁴⁶

Recommendation 3

(a) Appoint a new substantive Superintendent to Bandyup or appoint a person to a long-term acting position; (b) examine the best management structure for the prison, including additional resources for the short or long-term; and (c) firm up and reinvigorate the Bandyup management team.

Prison and Staff Culture

- 2.23 This inspection found there were still pockets of cynicism in custodial and non-custodial staff groups. While the majority of staff who participated in interviews indicated support for recent HR and operational changes, this did not translate into a positive view about working at the prison. Furthermore, staff were still reluctant to suggest or instigate ways to deal with problems they were aware of.
- 2.24 A number of issues were consistently raised and appear to have contributed to staff sense of disempowerment, including:
- The unaddressed deterioration of prison infrastructure;
 - The increasing prison population;
 - Increasingly magnified prisoner complexity;
 - Ongoing budget restrictions;
 - Lack of strategic support from the Department (regarding HR, management and operational issues);
 - Low level recognition for the demands of working with female prisoners;
 - Sense of limited career development opportunities; and
 - Poor management of HR complaints, including grievance management and investigations.

46 OICS, *Report of an Announced Inspection of Acacia Prison*, Report No. 90 (June 2014).

- 2.25 Many staff reported that their colleagues at other prisons had negative impressions of Bandyup – that it was considered a very poor work place, and in some cases the employer of last resort. They even reported that trainees at the Academy were being told, or left with the impression, that Bandyup was a bad place to work. Although some staff did speak positively of their work experiences, the negative impact of these wider perceptions cannot be underestimated.

Performance Management and Professional Development

- 2.26 The Department's Performance Appraisal and Development System (PADS) is used across the prison estate. Bandyup staff reported a lack of confidence in the process – an attitude that is common throughout the prisons. Bandyup staff widely belittled it as a 'tick box' exercise of limited relevance. They said the process lacked collaboration, saying that they were expected to sign off on whatever their managers had written. They also complained that it lacked follow up. Overall, PADS was seen as compliance reporting, not a meaningful discussion presenting opportunities for improvement or consequences for non-performance.
- 2.27 Formal written tools such as PADS should supplement, not replace, relationships and dialogue. Unfortunately aside from the requirements of PADS, there was very little evidence of performance management undertaken by managers. Many staff complained that poor performance in the workplace had few real consequences, and appeared irrelevant to promotion prospects. They said that staff who were known to behave poorly went unchallenged and unmanaged, and set bad examples to newer recruits.
- 2.28 It was clear that not all managers were appropriately trained in communication and performance management. With appropriate specialist support (for example HR Corporate Services) and local senior management support, managers could be empowered to provide meaningful performance management, linked as appropriate to professional development opportunities, as well as disciplinary actions.

Recommendation 4

Reinvigorate Bandyup's performance management system and procedures with an emphasis on developing relationship and communication skills, as well as improving the PADS system.

Training

- 2.29 While there has been some progress in staff training, the inspection identified gaps between performance management, professional development, and training. Bandyup has a full-time Satellite Trainer who is knowledgeable, highly regarded and enthusiastic. However, the prison's training model and funding appeared to be compliance driven, rather than responsive to need or driven by professional development opportunities.
- 2.30 Departmental policy documents, including the *Female Prisoners Plan*, acknowledge that the management of female prisoners is very different to that of males, with female offenders more likely to have significant mental health and substance use issues and histories of abuse. However, these issues are not reflected in staff training priorities. For example, staff universally wanted mental health training. Training sessions on mental health by the prison's mental health nurses were well received but limited in availability and regularity.

Given identified need, there is a compelling case for mental health training specific to the management of female offenders to be a training KPI.

- 2.31 The Department's Training Academy has a broader mandate than Bandyup's Satellite Trainer but access to Academy training is limited. Officers stated that this was due to budget constraints and the fact the prison could not release officers without backfilling their positions. Generally, custodial staff reported that the Training Academy offered little of relevance by way of professional development and was not readily accessible.

Custodial Staff

- 2.32 Attracting and retaining quality staff is a priority for all organisations. The complexity of Bandyup means that it must be able to recruit, develop, and retain a dynamic and committed workforce. However, Departmental records show that more staff were looking to transfer out of Bandyup than into it.⁴⁷ Unfortunately, this appeared to be in keeping with broader, negative perceptions about the prison. This is concerning for future recruitment and retention of uniformed officers at Bandyup, and highlights the priority that must be given to recruiting and retaining staff. The Department needs to work on strategies that encourage officers to want to work with women prisoners and to equip them to do so.
- 2.33 Based on information provided for the period of May to October 2013, Bandyup employed 134 custodial officers, 82 of whom were female. This represented 61 per cent of officers, compared to 48 per cent in 2011, and indicates a significant shift in the gender balance of custodial officers.
- 2.34 Many officers complained to inspection staff that they believed that current recruitment methods and training for new officers were misleading.⁴⁸ In their view, recruitment materials advertised the position as a 'quasi-social work' role, which they did not feel was an accurate representation of their day-to-day work. Specifically, many of them complained that while their primary function is security and discipline, the Department's job description for prison officers places far more emphasis on role modelling – to motivate, support and encourage prisoners towards a better lifestyle.⁴⁹ This is not the place to debate the balance between these functions: the problem is that there seems to be a significant philosophical divide between those defining the role, and many of those performing it.

Aboriginal Staff

- 2.35 Of the total 154.8 full-time equivalent (FTE) employees at Bandyup, only two were Aboriginal, and both were custodial officers. This is significantly disproportionate to the high rate of Aboriginal female prisoners, who make up 45 per cent of the prisoners at Bandyup. The Department's *Female Prisoners Plan 2012–2022*, acknowledges that Aboriginal women's issues and needs are different from a cultural perspective across the female prisoner population but contains no recognition of this gap and no suggested strategies.

47 The Superintendent has reported that since the inspection, many staff have withdrawn their applications for transfer.

48 These views were raised by numerous officers of various ranks in an officer's forum on 14 March 2014, which was attended by a panel of inspection team staff.

49 DCS, *Prison Officer Job Description Form (JDF) – Generic* (May 2008).

- 2.36 In 2006, the Office recommended that the Department implement a specific campaign to recruit Aboriginal staff for Bandyup.⁵⁰ The Department rejected this recommendation, stating that previous targeted attempts to recruit Aboriginal staff had proven less successful than generic recruitment strategies.⁵¹ However, in the years since it does not appear that any significant progress has been made in increasing the numbers of Aboriginal staff at Bandyup. The Office therefore again urges the Department to consider new strategies.⁵²

Non-custodial Staff

- 2.37 Non-custodial administrative staff are integral to the effective operation of prisons. Bandyup has 20.8 administrative FTE, the majority of whom work within the prison and engage with prisoners, visitors and custodial staff on a daily basis. The on-site Satellite Trainer is only resourced to support custodial officers and non-custodial staff expressed frustration at their limited access to formal training and professional development opportunities. On a positive note however, there were some signs of improvement with the HR Coordinator seeking informal professional development opportunities at other prisons for Bandyup staff. This type of initiative is welcome and overdue.
- 2.38 Due to Bandyup's ailing infrastructure, administrative staff work in sub-standard offices, with limited access to suitable amenities including a toilet and basic kitchen amenities. The Business Manager, HR Coordinator, Finance Coordinator and an Administrative Assistant all work within a small transportable office that is separated from the main administrative office (including the nearest toilet) by a locked grille. This simply reinforces, once again, the need for investment in Bandyup's physical infrastructure, including the administration block.

PRISON AND COMMUNITY RELATIONS

- 2.39 In February 2014, the Office conducted a meeting with community agencies that provide services to the women at Bandyup.⁵³ The consultation revealed a disturbing decline in the experience of service providers attending Bandyup, compared with 2011.
- 2.40 In 2011, service provider representatives said that they felt 'welcome and safe' at the prison, and were readily provided with escorts which facilitated their easy access throughout the prison. In 2014 however, several said that they felt unwelcome at the prison and 'undermined' by officers, some of whom had made demeaning and inappropriate remarks, both about the service providers and the prisoners they were visiting. They also said that escorts were not readily available with some representatives saying they had to wait up to 30 minutes at the gatehouse.
- 2.41 Service providers also expressed concern at the prison's induction process, which they described as inadequate. Some said they were only given a five minute induction by security staff and others said that the video they were shown was out-dated and no longer relevant. This is in stark contrast with comments by service providers three years ago that the induction process was comprehensive.

50 OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 36 (June 2006) 65.

51 Ibid, 98.

52 At the time of writing, this Office is in the process of finalising a review with recommendations about the levels of Aboriginal staff employed by the Department and its recruiting strategies.

53 This is a routine aspect of this Office's inspection methodology.

- 2.42 An additional concern among the service providers in 2014 was the inconsistent application of rules and procedures among custodial officers. The representatives said that, depending on which officers were on duty at the gatehouse, their progress through the prison would either be welcoming, smooth and seamless, or difficult and stressful.
- 2.43 Unfortunately, this Office has also experienced very different receptions over recent years, depending on staff. Lawyers visiting have also consistently contrasted the professionalism, efficiency and customer service focus of many male prisons with the reception, treatment and responsiveness of some Bandyup staff.
- 2.44 Unlike many prisons in Western Australia, Bandyup does not have a community reference group in place. Such groups are intended to include representatives from community service providers and prison management to meet regularly, in order to enhance accountability, communication, and community involvement.⁵⁴ It is strongly recommended that prison management pursue the development of such a group, in order to enhance communication and working relationships.

Recommendation 5

Improve Bandyup's focus on consistent customer service to visitors to the prison, and establish a community reference group to enhance accountability, communication and community involvement.

54 OICS, *Code of Inspection Standards for Adult Custodial Services* (April 2007) [153.1].

Chapter 3

LAYOUT, INFRASTRUCTURE AND CAPACITY TO MANAGE THE POPULATION

- 3.1 Bandyup is not just a complex prison because of the prisoners it holds but also because of the physical site. It is laid out in a confusing way and while there are some examples of excellent newer buildings, too many areas are degraded and degrading. Given its space and infrastructure, Bandyup would be crowded if it held 200 settled prisoners, let alone the 300 complex prisoners it actually holds. As shown throughout this report, the site's shortfalls are impacting on the culture of the prison, as well as on security, safety, the provision of necessary services, and the dignity of women prisoners.⁵⁵
- 3.2 In short, the prison needs to be revitalised, physically and culturally. The women's estate has been on the edge of crisis for too long, and Bandyup has borne the brunt. Decisions must be taken to remediate the situation, to reduce Bandyup's numbers, and to let it re-develop.

LAYOUT

- 3.3 The organisation and layout of Bandyup, its crowded buildings of differing styles and warren-like passageways, make it physically complicated. Over time, numerous additions to infrastructure have eaten up most of the open spaces it originally had. As a result, the accommodation units reflect not only different architectural eras, but different philosophies of custodial management, and there are some confronting extremes in the condition of accommodation across the site.
- 3.4 Those recent additions to the physical infrastructure that were specifically designed and intended for Bandyup, such as the gatehouse and Unit 5, are impressive and modern.⁵⁶ However, buildings of such high quality create an acute contrast with the many areas which are deteriorated, out-dated, and inadequate. These degraded areas impact on management, staff, prisoners and visitors. They include the external Outcare building, the visits centre, Reception, Unit 1, the administration 'block', and other support facilities.⁵⁷
- 3.5 There are also many examples of more modern structures which have been dropped into the site and which sit uneasily in terms of location, function and prisoner movements. These include Unit 6, a collection of double-bunked demountable structures that were never intended for Bandyup but were dropped in to try and stem the tide of overcrowding.⁵⁸
- 3.6 Open spaces at Bandyup are few and far between, compounded by the fact that the prison lacks an oval for recreation and must make do with small areas with little amenity. On the other hand, positive use of open space was observed along pathways and entries to the units. These areas, between buildings and alongside fences, paths and walkways included well-kept garden beds which served to soften the surrounding concrete buildings. Overall, the quality of Bandyup's landscaping was impressive, and a credit to the Gardens Vocational Support Officer (VSO) and team of employees. However, there were few areas of shade for women to relax under, and those that were available were typically designated as smoking shelters.

55 OICS, *Female Prisons in Western Australia and the Greenough Women's Precinct*, Report No. 91 (July 2014).

56 See [3.17]–[3.20].

57 See [3.9]–[3.12], [4.31]–[4.32] and [4.45].

58 See [3.26]–[3.30].

- 3.7 Overcrowding, stress and the warren-like layout have also created some chaotic movement patterns, a noisy, confrontational environment, and some unsafe interactions.⁵⁹
- 3.8 Despite the physical deficiencies, there are some areas that are unused or under-used. On a site with so little usable space, this is not acceptable and can be easily addressed. Examples of areas which could and should be used include the tennis court (which was being used three years ago), the amphitheatre, and an out of bounds grassed area. These areas do not have to be used in the way they are currently configured but precious space should be used. For example, prisoners who are facing personal, mental health or family problems have no ‘quiet places’ for ‘time out’: if the tennis court is not to be used for recreation, the area could be re-landscaped and developed as a positive space, and including a cultural space for Aboriginal women.

Recommendation 6

Develop all unused space at the Bandyup site to maximise opportunities for recreation and relaxation and for personal and cultural development.

UNIT 1: DEGRADED AND DEGRADING

- 3.9 Unit 1 is the oldest accommodation unit at Bandyup. Built more than 40 years ago, it is claustrophobic, decrepit, unhygienic and poorly maintained. The shared shower blocks were stained, grimy, and covered in graffiti. One wing of the unit (A-Wing) has only two communal showers for over 30 women. The cells have peeling vinyl on the floors and paint flaking off the ceilings. Due to restrictions on cleaning products, the women complained that they were unable to keep the facilities clean. The two communal yard areas were small and restrictive, and groups of tall steel poles were visible throughout. Three years ago, these poles supported shade cloths, but they were not replaced when they tore.
- 3.10 Throughout the inspection, Unit 1 A-Wing was commonly referred to by staff and prisoners as ‘The Mental Health Wing’, and in effect, it has become a de facto mental health ward. It is however, both physically unsuitable for this purpose, and inappropriately staffed as such. More than anything, Unit 1 A-Wing simply seems to have become a ‘holding area’ for those women who have been deemed the most difficult, the vast majority of whom are Aboriginal.
- 3.11 Unit 1 is designated as having a capacity of 62 women, but in recent times it has regularly held over 80. This has been achieved through the ‘doubling-up’ of cells. Unlike the majority of male prisons where doubling-up was achieved by a methodical introduction of bunk beds, at Bandyup this typically means that one woman per cell has to sleep on the floor. Levels of condensation are high during the winter months and mattresses routinely become damp, either as a result of the condensation or after the cell floors are mopped.

59 See [6.69]–[6.71].

3.12 The cells, built only for single occupancy, include a stand-alone toilet. Due to their restricted size, the women who sleep on the floor have their mattresses alongside the toilet with their head beside it. During the nightly 12-hour lockdowns the women have no provision for their privacy or personal dignity.



Unit 1: Outdoor area, communal bathroom and doubled-up cell

Recommendation 7

Replace Unit 1 with appropriate, contemporary accommodation, and ensure that the new accommodation is designed to take account of key needs, including mental health.

OTHER ACCOMMODATION UNITS⁶⁰

Unit 2

3.13 Unit 2, was built in 2002 for up to 64 women and originally offered women the incentive of an enhanced regime. However, it now regularly holds more than 80 women and incentives have diminished. Once again, unlike the male prisons and despite Departmental indications reflected in our 2011 report,⁶¹ no proper bunk beds have been installed. Thus, as in Unit 1, the second woman must sleep on the floor.

60 Unit 3 (which housed crisis care and management cells) is not discussed in this chapter but its limitations are examined elsewhere, especially in Chapters 9 and 10.

61 OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 73 (August 2011) [2.21].

LAYOUT, INFRASTRUCTURE AND CAPACITY TO MANAGE THE POPULATION

- 3.14 Originally, half of the unit (C/D Wing) was reserved for self-care prisoners, and these cells contain showers. The showers and toilet are surrounded by clear Perspex, so the women are unable to shower without being seen by cellmates. Some women had attached pictures to the screen so they could shower in private, but unit officers had instructed their removal.



Unit 2: Wing corridor and doubled-up cell

3.15 At male prisons, cell sharing has been achieved through the installation of bunk beds, not by forcing men to sleep on the floor.⁶² The 2011 report recommended that the Department ‘cease the practice of compelling women to sleep on floors.’ The Department fully supported this and said that sleeping women on floors was just an ‘emergency measure,’ and that its existing initiatives would address the problem. The reality is that more women were sleeping on floors in 2014 than in 2011. The Department’s failure to address this issue between 2011 and 2014 is shameful. After the inspection, the Inspector was informed that the Department would be installing bunk beds and using trundle beds but this is yet to happen and it is necessary to repeat the 2011 recommendation:

Recommendation 8

Cease the practice of compelling women to sleep on floors.

Unit 4

3.16 One area of Bandyup which has seen the introduction of bunk beds is Unit 4. This unit is made up of three communal-living style houses. One is reserved for orientation, and the remaining two are self-care, one of which has bunk beds (K-Block). These cells also include a shower and toilet. While the shower is private and enclosed, the unusual configuration of the cell sees the toilet exposed, diagonally opposite the beds, and directly underneath the television.



Unit 4: Doubled-up self-care cell

62 Excluding a period from 2009 to 2010.

Unit 5

3.17 Unit 5, located at one end of the prison site, provides by far the most desirable accommodation. Ten separate houses housing six women each are clustered around an open landscaped area. Each house includes an open plan kitchen and living area, two shared bathrooms, outdoor covered areas, and four bedrooms.⁶³ While Unit 5 is beginning to show some signs of wear and tear, the standard of accommodation it offers is an enormous improvement on that found in Unit 1.



Unit 5: View across the grounds and shared self-care kitchen

63 The houses were originally designed for four women, but population pressure has resulted in half of the rooms being doubled-up by introducing a second bed.

- 3.18 Another unavoidable distinction between ‘best’ and the ‘worst’ accommodation at Bandyup is a clearly visible racial divide. Units 1 and 2, by far the most overcrowded and undesirable accommodation, were 75 per cent Aboriginal during the inspection. Meanwhile the newer and more spacious Unit 5 was only 20 per cent Aboriginal.⁶⁴
- 3.19 This echoes the findings of the 2011 inspection report, which recommended that Bandyup review its hierarchical system of prisoner management, in order to see a more proportionate representation of Aboriginal women in the better areas of the women’s estate.⁶⁵ The Department responded that a review was under way and that this would include consideration of the barriers to Aboriginal women accessing higher standards of accommodation.⁶⁶ Three years on, little to no visible change was found.
- 3.20 A wider systemic problem is that most Aboriginal women remain at Bandyup and are not progressing to the excellent facilities at Boronia which are designed to improve prisoners’ prospects of remaining crime-free. Since it opened in 2004, Boronia has generally only held between eight and 20 per cent Aboriginal women.⁶⁷ The Department must obviously manage a range of risks but it is most unlikely to achieve targets for the reduction of recidivism if key cohorts are not accessing the better levels of accommodation and re-entry support.

Recommendation 9

In order to reduce recidivism rates, and with due regard to risk, the Department should examine and implement measures to improve Aboriginal women’s access to the better accommodation areas at Bandyup and to the re-entry opportunities presented by Boronia.

MINIMUM-SECURITY WOMEN AND UNITS 6 AND 7

- 3.21 Bandyup is unique in terms of housing remand and sentenced prisoners of all security levels: minimum, medium and maximum. However, infrastructure constraints prevent the prison from rewarding those prisoners who earn minimum-security status with significantly enhanced accommodation or regimes.
- 3.22 Women are very poorly served compared with men. The state has 14 prisons for around 4,700 male prisoners. Where practicable, this allows for appropriate management and placement of the prisoners based on their security classification, proximity for family and friends, and health and program needs.⁶⁸ The state’s 500 female prisoners do not have these options. More than half are held at Bandyup, and the remainder are dispersed across the women’s estate.⁶⁹

64 Unit 1 had a total population of 73 of whom 55 were Aboriginal, while Unit 5 had a total population of 54 of whom 11 were Aboriginal. TOMS Data Extraction, 6 March 2014.

65 OICS, *Report of an Announced Inspection of Bandyup Women’s Prison*, Report No. 73 (August 2011) 98.

66 Ibid. On substantive equality see Chapter 8.

67 For most of the first eight years of Boronia’s operation, numbers were at the lower end of this scale. Following criticisms in the 2012 inspection report, numbers have somewhat increased:

OICS, *Report of an Announced Inspection of Boronia Pre-release Centre for Women*, Report No. 79 (July 2012).

68 <<http://www.correctiveservices.wa.gov.au/prisons/assessment-management.aspx>>

69 Female prisoners are also held at Boronia Pre-release Centre for Women, Greenough, West Kimberley and Eastern Goldfields Regional Prisons, with small numbers at Roebourne and Broome Regional Prisons.

- 3.23 Immediately prior to the inspection there were 280 women at Bandyup. Of these 19 were rated maximum-security, 196 medium-security and 65 (around a quarter) minimum:

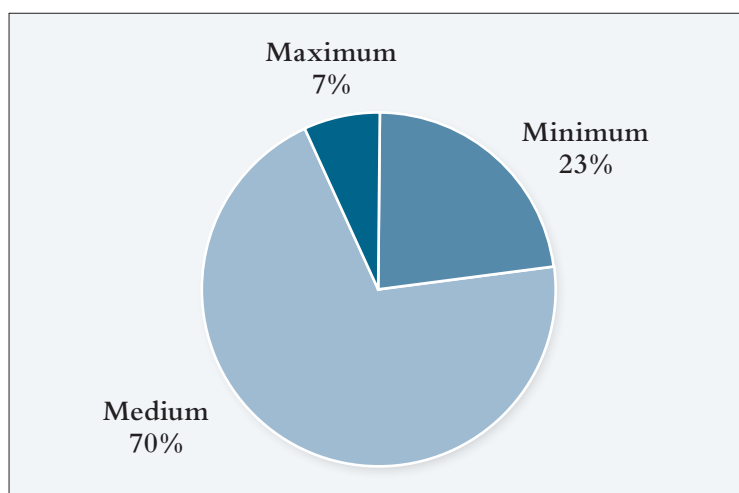


Figure 1: Security classifications of prisoners at Bandyup⁷⁰

- 3.24 A prisoner's security classification is based on a number of factors including risk of escape, behaviour, offence type and history, and participation in programs.⁷¹ The system is designed to enable prisoners to be individually assessed and placed in a suitable facility. The logic is that prisoners who have earned minimum-security should be rewarded, including in appropriate cases, activities outside the prison under section 95 of the *Prisons Act*.⁷²
- 3.25 While a proportion of the minimum-security prisoners at Bandyup will be transferred to Boronia, almost one-quarter of the prison's population at the time of the inspection were rated as minimum-security. Some were accommodated in units reserved for minimum-security but the rest were located alongside medium- and maximum-security prisoners. Bandyup, as a maximum-security prison, offers no section 95 programs.
- 3.26 There are two designated minimum-security units at Bandyup. Unit 6, the newest unit which was introduced after the 2011 inspection, and Unit 7, which has previously been used as a nursery.

70 TOMS Data Extraction (6 March 2014).

71 <<http://www.correctiveservices.wa.gov.au/prisons/assessment-management.aspx>>; and OICS, *The Flow of Prisoners to Minimum Security, Section 95 and Work Camps* (2012).

72 Section 95 of the *Prisons Act 1981* (WA) provides the authority to 'arrange for the provision of services and programmes for the wellbeing and rehabilitation of prisoners'. This includes 'providing opportunities for work, leisure activities, and recreation' and 'assisting prisoners to make reparation for the offences they have committed'. Section 95 further states that '[s]ervices and programmes under this section may be provided inside or outside a prison'.

- 3.27 Unit 6 was built in response to overcrowding. However, rather than being a planned and considered addition, it was essentially a knee-jerk response, which came about after the reallocation of five transportable modular buildings (dongas) that had become surplus to male need at Karnet Prison Farm.⁷³
- 3.28 Each donga contains four cells with en-suite bathrooms, and while the cells were designed to hold a single occupant, they have been double-bunked from their introduction. Thus the unit added a further 32 beds to Bandyup's capacity.
- 3.29 As the newest accommodation on the site, progression to Unit 6 was intended to be an incentive for minimum-security women. However, the physical layout and regime of the unit offer little incentive. Unit 6 follows the same daily routine of lockdowns, recreation, medical and canteen, as most other units. There was no employment requirement for Unit 6 residents and many of the women were unemployed or were working in the unit. During the day they were restricted to a small courtyard area with little to do.
- 3.30 The Unit 6 courtyard overlooks Unit 5's self-care cottages and open garden area. Unit 5 accommodates both minimum- and medium-security prisoners but, ironically, its pleasant openness is in stark contrast to the confinement of Unit 6, despite the 'achievement' of Unit 6 prisoners in reaching minimum-security. The contrast with opportunities for male minimum-security prisoners at prisons such as Wooroloo and Karnet, is even more marked.⁷⁴



Unit 6: Shared cell and outdoor area

73 Four accommodation modules and one kitchenette/dayroom. Also see: OICS, *Report of an Announced Inspection of Karnet Prison Farm*, Report No. 84 (June 2013) 13.

74 Since the inspection, Unit 6 has been redesignated as a medium/minimum unit in order to free up more beds. The Department also notes that it has plans to enhance the environment, and this Office will closely monitor these plans.

- 3.31 The other minimum-security unit at Bandyup, Unit 7, is based on a communal-living arrangement. It includes two bathrooms, a shared open plan kitchen and dining area, laundry, enclosed yard, and four doubled-up bedrooms, giving a total capacity of just eight. Unit 7 women (like Unit 5) have lock down at the same time as the rest of the prison, however, they are only locked into the house – not their ‘cells’ – and are therefore able to move around the house in the evenings. Due to its seclusion and regime, Unit 7 offers a high standard of accommodation. However, because of its low capacity, very few women will ever be placed there.



Unit 7: Shared cell and shared bathroom

PRISONERS IN NEED OF PROTECTION

- 3.32 In many prisons, prisoners will be separated from the main population if they are deemed to be at risk from others, either due to the nature of their offence or because of conflict. Large male prisons (such as Casuarina, Hakea, and Acacia) have dedicated units where ‘protection’ prisoners are separately managed. These men attend separate work locations, attend education separately, and are escorted when moving through the prison when other prisoners are out of cell.⁷⁵ For some years now, Bandyup has had no such practice. Instead, potentially vulnerable women are mixed in with the mainstream population.
- 3.33 According to Bandyup’s senior management, the prison has little need for a specific protection regime and potentially at-risk prisoners are typically transferred to another prison.⁷⁶ In principle this Office does support the management of vulnerable people in mainstream wherever possible and, if necessary, it is the ‘bullies’ who should be segregated. However, Bandyup faces some serious challenges. First, dispersal options in the women’s prison estate are extremely limited, and the only other female facility in the metropolitan area is reserved for settled, minimum-security prisoners. This has significant repercussions, as it may require vulnerable prisoners to transfer away from the support of friends and family.
- 3.34 Secondly, within the first two days of this inspection, it became quite apparent that the prison was rife with bullying and stand-overs. This was readily observable in the afternoons when prisoners mix for recreation and canteen visits, and was not being tackled prior to the matter being raised.⁷⁷
- 3.35 For the most part, Bandyup management still stated that the women were expected to ‘self-manage’ their own protection.⁷⁸ The expectation that female prisoners should be responsible for their own physical safety is naïve and would be considered unthinkable in a male custodial environment. It also leaves the Department legally exposed in terms of its duty of care.
- 3.36 This Office does not advocate the physical separation or isolation of particular groups of women, but more needs to be done to address the vulnerability of some prisoners in the female estate. This is likely to require a holistic approach, including measures to address the chaotic mixing, more rigorous policing of bullying, and proactive, measurable, anti-bullying strategies.

Recommendation 10

Ensure that Bandyup’s regime and processes actively tackle issues of prisoner on prisoner bullying and better protect potentially vulnerable individuals.

75 See OICS, *Report of an Announced Inspection of Casuarina Prison*, Report No 88 (January 2014) 68; OICS, *Report of an Announced Inspection of Acacia Prison*, Report No. 90 (June 2014) 39–40.

76 The Department has informed this Office that Bandyup does have a protection regime that it can employ, however no evidence of this was presented in either the document request or during the inspection.

77 See [6.71]–[6.73].

78 The Department has noted that if prisoners are concerned about their safety they will notify a staff member.

REMAND PRISONERS

- 3.37 Remand prisoners are those prisoners who are awaiting trial. They are innocent unless proved guilty. Because of this different legal status, the legislative instruments governing imprisonment provide that remand prisoners have additional rights/entitlements to sentenced prisoners. One of the most concerning developments in imprisonment over recent years has been the growth in remand numbers. Bandyup has been severely impacted by this trend and has not coped well.
- 3.38 As demonstrated by the following snapshot, women are now more likely to be held on remand than men, and Aboriginal women are by far the most likely to be on remand:
- On 24 July 2014, women (28%) were significantly more likely to be on remand than men (22.3%). This is a marked change from three years earlier,⁷⁹ when men were more likely to be on remand (18.1%) than women (16%).
 - On 24 July 2014, almost one-third of Aboriginal women prisoners were on remand (31%), compared with a quarter of non-Aboriginal women and Aboriginal men (both 24%), and just over one in five non-Aboriginal men (21.5%).
 - Between July 2011 and 24 July 2014, the number of women being held on remand across the state jumped by 150 per cent (from 53 to 135). Over the same time period, the number of men on remand increased by 35 per cent (from 784 to 1058).
- 3.39 As there is no facility that specialises in services to female remand prisoners, the growth in remand numbers has hit Bandyup especially hard. In July 2011, it held around 45 remand prisoners. On 24 July 2014, it held 113. Given the pressure the prison was already under, it was ill-equipped for the challenge and has not been able to adequately meet the legitimate requirements of remand prisoners. Examples of shortfalls include the following:
- No discernible difference in regime (remand and sentenced prisoners are simply mixed together);
 - Extremely poor official visits facilities for lawyers to consult with clients;
 - Numerous complaints from a wide range of legal practitioners regarding their ability to contact clients by phone and the attitudes of some staff (they said Bandyup compares very badly with Hakea Prison, the main male remand facility);
 - No access to 'Skype' for legal visits (unlike Hakea);
 - A shamefully inadequate collection of out of date hard copy legal resources in the library; and
 - No access at the time of the inspection to computer-based legal databases.
- 3.40 In summary, remand prisoners at Bandyup were not being well-served in 2011 and by 2014 their situation had deteriorated further. It will probably not be possible to establish a dedicated women's remand prison in the short term, and there are other priorities, including mental health services and better opportunities for minimum-security women at Bandyup. However, the Department does need to give immediate attention to two issues.

79 28 July 2011 is being used for comparison: see <http://www.correctiveservices.wa.gov.au/_files/about-us/statistics-publications/statistics/2011/cnt110728.pdf>

First, as this Office recommended in its recent thematic review of women's imprisonment and Greenough Prison's female unit, it needs to examine opportunities to reduce the number of women being held on remand.⁸⁰ As the Department supported that recommendation, it will not be repeated. Secondly, the services for remand prisoners at Bandyup must be improved.

Recommendation 11

Ensure that Bandyup is better resourced to meet the needs and legal entitlements of remand prisoners, including improved access to legal resources and improved opportunities for contact with lawyers.

ENVIRONMENTAL SUSTAINABILITY

- 3.41 Bandyup has never developed or introduced a formal environmental sustainability strategy. Assuming this is part of the business planning model which will take Bandyup into the future, it will be the responsibility of the Business Manager to develop an environmentally sustainable framework for the prison from scratch.
- 3.42 Throughout the inspection, team members heard and observed bits and pieces about environmentally friendly practices on the site which indicate a fledgling and haphazard approach to environmentally sustainable practices. For example, one of the recreation officers had in mind the creation of a 'green team' of prisoners, but this was still in the contemplation stage. A number of water tanks were in place across the site for the collection of rain water, soft drink cans were being collected for recycling, and some of the houses in Unit 5 had small vegetable and herb patches.
- 3.43 While each of these initiatives is good environmentally sustainable practice, they should form part of a broader, informed strategy that clearly defines the goals and outcomes required of Bandyup. A number of other prisons are much further progressed in this regard, and Acacia has shown particular initiative, including commissioning environmental impact assessments and on-site sustainability practices.
- 3.44 Bandyup's *Annual Business Plan 2013–14* does not include any action, outcome or performance measure relating to environmental sustainability.⁸¹ While it may be argued that Bandyup management have more important priorities, the issue of environmental sustainability must not be lost. There are also opportunities to provide prisoners with education and skills relating to environmentally sustainable practices which they may be able to transfer to their lives outside prison.

80 OICS, *Female Prisons in Western Australia and the Greenough Women's Precinct*, Report No. 91 (July 2014) Recommendation 1.

81 Bandyup Women's Prison, *Annual Business Plan 2013–14* (undated).

Chapter 4

STRUGGLING FOR DIGNITY, RESPECT AND HYGIENE

- 4.1 International human rights law, to which Australia is a signatory, requires prisoners to be treated with respect for their inherent dignity as individual human beings.⁸² This concept is captured in this Office's *Code of Inspection Standards*,⁸³ and the Department's *Female Offender Policy* which says that female offenders are to be managed with respect and regard for their dignity, and that services are to be delivered in a safe, supportive and decent environment.⁸⁴
- 4.2 Departmental research clearly identifies the complex histories of violence, sexual abuse and drug addiction that characterise female prisoners:
- An important conclusion is that the women interviewed are generally very damaged people. They present patterns of mutually sustaining, multiple deprivations (poor education, limited vocational skills), histories of various experiences of abuse (physical, mental and sexual), resulting in extensive amounts of mental distress (post traumatic stress, psychological trauma).⁸⁵
- 4.3 Bandyup has been struggling to ensure dignity and respect for this complex group of people because of the pressures it faces, including high numbers, a crowded and ailing infrastructure, and inadequate investment.⁸⁶ The environment is often tense and volatile, and sometimes unhygienic and unsafe. It is a situation that was unacceptable in 2011, and has since deteriorated further. Issues include the following:
- Women sleeping on mattresses on the floor, exacerbated by excess condensation, lack of space and lack of privacy;
 - Women being unable to wash and dry their hands appropriately in kitchens shared by more than 30 prisoners;
 - Women being unable to shower or use the toilet out of sight of their cellmates;
 - Overcrowded units resulting in an inadequate number showers for all women to use before attending their workplace for the day;
 - Women being unable to maintain hygiene levels in their units due to lack of access to adequate cleaning products;⁸⁷
 - A daily dish up of meals that included shouting, swearing and women throwing food to one another unchallenged; and
 - Theft and bullying taking place openly, yet unaddressed.⁸⁸
- 4.4 The pressures of this environment on staff as well as prisoners are palpable. The stresses have undoubtedly affected the ability of many staff to remain positive, and some have developed negative, unhelpful and unacceptable attitudes. The decline from 2011 was marked.

82 *International Covenant on Civil and Political Rights*, Article 10(3).

83 OICS, *Code of Inspection Standards for Adult Custodial Services* (2007) 72.

84 DCS, *Female Offender Policy* (September 2011) 2.

85 DCS, *Profile of Women in Prison 2008 – Executive Summary and Key Findings* (August 2009) 5.

86 As evidenced by a failure to secure funding for Bandyup's maintenance and upgrades.

87 Prior to and during the inspection many women approached inspection team staff to comment on substandard hygiene in the units and noted that the women were fearful of catching communicable diseases from each other.

88 See [6.67]–[6.73].

- 4.5 In summary, given the current state of Bandyup, the ability of the Department to maintain a safe, supportive and decent environment in line with human rights standards and its own policy settings is severely compromised.⁸⁹

TREATMENT OF WOMEN WHO ARE PRISONERS

Key Findings

- 4.6 The findings of the pre-inspection surveys, the on-site inspection, and consultation with external and internal service providers were uniformly depressing: there has been a marked decline in attitudes towards women and in the treatment of prisoners.
- 4.7 According to the women who completed the surveys, the worst thing about Bandyup was the way they were treated by custodial officers. It is particularly troubling that Bandyup's 2014 results were far worse than 2011 and the state average:⁹⁰

Positive perception that officers:	State average ⁹¹	Bandyup 2011	Bandyup 2014
Apply the rules fairly	44%	46%	27%
Are respectful during cell searches	43%	46%	30%
Treat prisoners with dignity	35%	34%	22%

Figure 2: Prisoners perception of officers – pre-inspection survey tool, Bandyup 2014 response

- 4.8 The inspection team observed mixed interactions between staff and prisoners. Some were very positive and appropriate, but some were offhand and negative. Once again, the situation had declined from 2011 and compared poorly with many of the male prisons.
- 4.9 These findings mirrored feedback received from external service providers at this Office's pre-inspection community consultation meeting.⁹² Generally, they said their reception and treatment would vary widely between staff and some said they had experienced inappropriate remarks from officers.

The Gap Between Attitudes and Expectations

- 4.10 It was clear that some staff members, including experienced and vocal women and men, held views of women prisoners that were at odds with their employer's expectations, and that attitudes had declined since 2011. Without in any way detracting from staff members' personal responsibility, this probably reflected, in part, the stress the prison had been under.

89 DCS, *Female Offender Policy* (September 2011) 2.

90 Many prisoners also raised concerns relating to matters such as the disclosure of confidential information, speaking to women in a degrading manner, and behaving disrespectfully to women with cognitive impairments or mental illness.

91 This refers to the average findings from pre-inspection surveys conducted in the fourth round of prison inspections.

92 See [2.39]–[2.44].

4.11 Departmental research and philosophies are crystal clear. Because of their histories of abuse and tendency toward co-morbid lifestyles, female prisoners are in greater need of a supportive model of custodial management.⁹³ In extensive and well-grounded research it found that:

- An overwhelming majority had experienced abuse (90%);
- Most had experienced abuse as adults (83%), but about half experienced abuse as a child (44%). Many had experienced abuse both as an adult and a child (38%);
- Most who reported abuse as adults had experienced physical abuse (98%), the majority of which was perpetrated by an intimate partner (94%);
- Of those who experienced abuse as a child around three-quarters experienced sexual abuse (77%), and half experienced physical abuse (50%); and
- A majority indicated that they did not receive any counselling for the abuse (63%).⁹⁴

4.12 The research also concluded that unless issues of underlying trauma are addressed, prisons will not succeed in rehabilitating women:

A supportive approach is needed to give the women the belief and the energy to sustain a new direction by engagement in activities and relationships that open up their horizons for them and offers them a future without crime.⁹⁵

4.13 These research findings perhaps come down to one basic principle: women who are in prison should be treated as ‘women first and prisoners second’. Put another way, they are ‘women who happen to be prisoners’, not ‘prisoners who happen to be women’. This principle is mirrored not only in Departmental research but also in the Bandyup philosophy that was developed in the mid-2000s and is still shown in picture frames across the site.

4.14 Unfortunately, the inspection team heard far too many comments, from a whole range of staff groups, that were out of line with this principle and the Department’s values. Examples included:

- The women are ‘over-serviced’;⁹⁶
- They are ‘just bludgers’;
- They ‘slash-up [self-harm] just to be a pain in the arse’;
- They receive ‘too much care and not enough discipline’; and
- They are ‘manipulative’, ‘attention seeking,’ ‘needy,’ and try to ‘jump the queue by acting out’ (including by ‘slashing-up’).

4.15 Again, it is important to emphasise that these views were not universal. But they were common, spread across work areas, and far more marked than in 2011. The Department will not be able to achieve its core objectives if this culture is not addressed.

93 DCS, *Profile of Women in Prison 2008 – Executive Summary and Key Findings* (August 2009) 5.

94 DCS, *Profile of Women in Prison 2008 – Final Report* (August 2009) 7.

95 Ibid, 131.

96 In fact they have been profoundly disadvantaged compared with male prisoners: See OICS, *Female Prisons in Western Australia and the Greenough Women’s Precinct*, Report No. 91 (July 2014).

FOOD

- 4.16 Prisons provide meals in an environment where consumers have almost no direct choice over the meals they are served. Consideration must be given to budgetary limitations, preferred suppliers, health imperatives and public scrutiny. In this environment it will always be challenging for prisons to achieve high satisfaction levels from prisoners in relation to food. Nonetheless the survey of prisoners at Bandyup found that 71 per cent thought that food quality was poor. This is far worse than the state average of 50 per cent.⁹⁷
- 4.17 The kitchen at Bandyup is run by a staff of three Vocational Support Officers (VSOs) and up to 25 prisoners, who are responsible for preparing meals for prisoners, prison staff and external service providers. Bandyup's menu was reviewed by a dietician as part of a departmental statewide review in 2012. This resulted in a number of changes to the regular menu, including meat pies only being served once a week, and the reduction of white bread in favour of wholemeal and whole grain bread products. The kitchen provides a variety of special diets including vegetarian, gluten-free, allergy restricted and some religious diets.⁹⁸
- 4.18 Prior to the 2011 inspection, Bandyup's kitchen had ceased supplying kangaroo meat due to the loss of their preferred supplier. Aboriginal women at Bandyup still cannot access traditional foods, yet they are keenly aware that male prisoners in a number of other prisons can.⁹⁹ The kitchen acknowledged this issue, and was arranging a new supplier and re-establishing plans to serve kangaroo and damper once a week. The plan included offering Aboriginal prisoners from different regions the opportunity to come into the kitchen and cook the food themselves. This Office encourages the speedy implementation of these plans. The prison should also give Aboriginal prisoners the opportunity to access and organise the cooking of cultural foods independently of the kitchen, including using the currently disused fire-pit.

Recommendation 12

Provide regular traditional foods for Aboriginal prisoners, and allow them to prepare and cook that food themselves.

- 4.19 The way in which meals are received at Bandyup depends on a prisoner's accommodation unit. Those held in standard accommodation units had lunch and dinner brought to their units from the main kitchen,¹⁰⁰ while those in self-care units were responsible for the preparation of their own meals.¹⁰¹ Cereals and bread were available throughout the prison as breakfast options.

97 This refers to the average findings from pre-inspection surveys conducted in the fourth round of prison inspections.

98 However the provision of Halal meat is still not available to prisoners in Western Australia due to the fact that the majority of meat procured comes from Karnet Prison Farm, which cannot ensure relevant requirements.

99 Roebourne Regional Prison and Acacia Prison both have kangaroo meat available regularly.

100 Units 1, 2, 3, 4-J Block, and 6.

101 Units 4-K and L Blocks, 5 and 7.

4.20 In the units where meals were received from the kitchen, trays of food were delivered and served by prisoners. The dish up process was observed to be chaotic, unhygienic, aggressive, and inequitable, quite unlike any other prison in the state:

- Hairnets were not worn by all of the prisoners serving food;
- Servers wore gloves, but dished up food by hand, not serving utensils;
- The line-up for service was disorderly, and brewing tension was evident (shouting, swearing);
- Some food handlers were touching their face and hair with gloved hands, or coughing into gloved hands while dishing up;
- Waiting prisoners tore open bags of bread and fruit and distributed them with bare hands, sometimes throwing items to others;
- Supervising officers attempted to manage rising levels of aggression and noise, but did not intervene in, or comment on, the serving process; and
- A supervising officer insisted that an unwell prisoner collect her own plate of food when a fellow prisoner had volunteered to assist.



Lunch time dish-up in Unit 2

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- 4.21 One of the stated roles of a prison officer is to communicate appropriately with prisoners, and to direct and motivate them.¹⁰² As a matter of safety, control and support, one would also expect officers to take a proactive role in addressing poor behaviour. Unfortunately, ‘dish up’ was just one of numerous occasions when officers appeared to ‘stay back’ and to be unwilling to engage with prisoners about their behaviour.

Recommendation 13

Increase prison officers’ responsibility for supervising unit activities such as food distribution and cleaning with a view to improving hygiene practices.

- 4.22 None of the shared kitchen areas in Units 1 and 2 had any means other than a cloth tea towel for the 30 or more women in each unit wing to dry their hands on. Additionally, although hand soap dispensers had been installed, they had not been filled with soap for some time. It is wholly unacceptable that prisoners, in a shared environment where food is served and consumed, are not equipped with the ability to maintain personal hygiene. The risks of infection in a crowded prison are obvious. As part of this inspection, the Office commissioned a review by an Infection Prevention Consultant and her recommendations on this issue are being sent directly to the prison.
- 4.23 In the ‘self-care’ units, domestic-style kitchens were used by prisoners to prepare their own communal meals. The women in these units ordered supplies from the kitchens once per week. However, the process of ordering, storing and preparing food was largely unregulated and unsupervised.
- 4.24 The lack of focus on the financial implications of food choices is a lost opportunity to develop life skills and help to prepare prisoners for their release. Acacia Prison, Boronia and Bunbury’s Pre-release Unit all provide examples of well-functioning budget and life-skill systems which have been incorporated into the self-care environment.¹⁰³
- 4.25 However, extra resources have recently been secured for Bandyup’s kitchen and there are now plans to introduce an additional VSO Life Skills position. It is intended that this role will have responsibility for delivering budgeting and cooking classes to prisoners living in self-care. This Office strongly supports this positive initiative, and hopes that it will include improved budgeting systems and inspections of self-care unit kitchens to ensure that food safety and hygiene protocols are met.

ENVIRONMENTAL HEALTH

- 4.26 In early July 2012 Bandyup’s population reached 300 for the first time, prompting the Inspector to again visit the prison. During the visit, a number of concerns were observed and raised by prisoners and prison staff in relation to food and food handling, cell temperature and ventilation, access to blankets and clothing, cleaning deficits, women sleeping on the floor, mattress condition, and prisoner illness.

102 DCS, *Prison Officer Job Description Form (JDF) – Generic* (May 2008).

103 OICS, *Report of an Announced Inspection of Boronia Pre-release Centre for Women*, Report No. 79 (July 2012); OICS, *Report of an Announced Inspection of Bunbury Regional Prison*, Report No. 75 (December 2011).

- 4.27 Immediately afterwards, the Inspector engaged an Infection Prevention Consultant to conduct an environmental health-focused visit. The scope of the visit was to review concerns around food plating procedures, unit cleanliness, prisoner hygiene and ill health. This resulted in a report which included a number of recommendations, and was provided to Bandyup management.
- 4.28 The same consultant was invited to return as part of the 2014 inspection and again, her report will be provided to Bandyup's management. While she found some notable improvements in food safety, environmental cleaning and infection control programs, some fundamental issues remained. Most of these resulted from overcrowding, under-resourcing, and poorly maintained infrastructure. These factors hinder Bandyup's ability to offer a healthy environment that ensures dignity and respect.¹⁰⁴

Kitchens

- 4.29 Bandyup's production kitchen provides meals for prisoners and staff. Required food safety programs and documentation were in place and up to date. Prisoners are required to take part in food safety and hygiene training upon arrival at Bandyup, but follow-up training for mid to long-term stay prisoners was not available.
- 4.30 Kitchen production was supervised by three Chef Instructors who monitor the health, personal hygiene and food hygiene of the kitchen's food handlers.¹⁰⁵ The Chef Instructors advised that the growing population was putting serious strain on the kitchen, and that if it continued to rise an additional cool room would be required. The recent closure of the Riverbank Centre had created a windfall for Bandyup by way of two blast chillers,¹⁰⁶ but these could not be installed without first upgrading the power supply.



A prisoner prepares single portion meals

104 World Health Organisation (WHO), *Health in prisons: A WHO guide to the essentials in prison health* (2007).
105 This does not extend to prisoners in self-care who prepare communal meals: see [4.23]–[4.25].
106 The Riverbank Centre was a facility owned by the Department which was closed in 2013. It had been through several incarnations including being a juvenile detention centre, a rehabilitation centre and medium-security male prison.

- 4.31 Unit 1 A-Wing is one of the most decrepit sections of the prison,¹⁰⁷ and includes only two showers for the 30 or more women who reside there. A number of prisoners working in the kitchen resided in Unit 1 A-Wing, and reported that due to the rush for showers, they were not always able to shower before attending work in the kitchen. Although this is not included as a formal recommendation in this report it will form part of the consultant's report to the prison and it is a matter that must be addressed.
- 4.32 The kitchen is among the oldest sections of the prison and some infrastructure deficits were obvious. Plans had been under way to replace the ceiling but progress had stalled due to budget constraints. As a result the replacement was only partially completed, and had been downgraded to a 'patch and repair' job. This should be addressed as a matter of priority.

Environmental Hygiene Program

- 4.33 A prison environmental cleaning program is run by the Cleaning Officer and a team of prisoners, while responsibility for the cleaning of individual accommodation units lies with designated prisoners from each unit. Members of the cleaning team are supervised and trained by the Cleaning Officer, and have specialised equipment available to use, but the 'unit cleaners' have neither. Furthermore, the roles and responsibilities of each group were not clearly defined, and neither group was cleaning to a monitored schedule.
- 4.34 Unsurprisingly, cleaning deficits and hygiene concerns were all too apparent throughout the prison. The poor condition of facilities further compromised minimum standards of cleanliness.
- 4.35 Prisoners in self-care units, including the nursery houses, were responsible for their own cleaning. However, no standardised cleaning schedules were evident for the designated cleaners to sign off on completion of cleaning tasks. Furthermore no formalised training in cleaning standards was available, nor was there any auditing of standards by the Cleaning Officer.
- 4.36 Across the prison, cleaning equipment such as brooms and mop heads were often old and worn, incapable of producing sufficient cleanliness. The range of cleaning products and chemicals available in prisons is limited for security reasons, and unfortunately this includes disinfectant products. Instead the women in the units rely on all-purpose cleaner, bathroom cleaner, and glass cleaner. Numerous concerns were raised regarding the inability of the women to keep their shared amenities adequately clean, and there were concerns regarding possible outbreaks of infections or disease. Steps should be taken to ensure routine monitoring and replacement of cleaning equipment.

107 See Chapter 3.



Unit 1: Toilet-roll dispensers in the yard

Maintenance/Environmental Controls Program

- 4.37 An internal maintenance program is run by the Maintenance Officer, who employs two prisoners as assistants. Requests for maintenance work around the prison are assessed, prioritised and actioned, provided the Maintenance Officer has the requisite skills and tools. The prison's maintenance program is therefore reactive rather than preventive. It is insufficient to keep up with the challenges of an ageing facility.
- 4.38 When a maintenance issue cannot be addressed locally it is referred to the external service contractor Programmed Facility Management (PFM). In this respect, women's prisons are limited in their ability to locally address maintenance concerns, as typically there are far fewer women in custody with applicable trades than in the male prisons.

Recommendation 14

Resource and implement a proactive, preventive maintenance program.

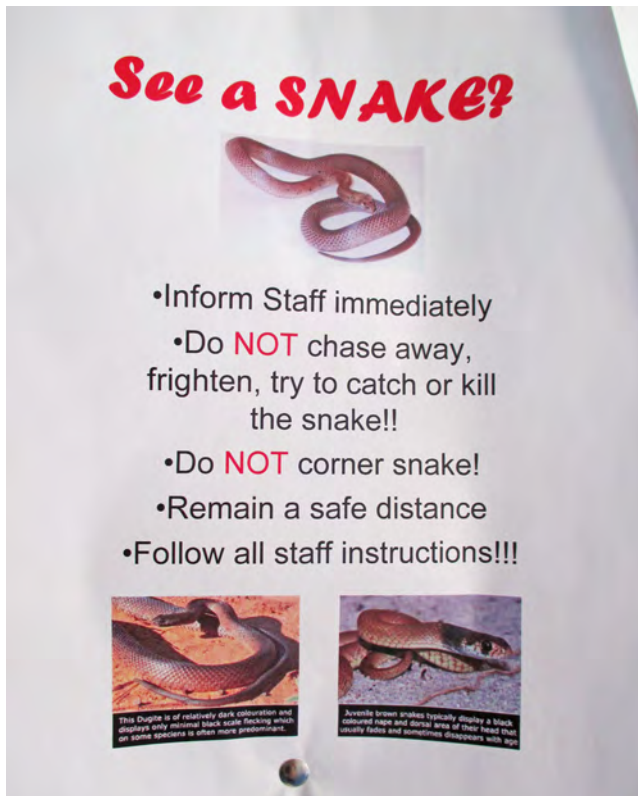


Unit 1: Aged and poorly maintained outdoor furniture

- 4.39 Documented, routine maintenance programs are carried out by external service contractors. These include Bandyup's heating, ventilation and air-conditioning systems, water systems, treatment plants, laundry equipment, kitchen equipment and refrigeration, and pest control.
- 4.40 While flies and spiders were evident throughout the facility, the primary pest concerns were ants and snakes. In the first quarter of 2014, snake sightings at the prison had been common.¹⁰⁸ Dugites had been sighted across prison grounds, and even in prisoners' cells while they were locked in.¹⁰⁹ Fortunately, three staff members had been trained to catch and relocate snakes, and the prison had the appropriate equipment on hand. The officers' skill and can-do attitude were admirable.

108 The inspection took place towards the end of summer.

109 These occurrences took place in Unit 1, and are undoubtedly connected to the very poor state of the unit's infrastructure.



Snake sightings are common in the summer months

Mattresses, Linen and Laundering

- 4.41 The 2012 visit by the Infection Prevention Consultant took place during the winter months. At that time, the women who were required to sleep on mattresses on the floor noted that condensation build-up during the night, and mattresses were frequently dampened by mopping the floors, making them cold and uncomfortable. At that time a program was under way to cover all new mattresses with an impermeable plastic surface.
- 4.42 By the summer of 2014 over 200 of Bandyup's mattresses had been covered. Prisoners who worked as unit cleaners were responsible for cleaning covered mattresses in-between allocations. Regrettably, however, the inspection team observed numerous stained and uncovered mattresses still in use. According to staff, some prisoners had also tried to remove the covers because they were uncomfortable and caused condensation in the (now very hot) shared cells.
- 4.43 Women arriving at Bandyup are issued with clothes on arrival, and shoes the following morning.¹¹⁰ All shoes are recycled and laundered between owners, and are replaced after their third wash. All sentenced prisoners are allocated their own 'full kit' of clothing which is issued with the prisoner's name and an allocated laundry number. Towels and sheets are not allocated individually, however, and are simply redistributed throughout the population.

110 The orientation process is covered in more detail in Chapter 7.

- 4.44 The laundry is responsible for cleaning the majority of prisoners' clothing, linen and towels.¹¹¹ The laundry includes three industrial machines and dryers, and one commercial washing machine. At the time of the inspection one industrial washer was not operational. The laundry aims for same day service, but is not always able to maintain this due to the increasing population and subsequent workload. The return of clean towels and underwear is prioritised, and a tracking system accounts for each item of prisoner clothing.
- 4.45 The Bandyup laundry is classified as an institutional laundry, and as such is required to operate in accordance with industry standards.¹¹² However, due to its layout, aged infrastructure, and increased workload, it does not meet required standards. The work environment was very small and cramped, and there were limited floor and storage areas. The space available was inadequate to prevent clean items from being contaminated by soiled items, and there was inadequate ventilation to minimise contamination in the airflow.
- 4.46 Bandyup's management were considering plans to shuffle a number of prison industries, in attempt to open up unused space, and to make better use of available infrastructure. The plan included moving the laundry from its present position to an underutilised section of the industries warehouse. However, this plan was not funded and there was no timeline for implementation. Again, the Infection Prevention Consultant is making specific recommendations to the prison on this matter.¹¹³

Recommendation 15

Bandyup should develop a response to the recommendations contained in the Infection Prevention Consultant's report and implement an appropriate action plan.

SUPPORT SERVICES

- 4.47 Prison life is challenging and confronting for many prisoners, and appropriate support services are vital. A number of support services are in place, including Peer Support, the Aboriginal Visitors Scheme (AVS),¹¹⁴ and religious counsellors. At Bandyup all of these services were functioning well despite the stressful environment.

Peer Support

- 4.48 The Peer Support system was managed by two Peer Support Officers (PSOs) and a team of peer support prisoners. The main function of the PSOs and peer support team is to identify and support vulnerable prisoners, particularly those who may be at risk of self-harm or suicide.

111 Some units and houses have their own laundry facilities, however the prisoners are often limited as to which items they can be used to clean. For example Unit 2 prisoners cannot use their laundry to wash their uniforms.

112 Standards Australia, *Laundry Practice AS/NZS 4146:2000* (2000).

113 The Infection Prevention Consultant's report was delivered to the Department for comment. The report contained 43 separate recommendations, all of which were supported by the Department (five were supported in principle). This Office will continue to monitor the Department's progress against these recommendations.

114 The AVS are discussed in Chapter 8 of this report.

- 4.49 Prisoners can access a PSO or a peer support team member in a number of ways. One peer support prisoner resides in the orientation block, where all new arrivals are initially placed, and briefs them on prison routine, options, and protocols. Women can also request to speak directly to a PSO, or they can approach a peer support team member as typically there are at least two per unit. Furthermore, any prisoner who is placed on the At Risk Management System (ARMS) is automatically referred to the PSOs, as well as the Prisoner Counselling Service (PCS).
- 4.50 Fourteen peer support positions are available for prisoners, of which six are paid positions, and the rest are voluntary. At the time of the inspection, only four of the six employed positions were filled. The team was informed that Bandyup experienced a high turnover of peer support prisoners because the role requires stable and settled prisoners, and these are the women who are typically selected for transfer out of the prison, to Greenough or Boronia.
- 4.51 Although the primary mandate of the peer support system is to identify and support prisoners who may be at risk of self-harm, understanding of the team's role differed across the prison. While the PSOs were clear on their purpose, peer support prisoners felt their role was broader, and included assisting prisoners with any issues they were having. Their perception was no doubt linked to the fact that staff across the prison appeared to rely on peer support prisoners to assist women with everything from emotional support, to helping those with literacy issues to fill in forms.
- 4.52 While this type of assistance is appreciated by those who receive it, it does suggest that staff rely on peer support prisoners to perform tasks that are not within the scope of their role.

Religious and Spiritual Needs

- 4.53 Bandyup has a strong chaplaincy service, with at least one chaplain or religious representative at the prison daily. They have free movement around the prison and offer pastoral support to prisoners as required. All religious services are facilitated by the Coordinating Chaplain, who also attends the Superintendent's weekly prison briefings. Regular visits are made by representatives from the Prison Fellowship, Anglican, Catholic, Uniting and Baptist Churches, while Jehovah's Witnesses and Buddhist nuns also attend on request.
- 4.54 One of the Uniting Church Chaplains was Aboriginal and provided valued spiritual and pastoral support to Aboriginal women. She also provided women with the much needed opportunity to discuss issues related to grief and loss, an area which was otherwise underserved.
- 4.55 Bandyup does not have a chapel, although a room adjacent to the Recreation Hall, referred to as 'the Sanctuary', serves as multi-faith worship facility. The Sanctuary is small, ill-fit for its purpose, and sometimes unable to properly accommodate the number of attendees. The Coordinating Chaplain was negotiating for the use of a larger room in the education precinct on Sundays, and this Office would hope such an arrangement is approved.
- 4.56 The Chaplains reported feeling respected and included by prison management. However, there were indications that the religious and spiritual needs of prisoners were not always supported and respected. Pre-inspection survey results indicated that of the responding prisoners who considered themselves religious, 36 per cent felt unable to practice their religion. Survey results indicated a far greater tolerance and provision for Christian based religions than there was of Buddhism or Islam.

Chapter 5

STABILITY AND SECURITY

RELATIONAL (DYNAMIC) SECURITY

- 5.1 Security in a custodial facility comprises three related elements that must be balanced:
- **Physical security** – integrated physical structures and mechanical and electronic systems;
 - **Procedural (or process) security** – effective systems and processes to ensure the coherent, consistent and coordinated application of measures such as controlling movements around the site, searching of people in custody and screening of visitors; and
 - **Relational (or dynamic) security** – a busy regime and a positive, professional engagement between staff and people in custody so that staff can understand the issues and garner good intelligence.
- 5.2 Of the three elements relational security is the least tangible, but it is the fundamental linchpin of safe and stable custodial facilities.¹¹⁵ Our report into the January 2013 riot at Banksia Hill Detention Centre also emphasised that in order to strike the balance between physical, process and relational security, other fundamental elements must also be in place, including a clear sense of direction and purpose and a sharp focus on safety.¹¹⁶ Similarly, in his landmark 1991 inquiry into prison riots in the United Kingdom, Lord Woolf argued that stability in a custodial environment comes from achieving a balance between order, control and justice.¹¹⁷
- 5.3 Bandyup has been under pressure on all of these fronts and the problems have been compounded by its infrastructure deficits, levels of overcrowding, and the fact that it must manage such a complex prisoner group.
- 5.4 One of the key findings of this inspection was a disturbing level of bad language and poor behaviour by some prisoners. Examples include bullying over canteen spends,¹¹⁸ poor behaviour at meal dish-ups,¹¹⁹ and too much bad language and aggressive language.
- 5.5 The degree of apparent ‘acceptance’ of poor behaviour and bad language by staff was also very concerning. Most staff said these were the least of their problems, and that it was just part of life at the prison. Many also acknowledged that some staff would also use inappropriate language back to prisoners.¹²⁰
- 5.6 To some degree the situation was reflective of the pressures Bandyup has faced, but poor behaviours can and should be tackled. The point is that ‘little things’ do matter, especially in a closed environment, and if they can be addressed, this can have positive knock-on effects across the prison. On a number of occasions during the inspection, when team members asked prisoners to moderate their language, tone or demeanour, they did so without push-back and usually with an apology.

115 OICS, *Report of the Directed Review into an Incident at Banksia Hill Detention Centre on 20 January 2013*, Report No. 85 (July 2013), Chapter 4. See also OICS, *Code of Inspection Standards for Adult Custodial Services Standards* (April 2007) 17.

116 Ibid.

117 Woolf LJ, *Prison Disturbances April 1990: Report of an Inquiry*, HMSO, London (1991) [1.149].

118 See [6.67]–[6.73].

119 See [4.20]–[4.21].

120 The Office acknowledges that the Superintendent is currently dealing with these issues.

STABILITY AND SECURITY

- 5.7 These issues should not be tackled by suddenly adopting a new ‘heavy handed’ approach based on laying prison charges for previously tolerated behaviours. A more fundamental and more productive reappraisal is needed with a holistic review of dynamic/relational security, including a focus on respectful relations and interactions.

Recommendation 16

Improve relational/dynamic security at Bandyup, including a renewed emphasis on respectful relations and positive interactions.

STAFFING

- 5.8 In the three years since the last inspection, levels of security staff have increased, thanks to the addition of a second Senior Officer Security position. As a result, Bandyup is now funded for a total security team of four: a Security Manager, two Senior Officers, and one Intelligence Collator.
- 5.9 This should allow for sufficient security staff to be present at the prison seven days a week. In the week before the inspection, however, Bandyup’s Intelligence Collator was seconded to head office without replacement for a period of six weeks.¹²¹ and the workload of this position fell to the remainder of the team. This significantly impacted on their workloads and ability to conduct regular rounds of the site. This situation was unsustainable and unacceptable.

Recommendation 17

The Department should ensure that when key security staff are deployed out of prisons, the positions are backfilled by appropriate staff.

CONTROL ROOM

- 5.10 The control room of a prison is the nerve centre of security technology, as all personal alarms, emergency alarms, video surveillance, and cell calls are diverted to this location. The Bandyup control room is staffed by only one person, and he or she is responsible for monitoring all surveillance and alarms. The officer is required to observe more than 10 monitors simultaneously, displaying the feed from 30 video cameras around the prison. As the cameras outnumber available monitors, only certain camera views can be watched at any given time.
- 5.11 It is vital that staff in this role are alert, vigilant and able to concentrate. For this reason, during day shifts, officers rotate through the control room every three hours. However, during the night shift, one officer is posted in the control room for the duration of the 12-hour shift. The purpose of this role is to monitor the safety and security of the prison, and this Office believes it is unreasonable to expect one individual to maintain the requisite alertness and vigilance for 12 hours without a break. There are compelling arguments for night shift officers to rotate through this position, as is the practice for day shifts.

121 The period of secondment was however extended to eight weeks.

- 5.12 The inspection team was also concerned to find, during a day-time visit to the control room, an open novel in front of the officer and a television turned on. Furthermore, to have looked at the television screen, officers would have to turn away from the monitors and screens they were supposed to be observing. Unfortunately, it seemed clear that this was not a one-off event but accepted practice: the gatehouse Senior Officer has visibility into the control room at all times and the officers who accompanied the inspection team did not seek to address this behaviour.

Recommendation 18

Improve control room processes and practices by rotating night shift officers through the control room position and ensure that staff in the control room are at all times fully focused on the task.

STAFF SAFETY: INACCURATE DURESS ALARMS

- 5.13 Personal duress alarms are required to be worn by all prison personnel and service providers. In the event of a staff member feeling threatened, activation of the alarm sends a triangulated signal to identify the individual's location. This enables responding staff to minimise any time lost when responding to what may be an emergency situation.
- 5.14 Staff reported that the personal alarm system was reasonably accurate when set off in a unit or confined area, but less so in more open areas such as recreation. This had sometimes resulted in staff searching surrounding areas before finding actual incidents. The risks are obvious, and were affirmed during the inspection when a staff member in the medical centre activated their personal alarm. The location was incorrectly identified, and responding staff arrived at the wrong place.
- 5.15 In a prison with Bandyup's complexity, this level of risk to staff and prisoner safety is unacceptable. The report of an inspection of Acacia Prison conducted in late 2013 recommended that the Department ensure that it is standard practice for all prisons to conduct regular audits of the operation and accuracy of personal alarms, and to address any deficiencies identified.¹²² As the Department supported this recommendation, it is not repeated here. But the issue must be addressed.

CONTRABAND DETECTION

- 5.16 Shortly after the inspection, details of the West Australian Police's Operation Ulysses were made public.¹²³ The findings of this operation exposed the high levels of drugs that were being smuggled into prisons, sometimes by staff. While Bandyup was not specifically named in these reports, team members were informed by security staff that significant quantities of drugs were coming into the prison.

122 OICS, *Report of an Announced Inspection of Acacia Prison*, Report No. 90 (July 2014).

123 The West Australian, *Jail drug dealers and rorts exposed* (8 April 2014). <<https://au.news.yahoo.com/thewest/latest/a/22457045/jail-drug-dealers-rorts-exposed/>>

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- 5.17 The prison has a number of systems in place to prevent and detect the smuggling of contraband. All staff and visitors are required to pass through a metal detector and be 'wanded' in the event of an alarm sounding. Visitors and staff also are required to submit their bags and equipment for scanning and X-ray. Staff monitor for any abnormalities, unidentifiable objects or organic matter. However, the inspection team was informed that staff rostered on this position had not necessarily received appropriate training, and were sometimes only taught by the previous user.
- 5.18 Drug detection is further enhanced by the drug detection dog unit (DDU), of sniffer dogs and their handlers, who are routinely used both at the gatehouse for arriving staff and visitors and throughout the prison itself. Indications by the DDU can identify individuals who have recently used drugs or are carrying drugs, either internally or externally.
- 5.19 Figures supplied by the Department showed that between February 2013 and March 2014, there were 199 indications by the DDU of visitors to Bandyup.¹²⁴ Eighty-eight per cent of these visitors were subsequently pat-searched, and seven per cent were strip searched.¹²⁵ Once a visitor has been indicated by the DDU they are rarely allowed to have a contact visit, regardless of the outcome of the subsequent search.¹²⁶
- 5.20 A further problem was that, due to the working hours of the dog handlers, some of the visits sessions were not covered by the DDU. For as long as prisons rely on dogs for contraband detection, the Department needs to ensure adequate coverage. At Bandyup, both staff and prisoners could name times when the dogs were generally absent.
- 5.21 Serious questions must also be asked about the effectiveness of current processes. In the 12 months prior to the inspection, Bandyup had conducted 1,655 searches of visitors.¹²⁷ However, out of all of these searches only one returned a positive finding of drugs, and nine other searches turned up other contraband including a mobile telephone, USB memory devices, and money. This gives a success rate of only 0.6 per cent – an extremely low return rate for the number of searches conducted. Security staff indicated that they had good reason to believe that drugs were being smuggled internally into the prison by both visitors and prisoners, and in most cases this can occur without the drugs being detected.
- 5.22 This evidence suggests that the Department needs to broaden the methods it uses to detect contraband. Non-invasive technology, as used in Australian airports, is capable of detecting contraband and drugs being carried internally without the need for a strip search or physical contact. While such technology is expensive, it is likely to be both prudent and cost-effective.

124 Dyer D, DCS, *DDU Search Visitors (Bandyup 01.02.2013 – 28.02.2014)*, email received 17 April 2014.

125 Three per cent refused to be searched and one per cent were not searched at the discretion of the prison.

126 As a result of the indication by the dogs there were only three occasions in which visitors were permitted to undertake a contact visit.

127 Of these searches, 1570 searches were pat down searches, 59 were carried out by the DDU, 23 were strip searches, and one was recorded as search by scanner.

Recommendation 19

For as long as drug detection dogs are used, the Department should ensure that they are available to cover all high-risk periods in prisons. The Department should also actively pursue options based on non-invasive body screening technology.

PERIMETER FENCE AND RAZOR WIRE

- 5.23 The inspection team was informed that the Department had recently proposed an upgrade to the exterior fence line at Bandyup but that, due to lack of funds, this had been put on hold. The prison is currently surrounded by a high security external fence, with a single roll of razor wire positioned at the top and two rolls at the base.
- 5.24 Razor wire provides an additional physical deterrent but its sharp barbs also serve to rip into and trap clothing or flesh. The past two inspections of Bandyup found that the prison did not have an adequate extraction and response plan in the event of a person getting caught in razor wire. Yet again, this inspection found that none of Bandyup's officers had been adequately trained in retrieving a person caught in the razor wire either at height or at ground level.
- 5.25 In the event of a person being caught in razor wire at height, the prison would be required to contact the Department of Fire and Emergency Services (DFES) to attend with the necessary extraction equipment. However, a memorandum of understanding (MoU) between Bandyup and DFES was still being developed. Therefore while DFES would supply the extraction equipment, there were no clear guidelines to determine who would be responsible for the extraction itself.
- 5.26 This is not just an issue at Bandyup and Casuarina. Razor wire is in use at many Western Australian prisons and the issue has been raised by this Office on numerous occasions.¹²⁸ It is incumbent on the Department to develop adequate safe and consistent extraction plans at all sites where razor wire is still in use. The recent report of an inspection of Acacia Prison recommended that the Department train staff in razor wire retrieval, and establish MoUs with relevant outside agencies regarding equipment and support.¹²⁹ The Department supported this recommendation. It will not be repeated but action is long overdue.

128 OICS, *Report of an Announced Inspection of Eastern Goldfields Regional Prison*, Report No. 72 (June 2011); OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 73 (August 2011); OICS, *Report of an Announced Inspection of Acacia Prison*, Report No. 90 (June 2014).

129 OICS, *Report of an Announced Inspection of Acacia Prison*, Report No. 90 (June 2014).

Chapter 6

THE BANDYUP DAY AND THE GOAL OF A WOMEN-CENTRED PHILOSOPHY

- 6.1 Bandyup aims to operate a structured day model that is unique among Western Australian prisons. The model came about as part of a change management process at the prison that began around 2002.¹³⁰ The aim is to encourage women to demonstrate self-determination by developing their own weekly activity plans, and to strive for personal development in a range of areas. This chapter will discuss the findings of the 2014 inspection in relation to various aspects of the structured day, its stated principles, and the daily routine at Bandyup, including employment, activities, recreation, canteen spends, and visits.

THE STRUCTURED DAY: MODEL, RATIONALE AND REVIEW

- 6.2 The structured day is a five-day-a-week program, the content of which can largely be self-determined by the prisoners. Each day is divided into two blocks, from 9.00 am to 11.30 am and from 1.00 pm to 3.30 pm, providing nine blocks (or sessions) each week.¹³¹ These sessions can be made up of work, education, offender treatment programs and community/recreation programs, or a combination of all of these. The choices a prisoner makes as to how to organise her nine sessions each week determines the level of gratuity payment she receives.
- 6.3 The structured day model is further reflected in the prison gratuity system, which rewards women's involvement based on the range of activities they choose to engage in. The amount of pay each woman receives therefore will depend on her participation in a combination of work, education, offender programs and recreational programs, rather than simply by securing a particular employment position.
- 6.4 The following principles were central to the philosophy of the structured day:
- Women must be engaged in meaningful daily activities that contribute to their holistic wellbeing and rehabilitation;
 - Women must be presented with opportunities in exercising personal responsibility in decision-making that address their individual needs;
 - Within the structured day timetable, provision must be made for women to address their physical, psychological and mental health needs via health appointments and interventions; and
 - Within the structured day timetable, provision must be made to facilitate visits for women so that their links with the community, family and children can be nurtured and enhanced.¹³²
- 6.5 The structured day was introduced at Bandyup in January 2005.¹³³ At the conclusion of an inspection later that year, the then Inspector said:
- Suddenly, there is some real order and purpose in the prison regime. The structured day feeds into everything else in the prison – the sense of safety, the quality of interracial relations, the morale of both staff and prisoners.¹³⁴

130 OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 13 (June 2002).

131 The prisoners are locked down on Friday mornings to allow for regular staff training sessions.

132 Bandyup Women's Prison Change Management Team, *Delivering the Bandyup Philosophy of Imprisonment through a Structured Day* (February 2005).

133 OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 36 (June 2006).

134 Harding R, *Exit Debrief: Bandyup Women's Prison Inspection 22 May to 26 May 2005* (May 2005) 4.

- 6.6 Over time however, this sense of unity and hopefulness seems to have become all but lost. During the inspection, Bandyup’s new management team advised that the structured day model was under review. The impetus for change included the following:
- Managers of industries at Bandyup are unable to control which or how many prisoners attend their workplaces from day to day; and
 - The fact that the women are able to determine their level of activity means that they can, to some degree, determine their own gratuity levels, making it difficult for the prison to control its budget.
- 6.7 It is time for a review,¹³⁵ but the principle of the structured day should not be lost. It was a model designed to reflect the fact that women are different from men, and to empower disempowered women by affording them some degree of self-determination. The concerns that underpin the review are, to some degree, a consequence of this model. It is vital that any review of the structured day maintains and embodies the Department’s commitment to a women-centred philosophy.

Recommendation 20

In reviewing the ‘structured day’ at Bandyup, the Department should ensure that the principles of a women-centred philosophy are reflected in policy and firmed up in practice.

EMPLOYMENT

- 6.8 Despite the substantial increase in population at Bandyup in the time since the first inspection of in 2002 (when the population was 113),¹³⁶ there has been little expansion of industries. While small pockets of employment can be found in areas such as residential unit cleaning, food service and peer support, prison industries remain a primary employer. Bandyup has the following industries:
- Textiles – making garments for female prisoners statewide, and other items;
 - Laundry – providing laundry services to prisoners;
 - Kitchen – preparing meals for prisoners, staff and prison visitors;
 - Gardens – gardening across the prison site;
 - Cleaning – cleaning across the prison (excluding accommodation units);
 - Skills and Maintenance – simple routine maintenance across the prison site, and limited furniture making;
 - Recreation – providing assistance to Vocational Support Officers who manage prisoner recreation activities; and
 - Canteen – serving customers in the canteen, packing and preparing customer orders.

¹³⁵ See [6.10]–[6.17].

¹³⁶ OICS, *Report of an Announced Inspection of Bandyup Women’s Prison*, Report No. 13 (June 2002) 10.

- 6.9 The Department is currently conducting a Statewide review of prison industries. As this process was ongoing at the time of writing, no decisions had been finalised regarding the appropriateness and placement of industries at Bandyup. Bandyup management were nonetheless planning to fill a number of vacant VSO positions,¹³⁷ and were actively exploring opportunities to make better use of the workshops and to create additional employment positions for prisoners. While strategic decisions about the extent and nature of prisoner employment at Bandyup need to be informed by the Statewide review, this Office strongly supports management's efforts to improve industrial workplace options. There are opportunities to better use the limited available space, and to provide positive skill development opportunities.

Recommendation 21

Bandyup management should continue to explore improved employment opportunities and, given the lack of investment in women's imprisonment over recent years, the Department should prioritise Bandyup's needs.



This and following page: Lack of space for prison industries has resulted in crowded work areas and a lack of appropriate storage

137 This plan however was affected by the State Government's announcement to freeze all recruitment until the 2014/2015 financial year.



GRATUITIES

- 6.10 Under Bandyup’s structured day model, the amount of gratuities earned by prisoners is dependent on the level and variety of their engagement. This encourages prisoners to participate in a combination of work, education, offender programs and recreational activities. Prisoners who undertake only one activity will generally receive lower payment than those who participate in a combination of activities. This model means that a prisoner’s employment and gratuities are not exclusively linked.¹³⁸
- 6.11 Unlike other public prisons Bandyup pays gratuities on a weekly basis, which are determined by attendance in activities during the previous week. As a result, its prisoner employment and gratuity data are recorded by the prison in a non-standard way. This means that basic information, such as where a prisoner is typically employed, what recreational programs they participate in, and how much they receive in gratuities, is not easily reportable. In fact, despite multiple requests for aggregate employment and gratuity data, and attempts by relevant staff to retrieve the data, it was not possible to obtain this information in the course of the inspection.
- 6.12 Despite the prison’s inability to provide detailed information on prisoner employment, the Department did supply a general report on prisoner employment levels prior to the inspection. This claimed that from October 2012 to September 2013, between 71.2 per cent and 82.5 per cent of prisoners at Bandyup were employed in some capacity. However, the structured day encourages prisoners to work part-time (eight or less half-day shifts

138 The weekly payment system is more in keeping with community practices, requiring people to manage their resources across the week.

per week) and to engage in either education or recreation based activities. This means that a single, full-time position could be filled by more than one prisoner, and this could be distorting employment rates. Certainly, many prisoners reported that it was hard to get a job, and VSOs in the textiles and kitchen industries reported considerable waiting lists for employment.

- 6.13 Current recording practices therefore limit Bandyup's ability to monitor, analyse, and manage prisoner employment. It should ensure it receives and reviews regular custom reports outlining aggregate data on prisoners' participation in employment, education, recreational and offender programs. This data should be used to identify and take action to address issues such as unemployment and equality in employment and other activities.
- 6.14 As noted earlier, the structured day is under review. The model is problematic for prison industries, because the VSOs who run each industry cannot control the rosters of their workers, or size of their workforce. It is the prisoners, not the VSOs, who influence their rostering and schedules and on any given shift, a prison industry may not have enough (or appropriate) prisoners to run the workspace effectively. Because the system allows prisoners to influence their own gratuity levels, it is also difficult for the prison to control its gratuities budget. Indeed, the prison had been significantly exceeding its monthly gratuities budget of approximately \$45,000 by between \$10,000 and \$30,000 because so many prisoners earned high gratuities.¹³⁹
- 6.15 While these concerns are valid, it is vital that, as recommended earlier, the Department continues to take into account the original purpose of its structured day as a means to empower a highly disempowered group of women. A move back to the 'male-standard' work-for-pay model, would result in further eroding the opportunities and incentives for women to make choices and demonstrate self-determination.

EDUCATION

- 6.16 The education centre at Bandyup operates within the framework of the structured day, and is open from 8.30 am to 3.30 pm. This has enabled the centre to provide greater sessional delivery and longer class hours than most other prison education centres.
- 6.17 Since the last inspection participation rates in education have dropped from an average of 48 per cent of Bandyup's population to 40 per cent.¹⁴⁰ While participant numbers have remained stable, this decrease is rather a reflection of the increase in Bandyup's population.
- 6.18 Positively, this inspection found that many issues identified in 2011 have been addressed. A number of vacant positions in the staff group were filled, including two Prison Education Coordinators, a well-qualified Aboriginal Education Worker, and a full-time clerical assistant. Facilities and equipment have been improved, with the addition of an electronic whiteboard, the installation of air-conditioning, and the acquisition of more computers.

139 DCS, *Bandyup Budget Report* (January 2014).

140 OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 73 (August 2011) 44.

- 6.19 Nevertheless, the infrastructure and space available for education and training is increasingly inadequate to service growing numbers. Staff have addressed the lack of room intelligently, with little complaint, and to the best of their ability. The removal of study cubicles has made one of the education rooms more open and usable, rooms are scheduled to maximise the use of facilities, and activities have been juggled in order to squeeze in as many as possible. However, the total space is too small.
- 6.20 The education centre facilitated a broad range of education options, from basic literacy and numeracy to external postgraduate tertiary study. Courses available include:
- Certificate I in Entry to General Education;
 - Certificate I in Sport and Recreation;
 - Certificate I in New Opportunities for Women (NOW);
 - Certificate I in Gaining Access to Training and Education (GATE);
 - Certificate I in Business;
 - Certificates I – III in General Education for Adults (CGEA);
 - Certificates I – III in Visual Art; and
 - Certificate III Community Services.
- 6.21 The centre also delivered components of Certificate II in Business, and Certificate I in Information, Digital Media and Technology. Traineeships were active in connection with a number of prison industries including Laundry, Horticulture, Hospitality, and Asset Maintenance. On-the-job training was available in Clothing Production, Horticulture, and Furniture Making.
- 6.22 Some popular short courses were run regularly through education, including the newly introduced Hairdressing Assistant course, White Card, Barista, and first aid training. However, demand was outstripping the centre's ability to deliver courses. At the time of the inspection, 118 women were waitlisted for White Card training, 30 for the hairdressing course, and 90 for first aid. The centre prioritises women with early release dates for placement on short courses, meaning that women with long sentences may have to wait a considerable length of time before they are eligible.
- 6.23 Education staff also reported that there was a greater demand for full-time education than they were capable of offering, as the centre can only offer five full-time education positions. The centre prioritises part-time study over full-time in order to give a greater proportion of women access to some degree of education. While this complements the philosophy of the structured day, it is disappointing that demand for full-time study is so poorly met.
- 6.24 Education staff also reported that prisoners in the 18–24 year old bracket were not well engaged with the centre. In 2013 federal funding was received to deliver a forklift training course specifically for women in this age range, and in September 2013 a course was completed. At the time of the inspection a second course was being planned, and 49 women had applied to participate. However, much of the demand had come from ineligible older women. This degree of interest, however, indicates strong demand and the Office encourages the Department to pursue relevant funding.

- 6.25 In summary, the majority of women at Bandyup come from backgrounds of disadvantage, disempowerment, and poor education. The fact that they are missing out on opportunities to connect with education and job training due to insufficient space and resources is unacceptable, and reduces their chances of community reintegration. The majority of female prisoners spend their entire sentence at Bandyup, and the opportunities available to them compare poorly with male prisons. Further investment in education at Bandyup should be prioritised.

Recommendation 22

In order to maximise opportunities for reducing recidivism, enhance the facilities and increase the resources at Bandyup for part-time and full-time education and training.

TRIALLING ‘THE SOUND WAY’

- 6.26 The Department’s Education and Vocational Training Unit (EVTU) has been promoting pilots of a new literacy program titled *The Sound Way to Spelling Writing and Reading* (The Sound Way). The program has previously been used at Roebourne Regional Prison and Casuarina, and EVTU is planning a roll out of the program out to all prisons. In 2013, Bandyup ran two small trial groups of the course, and a further two groups were started in February 2014. However, the initial trials resulted in many students dropping out of the course midway, and low rates of successful completion.¹⁴¹
- 6.27 Some aspects of The Sound Way’s delivery appear to be inappropriate for use with female Aboriginal students in a prison setting. The course is very structured and fast paced. A set of DVDs and workbooks are mandated as the sole delivery point for program, and teachers are not permitted to introduce their own modifications. The DVD lessons are delivered by an authoritative, older white male whom students are expected to watch constantly and respond to with vocal drills. However, for many Aboriginal women, it is culturally inappropriate to stare into the face of an older male, and this expectation could cause significant discomfort.
- 6.28 The course could be more appropriate for use with other groups of women within the prison (for example foreign nationals) however, the current funding for the course makes this impossible. The book fees for pilot were funded by Abstudy, meaning that only Aboriginal students were permitted to be part of the trials.
- 6.29 Given the very poor results of the initial trials of The Sound Way at Bandyup, the Department should assess its suitability for Aboriginal women before using it further for female prisoners.

141 The first course commenced with nine students, four of whom completed the program successfully. The second course ran with seven students, and only one successful completion.

RECREATION

Facilities

- 6.30 As Bandyup's structured day rewards prisoners for choosing to participate in a range of activities, recreation is intended to be an integral part of daily life. Recreation and activities at Bandyup centre around the 'Community Hall', which includes the canteen, an arts and crafts room, the library, the religious worship room or 'Sanctuary', and hall. The hall includes a mezzanine level gymnasium with seven exercise machines. The gymnasium and the arts and crafts room are frequently used for structured recreational activities, and the library is open during recreation time each day.



Outdoor recreation area and close up of the poorly kept running track

6.31 Bandyup does not have an oval. Its main outdoor area is a small grassed area adjacent to the Community Hall, which is called ‘Jacaranda Park’. The ‘park’ is a small and incorporates a beach volleyball court that is barely used, a disused fire-pit, and an undercover smoking area. A small track surrounds the grassed area, but is in extremely poor condition, its surface rutted, slippery and overgrown with weeds. Inspection team members took only 90 seconds to complete a lap walking a regular pace. The lack of an oval is atypical among Western Australian prisons.¹⁴² Furthermore, unlike most male prisons, the units at Bandyup do not include any isometric exercise equipment.

‘Rec time’ Activities

6.32 Prisoners at Bandyup have one hour of free recreation time from 4:00 to 5:00 pm on weekdays, and more than five hours of free recreation on Saturdays and Sundays. The inspection team observed multiple recreation sessions during the two week inspection of Bandyup. In that time, little organised sport or recreational activities were observed, and the women were left to recreate by themselves. Small groups of women were observed walking up and down the ‘main street’ of the prison, doing what they could to be active. The exercise machines located within the gymnasium were fully occupied.

6.33 As the population of Bandyup has grown the range of recreation options has been under increasing demand, but space within the prison has diminished and some areas such as the tennis courts are no longer in use. It is hardly surprising that the women’s perceptions of the recreation options available to them have plummeted:

Positive perception of:	State average ¹⁴³	Bandyup 2011	Bandyup 2014
Amount of organised sport	49%	51%	28%
Access to recreation	43%	44%	32%

Figure 3: Declining satisfaction with recreational options at Bandyup

Recreation as Part of the Structured Day

6.34 A range of recreation based programs form part of the structured day over and above the general prison-wide recreation time. These programs run in morning and afternoon sessions, in one and a half hour blocks on weekdays.¹⁴⁴ The programs typically run for six weeks, and cover a variety of topics and interest areas. At the time of the inspection, the following weekly activities were available:

- Tai chi, yoga and other fitness and meditation classes;
- Guitar, music and lyrics classes;
- Crochet and patchwork classes; and
- Painting, printmaking and craft classes.

142 The only other facilities which do not have an oval are Broome Regional Prison, Pardelup Prison Farm, Boronia Pre-release Centre for Women, the Bunbury Pre-release Unit, and work-camps. However the majority of prisoners at these facilities have access to external section 95 activities.

143 This refers to the average findings from pre-inspection surveys conducted in the fourth round of prison inspections.

144 This excludes Friday morning when prisoners are locked down for the weekly staff training session.

- 6.35 While these programs offer a range of activities and options, they generally only cater to 12 to 15 places per course. Given that Bandyup’s population is 280 to 300, they do not meet demand.

Culturally Appropriate Recreation Options

- 6.36 There are few structured day recreation options that are culturally appropriate for Aboriginal women. The Ruah ‘Yarning’ Session is a very positive initiative but runs just once a week,¹⁴⁵ and like other classes it is limited to about 12 women per group. An Aboriginal prisoner also facilitates an art class on weekends, which focuses on traditional Aboriginal art. The library, however, has little suitable reading material for Aboriginal women. For a prison that holds a population that is 45 per cent Aboriginal, this level of services is unacceptable.

Recommendation 23

Improve recreational activities for Bandyup prisoners, both during recreation time and as part of the structured day, and make better use of areas that are currently unused or underutilised. As part of this improvement, provide more culturally appropriate recreation options for Aboriginal prisoners, including library materials and visits by Aboriginal elders.

CANTEEN

- 6.37 The canteen at Bandyup is a busy service, open six days a week for one hour. Each session of the canteen is allocated to serve two accommodation units. Each unit therefore has two canteen visits (or spends) per week. Prisoners employed in the canteen also provide a delivery service to prisoners unable to attend the canteen on their registered days.¹⁴⁶
- 6.38 For prisoners who have just arrived at Bandyup, a ‘special spend’ is available. Upon arrival a woman will not have earned any gratuities, and will have to wait for money to be transferred into her personal account. As such, women are permitted a one-off purchase (which is created as a debt against their future gratuities account). This is intended to help new arrivals settle in and adjust to prison life. The amount is modest (currently \$21.00), and the women complained that they ‘have to choose between toiletries or tobacco’.¹⁴⁷ One might hope for other choices but given that so many prisoners smoke, they often choose tobacco.
- 6.39 The canteen at Bandyup offers a relatively wide range of items for purchase, including some ‘women-specific’ products. Items specific to women’s needs are primarily offered in the toiletries category, and include deodorants, skin-care products, hair-removal products and cosmetics. Art, craft and knitting supplies are also available.

145 See [8.42]–[8.44].

146 Including prisoners in the Management Unit or Crisis Care Unit, those who are unwell, have lost recreation privileges, or who are appearing in court.

147 The cheapest tobacco product on the Bandyup price list was \$20.43. DCS, *Bandyup Canteen Price List* (8 January 2014).

- 6.40 Prisoners were dissatisfied with the selections available. Common complaints included:
- Too few underwear options: prisoners can wear Bandyup made underwear (which reportedly falls apart easily) or purchase name brand underwear for \$8.00–\$10.00 a pair. They would like a mid-range option; and
 - Not enough healthy options: while some healthy snack food options such as nuts and diet yoghurt are available, prisoners would like a greater variety. The number of confectionary items far outweighs the healthy items.
- 6.41 Following complaints at the 2011 inspection, the prison established a process for capturing prisoners' feedback and preferences. Prisoners were able to note down suggestions for changes in a book located at the canteen, and these suggestions were to be considered by the Canteen staff and Business Manager every six months. This process had disappeared by 2014 but would be easy to reintroduce.
- 6.42 One area of improvement since 2011 is that women do now have access to a 'town spends' process, as their male counterparts have had for many years. This essentially permits a limited range of items such as jogging shoes, stereos, X-box consoles, games, and CDs to be externally purchased on behalf of prisoners.

EXTERNAL CONTACTS AND COMMUNICATION

The Visits Centre: Neglected and Unsuitable

- 6.43 The Office has always been critical of the visits centre. In 2003 it was described as 'sterile', 'not at all child friendly',¹⁴⁸ and it was recommended that the visits centre be redeveloped. The Department agreed and stated that:
- A new, appropriately designed visits centre will be a priority for future capital development at Bandyup.¹⁴⁹
- 6.44 By the time of the second report in 2006, there had been no change. It was therefore recommended that the outstanding recommendations regarding the visits centre be addressed as a matter of priority.¹⁵⁰ Again the Department agreed completely:
- Planning for a complete new visits 'precinct' has been undertaken, complete with recommendations for improvements in the related services provided and operational procedures. This element is currently unfunded.¹⁵¹
- 6.45 Bandyup was inspected for the third time in 2008 and still nothing had changed.¹⁵² Yet again, the report recommended that an enhanced replacement family visits centre with a more child-friendly design be funded as a high priority. And again the Department stated that it supported the recommendation, subject to funding.

148 OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 13 (June 2002) 85.

149 Ibid, 113.

150 OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 36 (June 2006) 48.

151 Ibid, 93.

152 OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 57 (December 2008) 36.

COMPARING VISITS' FACILITIES



*Visits area at Karnet
Prison Farm*



*Visits area at Wandoo
Reintegration Facility*



*Visits area at Bandyup
Women's Prison*

COMPARING PLAY AREAS FOR VISITING CHILDREN



Play facilities for children at Karnet Prison Farm



Children's crèche at Acacia Prison



Play area for children at Bandyup Women's Prison

6.46 By 2011, visits centres at most of the male prisons had seen investment and improvement but Bandyup's remained 'the worst in the state'.¹⁵³ The report recommended that the government and Department invest in contemporary accommodation and infrastructure, including a replacement visits centre.¹⁵⁴ The Department said it would:

...[C]ontinue to strive for funding. It has submitted a business case for redeveloping Bandyup, including the social visits centre, in each of the last three years and will again do so in the next budget process.¹⁵⁵

6.47 In fact, the position with respect to funding is not entirely straightforward. The Department has complained over many years that it has pressed for funding, but that its business cases have been rejected by government. However, the evidence also suggests that a new visits centre was intended to be covered by the funding used to build the new gatehouse and Unit 5, but that when costs overran, the Visits Centre missed out.

6.48 Whatever the reasons, the result is the same and is wholly unacceptable. Bandyup's visits centre was established at a time when it held 100 prisoners, and even then it was inadequate. The prison now holds three times that number. The contrast with the level of investment in visits facilities at men's prisons in recent years is stark.¹⁵⁶

Visits: 2014 Findings

6.49 In 2011 prisoners rated visits as the second most negative thing about being at Bandyup. This was due to the environment of the visits centre, and the difficulty visitors had getting to the prison, and then from the Outcare centre to the prison itself.¹⁵⁷ In 2014, the same issues remained and again the pre-inspection survey identified the visits centre as the second worst thing about the prison.

6.50 When visitors first arrive at Bandyup they are required to register at the external visitors centre run by Outcare. From there, they make their way through to the gatehouse, located over 100 metres away. Prisoners, visitors and staff all commented on instances where elderly or disabled visitors, some of whom were escorting numerous small children, struggled to make it along the path in hot or rainy weather.

6.51 Once visitors have cleared security, they are escorted to the Bandyup visits centre. The centre remains small, sterile, impersonal, and not at all appropriate for mothers to visit with their children. It is monochromatic grey and smells of disinfectant. The visiting areas are filled with plastic chairs, and are equipped with small knee-high tables for prisoners and their visitors to crowd around. Only 13 contact visits can occur per session, and when it is full the visits centre can be very loud.

153 OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 73 (August 2011) vi.

154 Ibid, 11.

155 Ibid, 99.

156 OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 73 (August 2011).

157 Ibid, 48.

- 6.52 Because of the lack of space, the tables are positioned close to one another, reducing personal space and privacy. Members of the inspection team were informed that some women no longer permitted their children to visit them, because on previous visits they had been frightened by the language and behaviour of other visitors sitting close by. A limited number of toys are available and a small space can be used for play.
- 6.53 In an attempt to address the limitations of the centre and introduce a more family-friendly focus at Bandyup, child-specific visit sessions have been introduced. Positively, a childcare worker attends these sessions to supply various craft utensils and activities, and helps to convert the visits area into a more relaxed and child-friendly area. Disappointingly however, such visits are only available Tuesdays and Thursdays from 12:15 to 2:00 pm, and conflict with school hours.
- 6.54 In summary, in spite of numerous recommendations from this Office and departmental business cases and plans, the visits centre remains as it was – the worst in the state and a terrible contrast with male prisons. It does not accord with a women-centred approach. It is also a universally accepted fact that positive visits provide a calming influence and a positive management incentive. Action is needed.

Recommendation 24

Build a new social and official visits centre inside Bandyup, and also a new external visitors' centre for people arriving at the prison, in line with the Department's stated philosophy of women-centred service delivery.

Bus Services for Visits

- 6.55 Bandyup is located in Middle Swan, approximately 20 kilometres from the centre of Perth. The closest train station is in Midland, approximately eight kilometres away by road. The closest bus stop is over a kilometre away. Based on a recommendation by this Office, the prison introduced a bus service to shuttle visitors between Midland train station and Bandyup. Although this is a significant improvement, finally bringing Bandyup closer in line with male prisons, issues regarding the timing and frequency of the service were apparent.
- 6.56 Bandyup permits a range of social visit sessions, including regular, remand prisoner only visits, and child visits, giving 25 distinct visit sessions each week. However, the bus service is only available for two of these sessions, those being the last visit sessions (4:00 to 5:00 pm) on Saturdays and Sundays. This does not meet demand, particularly at peak periods on weekends. Additionally, the weekend bus services are poorly timed in terms of meeting the needs of young children and family or friends who do not reside in the metropolitan area and may need to find somewhere to stay overnight. At the very least, the bus service should run earlier in the day.

Recommendation 25

Expand the bus service to and from visits at Bandyup to include access to earlier and more frequent visit sessions.

Alternatives to Visits

- 6.57 Bandyup accommodates women from all over the state, as well as interstate and overseas. Aboriginal women make up approximately 45 per cent of the population and many are out-of-country. The ability of these women to maintain contact with friends and families from home is vital for their wellbeing when in prison and for their successful re-entry to the community. Aside from visits, women at Bandyup are able to maintain contact with loved ones via telephone and mail.
- 6.58 As many of the women have limited literacy, access to the telephone becomes a significant part of their lives. However, with Bandyup's population continuing to increase, access to telephones was less reliable and creating conflict among the prisoners. Each unit has a ratio of telephones to prisoners, with some units having better access than others. For example, despite being an 'earned' minimum-security unit, Unit 6 has only one telephone for up to 36 women. Prisoners from this unit reported tension in the unit due to the high demand for access to the phone, especially after school hours, as a large number were mothers to young children.
- 6.59 Unit 3, which houses Bandyup's Management Unit (MMU) and Crisis Care Unit (CCU) has only one telephone, which is located in the management wing. This means that vulnerable prisoners in the CCU must walk into the management area to access the phone, past potentially volatile and aggressive women.
- 6.60 There is a real need for more phones in the units at Bandyup to reduce tension in the units and provide women with greater contact with families and support networks.
- 6.61 Bandyup should also provide alternative mediums for women to contact their loved ones. A video link facility is in place at Bandyup, however, it is primarily used to offer link ups for court purposes rather than social visits. A number of issues limit the ability to enhance this service to better include social visits, including cost to the prisoner (\$4 per session), availability, and the second party having access to compatible technology.
- 6.62 Unlike a number of other prisons, Bandyup does not offer the use of communication alternatives such as Skype. Skype has been used at some of the higher security male prisons, including Acacia, Albany and Hakea, and the Department has said it has proved safe and successful. The introduction of this type of technology could help to relieve current anxieties around access to telephones, the inadequacy of the visits facility, and the inability of many families to travel long distances for visits. So-called 'e-visits' may also offer fewer security risks than personal visits.

- 6.63 Recommendations relating to the issue of Skype and other technologies have been made in a number of recent reports.¹⁵⁸ The Department has accepted these recommendations so they will not be repeated here, but it should afford Bandyup a high priority.¹⁵⁹
- 6.64 The women were also concerned at restrictions that had affected their ability to visit family members in other prisons. Following a number of security breaches in late 2013 and early 2014, the Commissioner of Corrective Services placed restrictions on non-essential prisoner movements throughout the state. This included the movement of prisoners taking part in inter-prison visits with family.¹⁶⁰ The Commissioner's directive stated that all applications for such visits were to be individually assessed, and required his personal approval. Prisoners claimed that since this directive was released, it has been difficult to arrange inter-prison visits with relatives and partners. In line with the previous recommendation, the use of Skype or other technology has obvious potential to reduce transports and increase contact.
- 6.65 Unfortunately, some of the women at Bandyup also have children, grandchildren or other close relatives at Banksia Hill Detention Centre for juveniles. However, they are not permitted inter-facility visits with these young people, despite the principles in the Department's *Female Offender Policy*:
- Corrective services for female offenders acknowledge the role of female offenders as mothers and/or primary care givers and promote healthy connections with family, significant others and the community.¹⁶¹
- 6.66 The Office is fully cognisant of the need to protect children, of the complexity of some family circumstances, and of the need to reflect the best interests of the child. However, blanket policies denying contact between women and children are unnecessary, inappropriate, and out of accord with policy.

Recommendation 26

Taking full account of the best interests of the child the Department should take steps to facilitate appropriate family connections are maintained between young people in Banksia Hill Detention Centre and adult family members in Bandyup and other prisons.

IMPACT OF TIMETABLE CONFLICTS ON MEDICAL SERVICES, SAFETY AND VISITS

- 6.67 From the end of the structured day until lockdown (approximately 3:45 pm to 5:15 pm), the Bandyup daily routine simultaneously caters for recreation, social visits and the collection of canteen spends. Furthermore, women who require medication must remain in their units to queue for the afternoon round. With all of these events happening simultaneously, some conflicts were foreseeable.

158 See OICS, *Report of an Announced Inspection of Acacia Prison*, Report No. 90 (June 2014); OICS, *Female Prisons in Western Australia and the Greenough Women's Precinct*, Report No. 91 (July 2014); OICS, *Report of an Announced Inspection of Eastern Goldfields Regional Prison*, Report No. 92 (August 2014).

159 This Office notes that since the inspection, approval has been received for a new video link facility with Skype capability.

160 DCS, *Assistant Commissioner Custodial Operations Notice 1/2014: Non-Essential Prisoner Movements* (January 2014).

161 DCS, *Female Offender Policy* (September 2011) 2.

Bandyup Daily Routine – Monday to Saturday						
16:00	Social Visits		Recreation		Canteen	
16:15						
16:30						
16:44						
17:00	Medication		Medication		Medication	
17:15	Dinner		Dinner		Dinner	
17:30	Confined to Units					

Figure 4: The daily afternoon routine at Bandyup

6.68 Unlike many prisons in Western Australia, the entire population of Bandyup recreates at the same time.¹⁶² As noted throughout this report, Bandyup houses an extremely diverse range of prisoners. They range from minimum- to maximum-security rating, from the elderly to the very young, and include sentenced and remand prisoners, and mothers with infants. At recreation times, the majority of the population congregate around the ‘Main Street’ of the prison en masse.

Conflict of Priorities

6.69 The afternoon timetable has negative consequences. Women routinely have to decide whether they want to attend recreation, have a social visit, receive their canteen spends, or receive their medication. It is unacceptable that prisoners should have to choose between maintaining their physical and mental health by attending medication, and maintaining their general wellbeing by attending canteen, visits and recreation.

6.70 Timetable conflicts of this magnitude are unnecessary and should be addressed, as they are also generating security and safety issues.

Security and Safety

6.71 As the majority of prisoners are moving around the recreation area at the same time, the process for prisoners to collect their canteen spends is neither safe nor secure. Many women said they were fearful of attending the canteen because of the degree of bullying and intimidation that it involved, and their claims were confirmed by observations early in the inspection. Prior to leaving the canteen, many women were seen to hide their tobacco, chocolate and other purchases in their clothing before attempting to make it back to their units. The atmosphere was tense and hostile, with some prisoners expressing displeasure at our team members’ presence. Others were seen to openly harass prisoners for a share of their purchases.

162 This excludes women currently being held in either the Management Unit or Crisis Care Unit, or those who have had recreation privileges temporarily revoked as punishment.

- 6.72 Most disturbingly, however, this behaviour was conducted in front of custodial staff members who did nothing to object or intervene. The Canteen Officer acknowledged the problem but was too busy managing the canteen to get involved. Two prison officers who were supervising the canteen process from the outside agreed that stand-over and bullying was a problem, and even suggested ways the process might be reorganised, but did not acknowledge that they had a duty to intervene.
- 6.73 This matter was raised with the Superintendent the following day, and subsequent observations of recreation and spends showed an increased officer presence. However, the fact that this behaviour was being tolerated prior to our involvement is extremely disappointing. The issue needs to be addressed, and that timetabling factors which have enabled it to occur need to be rectified.

Recommendation 27

Restructure the afternoon routine to ensure that clashes between visits, recreation, medication, and canteen spends are reduced and that there is adequate staff monitoring and supervision during recreation.

Chapter 7

REDUCING REOFFENDING: A CHALLENGE THAT MUST BE MET

THE CHALLENGE

- 7.1 The Department's *Strategic Plan 2011–2014* identifies the reduction of reoffending as one of its three targeted outcomes.¹⁶³ Put another way, the goal of prisons is not just to house offenders but to enhance public safety and reduce the number of victims. If prisons are to be effective in this regard, they must offer opportunities and support to enable change, and assist in the successful reintegration of offenders back into society.
- 7.2 In order to meet this challenge, the *Strategic Plan* identified the following objectives for both male and female prisoners:
- Offender rehabilitation needs are addressed;
 - Offenders acquire relevant employment skills and qualifications;
 - Offender re-integrative needs are addressed; and
 - Preventive programs and services are delivered to 'at risk' (of offending) client groups.¹⁶⁴
- 7.3 Specific commitments have also been made for women. The *Strategic Plan* emphasised: 'The need for a specific focus on the management of female offenders is a challenge we must meet'.¹⁶⁵ The *Female Offender Policy* further states that programs will 'target and address the criminogenic needs of female offenders, according to their risks and needs assessment'; and will 'focus on supporting female offenders to achieve successful community re-entry'.¹⁶⁶

RECIDIVISM RATES

- 7.4 A recent report by this Office has examined recidivism rates across the system.¹⁶⁷ It found that, after taking account of prisoners' risk profiles, the prisons that were performing better against inspection standards were returning lower recidivism rates than those that were struggling to meet standards.
- 7.5 Given this finding, it was not surprising to find that Bandyup was performing below expectations. The report also noted the shortage of relevant programs for women prisoners across the system and especially at Bandyup.
- 7.6 It is against the context of departmental commitments and high recidivism rates that this chapter considers the options for rehabilitative services at Bandyup, starting with the orientation process on arrival, through assessment, treatment, case management, and preparation for release.

163 DCS, *Strategic Plan 2011–2014* (2012).

164 Ibid.

165 DCS, *Strategic Plan 2011–2014: Commissioner's Message* (2012).

166 DCS, *Female Offender Policy* (September 2011).

167 OICS, *Recidivism Rates and the Impact of Treatment Programs* (September 2014).

ORIENTATION OF NEW PRISONERS

- 7.7 At the 2011 inspection, the orientation process had recently undergone a number of revisions, many of which were still bedding in. Despite this it was delivering a sound process which was well integrated with peer support, and spoken of positively by new prisoners. While some of these changes had proved successful, other aspects of the process were no longer functioning as intended. The most significant change included repurposing one house within Unit 4 as the orientation unit. It was still being used for this purpose at the 2014 inspection.
- 7.8 Unit 4 is made up of three communal-living style houses, one of which is reserved for orientation (J-Block), while the remaining two are self-care accommodation reserved for prisoners who are settled and have consistently good behaviour. For this reason the unit offers a largely calm and relaxed environment for new arrivals.
- 7.9 When women first arrive at Bandyup they are often distressed and vulnerable, and the 2014 pre-inspection survey identified that a little over half (51%) felt ‘very upset’ on arrival. To assist new prisoners adjust to life at Bandyup, they spend between three and seven days in the orientation unit located within Unit 4, before they are integrated into the mainstream population.



Orientation kit list and toiletries

- 7.10 All new arrivals are required to be interviewed according to an orientation checklist, which includes data collection regarding the person’s family, work experience, and personal history, as well as a range of yes/no questions to ensure that the prison’s policy and procedures have been explained to the prisoner. Due to lack of space, orientation interviews were being conducted at outdoor tables in the courtyard, which were unprotected and offered little privacy. A sensitive encounter such as this requires a far more appropriate setting.
- 7.11 In previous years, the orientation of prisoners included an orientation handbook (which the woman could keep and refer to) and a video screening. However, according to prison management, both of these orientation tools included information that was so out of date as to be misleading, and as a result neither was being used. Orientation processes were being reviewed, and while some proposals had been put forward, none had been approved. This meant that newly arrived women were not receiving an orientation handbook, or being shown a video.
- 7.12 Instead the process appeared to have largely fallen to the peer support team of prisoners who remain well engaged with the orientation process. The team meets all new intakes on arrival, and also runs an orientation program. One peer support team member resides in the orientation block as a source of advice and support close to hand. However, the formal mandate of the peer support team is the prevention of self-harm and suicide, rather than helping women settle into Bandyup, or informing prisoners of expectations, policies and procedures. Therefore a service gap still remains in this area, and the orientation process for new prisoners at Bandyup provides very little insight to Bandyup’s rules and processes.
- 7.13 Pre-inspection survey results showed that prisoners’ perceptions of orientation had fallen badly since 2011 and compared poorly with state averages:

Positive response:	State average ¹⁶⁸	Bandyup 2011	Bandyup 2014
Did respondents feel they received enough information to understand how the prison works?	59%	47%	24%

Figure 5: Positive responses to amount of information received during orientation at Bandyup

- 7.14 In summary, Bandyup’s management needs to continue its review of orientation practices, and implement a revitalised process which adequately addresses the welfare needs of the new female prisoners as well as providing them with an overview of prison services and rules in an appropriate and accessible manner.

Recommendation 28

Overhaul the orientation process and ensure that each new prisoner has adequate support and is familiar with the prison and its operations before leaving the orientation unit.

168 This refers to the average findings from pre-inspection surveys conducted in the fourth round of prison inspections.

CASE MANAGEMENT AT BANDYUP

Case Management in Theory

- 7.15 When a prisoner enters the custodial system, either sentenced or unsentenced, they attend a Management and Placement (MAP) assessment interview to identify their security classification and placement options. This process is required to take place within the first 72 hours of the individual's imprisonment, and collects information regarding their medical history, outstanding court matters, dependent children's needs, and more.
- 7.16 Prisoners serving an effective sentence of greater than six months take part in a secondary assessment, which results in the development of an Individual Management Plan (IMP). This process must occur within 28 days of the prisoner receiving their sentence. Once a prisoner has an IMP, they are allocated a case manager from the officers who are rostered onto that prisoner's unit. The case manager's role is to support the prisoner and inform them of each stage of the prisoner management and release process. The IMP assessment process collects a broader range of information relating to the prisoners' background and profile, covering education needs and identifying programs that may address the individual's offending behaviour. A series of regular contact meetings are built into the case management process. The aim of these meetings is to develop communication with the prisoner, monitor their progress, and assist and motivate the prisoner towards addressing their needs for re-entry.¹⁶⁹

Case Management in Practice

- 7.17 One key problem with this system is that neither the prisoners nor officers are guaranteed to stay in the same unit and therefore to remain in regular contact. Staff rostering rotates officers throughout the prison, and prisoners commonly move from unit to unit in accordance with their behaviour and prison placement options. If an officer is rostered into a different unit from their allocated prisoners, it is up to them to negotiate a time to leave their duties to meet with the prisoners. Furthermore if a prisoner relocates to another prison entirely, the system must reset with another officer. Thus, although the case management system nominally provides the opportunity to address the individual's re-entry needs, in practice it does little more than track their progress against the requirements of their IMP.
- 7.18 The 2011 Bandyup report recommended that the Department:
- Consistent with *Women's Way Forward*, adopt an integrated case management model which will enable consistent assessment of women's welfare needs and planning for individualised and appropriate service delivery.¹⁷⁰
- 7.19 The Department responded that an integrated offender management policy was under development, and once completed, would apply to all divisions of the Department, enhancing and extending the reach of current offender management.¹⁷¹

169 DCS, *Rehabilitation 5.3 – Case Management Procedures at Bandyup* (undated).

170 OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 73 (August 2011) 102.

171 Ibid.

7.20 Three years on, the case management system at Bandyup in 2014 was still essentially the same as it was in 2011 and the same as at all male prisons, which this Office has consistently criticised.¹⁷² However, the recent trial of an integrated offender management scheme at Greenough Women’s unit appears to have been successful.

Integrated Offender Management at Greenough Regional Prison

7.21 In order to provide services to the increased female population at Greenough, the prison has trialled an Integrated Offender Management Committee (IOM) approach. This goal oriented process includes monthly meetings of relevant staff members, where each prisoner’s needs are considered individually. Attending staff members include the Transitional Manager, Employment Coordinator, Women’s Support Officer and education staff, who together consider referral options both inside the prison and upon release. The following areas of service provision are considered:

- Cultural/spiritual issues – cultural, sorry times, Peer Support Officer, Chaplain;
- Family issues – DCP, extended family, assistance with childrearing, contacting family in other prisons;
- Employment – White Card training, PEP, resumes;
- Education – traineeships, proof of age, TAFE, flexi learning;
- Life Skills – workshops;
- Prisoner Counselling Service (PCS) referral options; and
- Medical referral options.

7.22 The integrated service provision tool proved to be a strong motivation for staff to maintain contact with each prisoner on an individual basis, and to ensure their distinct needs were being addressed. Importantly, the process aims to improve outcomes for women who are less likely to engage with services and less forthcoming with their needs.

7.23 The IOM was initially run as a six-month pilot, and if the Department deems it successful it could be rolled out across the estate. There are, however, some questions about how well this process could work at other sites. It works well in the Greenough Women’s Precinct which typically has a population of between 50–60 prisoners but the process is time intensive and may prove difficult at other sites. However, IOM trial does seem to have shown real results, highlighting gaps in service delivery, and improving services for female prisoners.

7.24 The Department is currently examining a new Individualised Integrated Case Management system (‘IICM’) for all prisons. It has also supported a recommendation that the success of the IOM process be built on. Although this is a critical area for improvement, no specific recommendation is therefore made in this report.

¹⁷² OICS, *Report of an Inspection of Greenough Regional Prison*, Report No. 83 (March 2013); OICS, *Report of an Announced Inspection of Wooroloo Prison Farm*, Report No. 80 (August 2012); and OICS, *Report of an Announced Inspection of Bandyup Women’s Prison*, Report No. 73 (August 2011).

TREATMENT PROGRAMS FOR FEMALE OFFENDERS

- 7.25 The 2011 inspection of Bandyup found that the availability and range of programs had improved significantly and this was supported by positive feedback regarding treatment programs by the prisoners at that time. However, the inspection also found inequities in the provision of programs in that there were no Aboriginal-specific programs and a dearth of programs designed to address certain types of offending.
- 7.26 The 2011 report therefore made a series of recommendations to the Department regarding the availability and scope of therapeutic assessment programs for women, in particular to address identified gaps in service provision. However, the responses to these recommendations were lukewarm and the same issues were present in 2014.

Policy and Practice

- 7.27 The IMP process includes an assessment of each prisoner's criminogenic treatment needs and eligibility for rehabilitative programs. This is determined via four assessment tools which identify treatment needs in their distinct areas: Cognitive Skills, Violence, Substance Use and (if indicated by the individual's offence) Sex Offending. This process is only open to those prisoners with effective sentences of more than six months. Successful completion of programs is considered to reduce the individual's risk of recidivism, and can be a major consideration in the Prisoner Review Board's consideration of parole.
- 7.28 The four checklists noted above are applied universally to all prisoners regardless of gender. In describing the provision of offender programs for women, the *Female Offender Policy* states that they should:
- Target and address the criminogenic needs of female offenders, according to their risks and needs assessment; and
 - Incorporate Aboriginal cultural needs and include Aboriginal-specific programs, delivered and developed in partnership with Aboriginal communities, organisations and service providers as appropriate.¹⁷³

Range of Therapeutic Programs

- 7.29 The range of programs currently available for female offenders does not match the range of identified needs, as determined by the four assessment tools. Although assessment staff determine treatment needs in relation to Cognitive Skills, Violence, Substance Use and Sex Offending, in reality there are few treatment options available for female offenders.

173 DCS, *Female Offender Policy* (September 2011).

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- 7.30 The range of programs had changed very little, and included the following:
- **Pathways:** an addictions offending program delivered by external health providers;
 - **Choice, Change and Consequences (CCC):** a medium intensity ‘general offending’ program, suitable for people with violent or substance use offending histories;
 - **Think First:** a general offending cognitive skills based course, covering self-control, critical reasoning, problem-solving, interpersonal perspective taking and relapse prevention; and
 - **Cognitive Brief Intervention (CBI):** a shortened (20-hour) cognitive skills program.
- 7.31 As in 2011, there were no treatment programs for women who were either sexual offenders or were assessed as requiring high intensity treatment for violent offences. In 2011, Departmental representatives told the Office that the developers of the CCC were customising the program to suit the high-risk group of female violent offenders.¹⁷⁴ However, no further evidence was provided to suggest any progress in developing programs for sexual offenders and high-risk violent offenders.
- 7.32 Furthermore, despite the over-representation of Aboriginal women in prison and the policy promises, the Department has not delivered programs that meet the cultural specificity of Aboriginal women.
- 7.33 The failure to provide more programs for women, and to target particular needs, is a missed opportunity. Many women described their fear of being released back into the community without having had the chance to learn how to not fall back onto old behaviours which saw them commit their offences. On the other hand, those who had completed programs generally indicated that they found them enlightening and personally challenging. They provoked them to think in new ways, and to confront their decisions and the consequences of their actions. However, they also indicated that the lessons they had learned in the classroom had been too far removed from the reality they found upon release. As a result, many had reoffended and found themselves back at Bandyup.
- 7.34 Male prisoners have a wider range of treatment programs available to them, especially for violence and sexual offending. A number of Aboriginal-specific programs have also been trialled. The Department strongly believes that programs work and has invested heavily in them. Its failure to provide sufficient programs for women means that opportunities to reduce reoffending are not being met.
- 7.35 This Office’s recent review of recidivism has made recommendations regarding improving the provision of programs for women in general, for young women in particular, and for Aboriginal prisoners.¹⁷⁵ The issue remains critical but those recommendations will not be repeated here.

174 OICS, *Report of an Announced Inspection of Bandyup Women’s Prison*, Report No. 73 (August 2011) 37.
 175 OICS, *Recidivism Rates and the Impact of Treatment Programs* (September 2014).

PREPARATION FOR RELEASE

- 7.36 The 2011 inspection found that re-entry services for women were stretched but functioning well. The Transitional Manager was active, engaged and motivated to assist the prisoners, and they found her accessible and valuable. Rigorous processes with a strong welfare focus were in place, and the Transitional Manager was assisted by a Transition Support Worker, a prisoner employed to take on some of her workload, including the delivery of information sessions to new prisoners in the orientation unit three times a week.¹⁷⁶
- 7.37 By 2014 however, Bandyup's population and demand for services had increased, and the Transition Support Worker position no longer existed. As a result re-entry services were over-stretched and poorly accessible.

The Transitional Manager's Role

- 7.38 The Transitional Manager described her role as having two main components; the coordination of services provided by external agencies, and engaging with prisoners six months prior to release to provide referrals for re-entry services.
- 7.39 Bandyup has been able to secure the provision of a number of re-entry services offering a variety of life skills and accommodation services. These programs are developed and delivered by external service providers from the Perth metropolitan community, and represent a welcome addition to services for the female prisoners. However, as was the case across prison services, adequate and appropriate infrastructure was at a premium, and this was impacting on the Transitional Manager's ability to increase service delivery.
- 7.40 In relation to re-entry services, the Transitional Manager's first instance of contact with a prisoner occurs six months prior to their scheduled release. The Transitional Manager sends each woman an eight page information pack which includes referral forms for seven separate service providers (two drug and alcohol services and five accommodation services). The women are expected to read, complete and return as appropriate. The second stage (two- to three-months pre-release) involves a three page document being sent out, with similar content and purpose.
- 7.41 This amount of information provided is potentially overwhelming for many prisoners, particularly given the typically low levels of literacy. The Transitional Manager indicated that prisoners can seek the assistance of other prisoners if assistance is required, but this is neither appropriate nor adequate.
- 7.42 In spite of the range of support services apparently available, many prisoners said that they had had little to no contact with them, and that they did not know of their availability. Many said that the only time they had contact with the Transitional Manager was if a signature was required, and that there was little provision of one-on-one assistance.

176 OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 73 (August 2011) 38–39.

- 7.43 Bandyup is by far the biggest releasing prison for women in the state, releasing a total of 864 women in 2013.¹⁷⁷ However, the role of the Transitional Manager is at present limited to one individual per prison, regardless of the number and complexity of their releases. Therefore, just as Bandyup has one Transitional Manager, so does Boronia, which released 120 low risk women in 2013.¹⁷⁸
- 7.44 In summary, it is important that prisons are resourced according to the functions they perform and to the demands and needs that they meet. Bandyup is in the business of releasing high need, high-risk women and should be resourced accordingly.

Recommendation 29

Ensure that adequate resources are allocated to Bandyup to facilitate re-entry; revitalise the Transitional Manager's role; and reintroduce prison employment positions to assist the Transitional Manager.

177 Of these numbers, 406 women were sentenced. TOMS Data Extraction, *Boronia Discharge Numbers from 1 January 2013 to 31 December 2013*.

178 TOMS Data Extraction, *Boronia Discharge Numbers from 1 January 2013 to 31 December 2013*.

Chapter 8

MOTHERS AND ABORIGINAL WOMEN: THE GAP BETWEEN POLICY AND PRACTICE

SUBSTANTIVE EQUALITY

8.1 The government's statewide Substantive Equality Policy framework reads as follows:

Substantive equality involves achieving equitable outcomes as well as equal opportunity. It takes into account the effects of past discrimination. It recognises that rights, entitlements, opportunities and access are not equally distributed throughout society. Substantive equality recognises that equal or the same application of rules to unequal groups can have unequal results. Where service delivery agencies cater to the dominant, majority group, then people who are different may miss out on essential services. Hence, it is necessary to treat people differently because people have different needs.¹⁷⁹

8.2 Substantive equality therefore acknowledges that women have different needs to men, that Aboriginal Australians have different needs to non-Aboriginal Australians, and that women with children in their care have different needs to those who do not. It specifically endorses the view that for all groups to have equal access to services and opportunities, it is necessary to treat some differently to others.¹⁸⁰

8.3 Substantive equality also requires a recognition of overlapping forms of discrimination. For example, the issues facing a person who is female, disabled and Aboriginal compound with each other and are inseparable. The individual experiencing them will therefore require greater assistance to approach 'true' equality.¹⁸¹

8.4 In line with government requirements, the Department released its own Substantive Equality Policy in 2008. The policy included an implementation plan for the financial years 2006–07 to 2010–11,¹⁸² however, it is now out of date and no follow-up plans or documents have since been issued. Nonetheless the Department's *Female Offender Policy* acknowledges that Aboriginal female offenders have distinct needs and may face multiple forms of discrimination in their access to gender and culturally relevant services.¹⁸³ It opens by stating that:

The Department further acknowledges that Aboriginal female offenders are overrepresented in the corrective services system and is committed to managing a system that is responsive to the distinctive needs of Aboriginal female offenders.¹⁸⁴

8.5 This chapter examines two areas of particular concern: first, the issues facing women as mothers at Bandyup and secondly, the position of Aboriginal women. The situation has declined since 2011.

179 Equal Opportunity Commission, *The Policy Framework for Substantive Equality* (2005) 6.

180 Ibid.

181 This is known as 'intersectional discrimination'. Human Rights and Equal Opportunity Commission, *Social Justice Report 2002* (December 2002) 154.

182 DCS, *Substantive Equality Policy – Appendix 1* (2008).

183 DCS, *Female Offender Policy* (September 2011) 3.

184 DCS, *Female Offender Policy* (September 2011) 1.

WOMEN AS MOTHERS

- 8.6 It is difficult to state how many women at Bandyup are mothers or the primary carers of children because medical services do not accurately capture such information.¹⁸⁵ Furthermore, women in Aboriginal communities have broader kinship and mothering roles than mainstream Australian society. However, departmental research indicates that around 67 per cent of women in prisons had children.¹⁸⁶
- 8.7 The imprisonment of mothers and primary carers impacts not only on the women themselves, but also on the children they leave behind and the families and communities who take care of them.¹⁸⁷ Furthermore, due to the steady increase in the numbers of women being imprisoned, the negative flow-on effects are likely to be long-term and cumulative.¹⁸⁸

Services for Mothers with Babies

- 8.8 There are two Nursery Houses within ‘The Village’ setting of Unit 5, designed to provide a comfortable and safe domestic environment for late-term pregnant women and mothers who have their babies with them in prison. Each house has a capacity of four, meaning that the maximum capacity of the Nursery is eight. Babies are permitted to reside with their mothers at Bandyup until they are 12 months old, in line with Policy Directive 10 (PD10).¹⁸⁹ However, short extensions are sensibly permitted on occasion. PD10 further outlines all procedural requirements relating to the care of children in prison, including eligibility, care plans, progress and review meetings, additional carers, health care and medical emergencies.
- 8.9 The Nursery Houses were staffed with regular officers who rotate through all units at Bandyup. However, over half of the staff who responded to the pre-inspection (56%) considered themselves inadequately trained to work with children. In order for Bandyup to ensure that interactions between its staff and mothers with children are consistent, appropriate and informed, all staff must be adequately trained.
- 8.10 Despite being a distinct cohort with very particular needs, pregnant women and mothers with babies do not have a single point of contact staff member who is responsible for assisting them or representing their needs at a higher level. This is a considerable oversight. In previous years Bandyup had a dedicated Nursery Coordinator position, who oversaw and responded to all issues regarding pregnant women and mothers. This ranged from coordinating day-stay visits, nursery needs and requests, and working with and supporting the women.

185 See [9.39] and [9.42].

186 DCS, *Profile of Women in Prison 2008 – Final Report* (August 2009) 48.

187 Human Rights and Equal Opportunity Commission, *Social Justice Report 2002* (December 2002) 157.

188 United Nations Division for the Advancement of Women, *Report of the Expert Group Meeting – Gender and Racial Discrimination* (November 2000).

189 Women prisoners are able to care for their young babies or children in prison where it is considered to be in the best interests of the child and the management and security of the prison is not threatened. DCS, *Policy Directive 10 – Prisoner Mothers/Primary Carers and their Children* (2007) 2.

- 8.11 The houses operate under a Nursery Unit Plan, which was last reviewed in March 2011, and includes references to the now defunct Nursery Coordinator role. Among other things, the Nursery Unit Plan outlines the prison's responsibilities for supplying baby items. However, due to out of date and inaccurate information, the inspection found that there was some confusion about what items were permissible for babies, and who was responsible for their procurement. It would therefore appear that a review of the Nursery Unit Plans is overdue.

Recommendation 30

(a) Reintroduce the Nursery Coordinator position in order to deliver a more appropriate service to mothers with resident babies; (b) revise the Nursery Unit plans in order to provide up to date and accurate information; and (c) ensure all staff who work in the Unit 5/nursery houses are appropriately trained and certified to work with children and babies.

Pregnant Women

- 8.12 At the time of the inspection, four pregnant women were accommodated in the Nursery Houses, while a number remained in mainstream Units 1 and 2. This is troubling, as Units 1 and 2 are consistently overcrowded, with cells that are often doubled-up by way of mattresses on the floor. While the inspection team saw no evidence of pregnant women sleeping on the floor, the physical layout involved makes the already cramped cells even more difficult to negotiate. Units 1 and 2 are also loud and sometimes unsettled places.
- 8.13 While arrangements were in place for pregnant women in mainstream units to receive an evening snack, the pregnant women in the nursery highlighted the enhanced physical environment, and ability to determine their own eating times and patterns, as key benefits of self-care accommodation during pregnancy.
- 8.14 PD10 requires that any pregnant women in a regional prison must be transferred to Bandyup once she reaches 20 weeks.¹⁹⁰ The assumption is that all pregnant prisoners face a high risk of complications due to lifestyle factors, including substance abuse. Staff advised that the policy was largely driven by the Women and Newborn Drug and Alcohol Services (WANDAS) at King Edward Memorial Hospital, which manages high-risk pregnancies and which is where the women deliver. At the time of the inspection however, a review of this Policy Directive was under way due to the anguish it causes women separated from their support networks during pregnancy. This is particularly distressing for out-of-country Aboriginal women.¹⁹¹
- 8.15 While there are certainly benefits to this, such as having the women closer to King Edward Memorial Hospital, it has some significant drawbacks. This process removes women from their country, and away from the opportunity to receive visits from friends and family at a time when this support is greatly needed. As a case in point, during the inspection a

¹⁹⁰ DCS, *Policy Directive 10 – Prisoner Mothers/Primary Carers and their Children* (2007).

¹⁹¹ The Department has noted that if agreements can be reached with regional hospitals to provide similar services to those received through the current arrangement, then pregnant women could remain in regional prisons longer. This Office will continue to monitor efforts to achieve this outcome.

heavily pregnant Aboriginal woman from Broome was residing in the nursery. She spoke to inspection team members about her isolation, difficulty communicating and being understood, and her strong preference to be closer to home. She stated that she had family members in West Kimberley Regional Prison who would support her, but at Bandyup she had no one. In addition, Bandyup can be a challenging environment, certainly less calm than many regional prisons.

- 8.16 While pregnancies should always be closely monitored, the decision to remove women from country should, in this Office's opinion, be determined on the basis of individual risk not by application of a blanket policy (see Recommendation 31).

Ngala

- 8.17 Ngala Parenting Advice and Support Services, a non-government service provider, provides on-site support for mothers at Bandyup. Ngala develops and implements programs and services relating to parenting and early childhood development, including programs for improving care giving, parenting and relationship skills, playgroups for early childhood and provides some prenatal education as appropriate. Ngala also helps mothers to maintain communication with their children residing in the community, (visits, phone calls, letter writing) to support mothers to better handle the stress of separation.
- 8.18 Ngala also provides assistance to women who have issues related to the Department of Child Protection and Family Services (DCPFS), including those attempting to reconnect with their children. To this end there is also a DCPFS Family Links Officer who operates across both Bandyup and Boronia. This is an important linkage role, and enables immediate information sharing and response by the DCPFS.

Paediatric Case Conferences

- 8.19 All pregnant women and mothers who have children residing with them at Bandyup are case managed through Paediatric Case Conferences. This process includes staff representatives from relevant areas, including senior operational staff, the Clinical Nurse Manager, two Ngala workers and the Family Links Officer. All children on-site are required to have a Care Plan in place, which is regularly reviewed by the conference members. These processes were observed by inspection team members to be thorough and effective.
- 8.20 The Paediatric Case Conference group also considers the cases of all pregnant women at Bandyup. They discuss how the woman is progressing, accommodation options within the prison, and any women from elsewhere in the estate who may be transferring into Bandyup as a result of her pregnancy. The presence of the Family Links Officer during this process is invaluable, as it allows for timely inputs into whether the woman will be able to have her child with her following the birth, and guarantees the consideration of the child's best interests.

- 8.21 Furthermore the group had regular house meetings with those women in the nursery houses which provided a good opportunity for the women to voice any concerns they may have.

Maintaining Family Ties

- 8.22 The Department's now defunct strategic plan for female prisoners, *Women's Way Forward 2009–2012* defined a key outcome of success as the provision of 'realistic opportunities to maintain positive relationships and contact with their families and children.' Although this document has now lapsed, it provides a relevant framework for this area. Nonetheless as has been described elsewhere in this report, the visit facilities and options for mothers and their children at Bandyup are inadequate.¹⁹²
- 8.23 Female prisoners are more likely than their male counterparts to have parental and other care responsibilities. As such, maintaining and developing parent-child relationships should be a priority of the women's estate. Furthermore, preserving connections between mothers and their adolescent children is vital to minimising the risk of intergenerational offending. However, as discussed earlier, arrangements for parents who are in custody to have contact with their children who are also in custody are poor.¹⁹³
- 8.24 Bandyup does offer limited day stay and overnight visits in order to reduce the negative impact of a mother's imprisonment.¹⁹⁴ Both options are subject to an application and approval process, which includes input from the Family Links Officer who represents the DCPFS. In order for such visits to be approved, the mother must meet certain standards of prison behaviour and sign a contract of understanding and responsibility, between herself and prison management.
- 8.25 Day-stays are available for children up to the age of 12 years. These visits give the mother and her child or children time to be alone together in a domestic setting.¹⁹⁵ The visits take place in the day-stay facility, a demountable building which is separated from the general prison population. The day-stay facility is equipped with its own kitchen, bedroom, bathroom, laundry facility, and outdoor area. Although the day-stay house is safe, secure, and private, amenities for children over the age of two are limited, and complaints were heard regarding the cleanliness and appropriateness of the facility.
- 8.26 PD10 also provides for overnight stays for women and their children up to the age of six. In this instance however, only those prisoners residing in the nursery houses are eligible for such visits.¹⁹⁶ This means that the only women who can access overnight stays are those who already have a baby with them in the prison. This is seen by the other women at the prison as deeply unfair, which could easily become the cause of resentment and anger among the women. Perhaps for this very reason, overnight stays were not being approved at Bandyup.

192 For an in depth discussion of the state of Bandyup's visits centre, see [6.43]–[6.54].

193 See [6.62]–[6.66].

194 DCS, *Bandyup Women's Prison- Local Order 48 (DRAFT): Day Stay and Overnight Visits* (January 2013).

195 Up to three children are permitted.

196 DCS, *Bandyup Women's Prison – Local Order 48 (DRAFT): Day Stay and Overnight Visits*, (January 2013) [5.1].

- 8.27 This situation was also found during the last inspection of Bandyup, and it is disappointing to find that there has been no change in this area. This does not adequately recognise the role of female prisoners as mothers, and undermines attempts to preserve relationships, and reduce the negative impacts of imprisonment.
- 8.28 PD10 was developed in 2007 – before the introduction of *Women’s Way Forward*, the *Female Offender Framework* and the *Female Offender Policy*. In the last Bandyup inspection report this Office noted that it would be sensible, timely, and good practice to review this policy.¹⁹⁷ Three years on, and with no review having been completed, the need to do so is even greater.

Recommendation 31

Update Policy Directive 10 to provide: (a) more flexible transfer criteria for pregnant women in regional prisons so that they are not routinely moved to Bandyup at 20 weeks and that transfers are based on individual risk assessment; and (b) enhanced opportunities for children to have overnight or day-stays with their mothers or other carers in Bandyup, subject to appropriate risk assessments.



Section of a mural at Bandyup

197 OICS, *Report of an Announced Inspection of Bandyup Women’s Prison*, Report No. 73 (August 2011) 50–51.

ABORIGINAL WOMEN AS PRISONERS

Over-representation Levels

- 8.29 Prior to the commencement of the 2014 inspection, a demographic scan of Bandyup indicated that 45 per cent of the female prisoners were Aboriginal.¹⁹⁸ This means that Bandyup has the highest proportion of Aboriginal prisoners of any metropolitan prison, and is only exceeded by the regional centre prisons of Eastern Goldfields, Greenough, Roebourne, and West Kimberley.
- 8.30 This is not new for Bandyup,¹⁹⁹ but the prison offers little by way of cultural recognition. Other (male) prisons have developed initiatives to enhance the profile of Aboriginal culture throughout the prison, increase Aboriginal engagement with services, and to ensure that Aboriginal voices are represented to prison management. Some of these innovations have included:
- A cultural meeting place;
 - Prisoner designed and painted murals;
 - Regular traditional cook-ups;²⁰⁰
 - Memorial services or similar for those who miss out on funerals;
 - Dedicated staff members (for example the Coordinator of Indigenous and Cultural Affairs at Acacia Prison);
 - Aboriginal language programs; and
 - Elders programs.
- 8.31 Bandyup has none of these. In previous years, Bandyup did have cook-ups and a meeting place; however, it seems that as Bandyup has come under increased population and infrastructure pressure these have fallen by the wayside. The inspection did hear that the kitchen was hoping to reintroduce cook-ups (as discussed in Chapter 6) and this Office encourages the prison and Department to support such this endeavour.
- 8.32 Despite the constant pressure of overcrowding and infrastructure deficits, there are numerous steps that could be taken in order to improve the prison's current level of engagement with its Aboriginal population.

Out-of-country Women

- 8.33 Female prisoners can be held at a number of regional prisons, including West Kimberley, Greenough, Eastern Goldfields, and (to some extent) Roebourne. However, these prisons are male dominated, and the range of services available to female prisoners suffer as a result. Prior to the commencement of the inspection, an analysis of Bandyup's population indicated that more than one-quarter (or 71 women) identified their last address prior to their arrest as being in regional Western Australia.²⁰¹ Just over half of those women (36) identified as being from the greater South-West region, leaving 35 women from the Kimberley, Pilbara,

198 TOMS Data Extraction (6 March 2014).

199 OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 73 (August 2011) 4.

200 In addition to the once-a-year traditional cook-ups during NAIDOC week.

201 Seventy-one individuals out of a total of 282. TOMS Data Extraction (6 March 2014).

Goldfields and central regions.²⁰² This group therefore makes up just over 12 per cent of Bandyup's total population; and includes women from diverse cultures, communities and language groups.

- 8.34 Inspection team members met with a group of out-of-country Aboriginal women during the inspection, and their sense of frustration and disempowerment was palpable. They had been transferred to Bandyup from their home regions for a number of reasons. Some to complete programs that were unavailable in the regions, some for medical treatment (including pregnant women), and some because they were maximum-security, or were at risk in the prison closest to their home. No matter the reason was for their being in Perth, the result was the same – that being so far from home, community and family left them isolated and distressed. This was so overwhelming that almost all questions put to them resulted in the same response – ‘we just want to go home’.
- 8.35 Many of the out-of-country women at Bandyup did not receive visits, and had left children behind. They faced significant communication difficulties, both verbal (as for many English was not their mother tongue), and written due to poor literacy. They furthermore reported that the officers at Bandyup had little understanding of their cultural needs, and that the prison did not allow for appropriate grieving or loss processes.
- 8.36 For those women who had been transferred to Perth for medical treatment, the experience was doubly frustrating, as for security reasons they are not informed about when their treatments will take place or how long they have to continue them for. During the inspection it became obvious that this was causing considerable distress to a number of affected women.

The Prison Aboriginal Services Committee

- 8.37 The Prison Aboriginal Services Committee (PASC) was introduced by the Department to ensure that Aboriginal prisoners departing prison have access to the services and programs they need to facilitate healthy lifestyles in the community. This, in turn was intended to contribute to the reduction of reoffending and Aboriginal disadvantage.²⁰³ The process included bimonthly prison reporting and departmental monitoring and evaluation of progress. The PASC process was managed from head office, but convened locally at all state-run prisons.
- 8.38 However, following the departure of a key individual who drove the process from head office, the PASC system has all but collapsed. Thus, while there is a PASC in place on paper at Bandyup, it does not appear to produce any significant outcomes, particularly in regard to re-entry. Its PASC minutes did not indicate any forward planning or future initiatives, but appeared tokenistic.
- 8.39 The loss of one staff member should not result in initiatives collapsing and processes dedicated to creating equitable outcomes for Aboriginal people cannot rely on the drive of a sole individual. The Department has been reviewing PASC for some time now and it is essential that its ideals are reinvigorated even if its processes are changed.²⁰⁴

202 TOMS Data Extraction (6 March 2014).

203 DCS, *Reducing Aboriginal Disadvantage, A Guide for Aboriginal Services Committees within Western Australian Prisons* (March 2010).

204 This Office acknowledges that the Department's review of PASC was completed in July 2014.

The Aboriginal Visitors Scheme

- 8.40 The Aboriginal Visitors Scheme (AVS) provides an active and positive service to the Aboriginal women at Bandyup. AVS attend Bandyup from Monday to Thursday and also on Saturday mornings. While their original brief may have been self-harm prevention, suicide prevention and crisis management, in reality only they perform a multifunctional role. They assist in resolving feuds among prisoners, provide an informal counselling service, and provide a friendly and familiar face which clearly helps the prisoners and the prison.
- 8.41 Consistent with this Office's findings, AVS representatives indicated that the culture and mood at Bandyup had been declining. They said that some officers did not seem to know who they were or what their role was, and this hampered their ability to move efficiently through the prison. They also felt that the advice they offered about how to manage particular situations or individuals was being treated dismissively.

The Ruah 'Yarning Sessions'

- 8.42 The Aboriginal Life Skills course (or as it was more commonly referred to, the 'Yarning Sessions') provided an excellent example of Aboriginal engagement. Delivered by the external service provider Ruah, this six-week course runs for two sessions a day, one day per week, and has been successfully operating at Bandyup for over three years. The program is run as a recreational activity in line with Bandyup's structured day, and provides a positive example of the benefits positive engagement can offer.



Work and materials from the Ruah 'Yarning Sessions'

- 8.43 The course focuses on the completion of art projects, both individual and group based, in a communal setting. However, the main benefit of the course is the group discussion that takes place as the women are working, where they are encouraged to work through their feelings of grief, loss and anger in a safe and supportive environment. The course is extremely popular and attracts long waiting lists of women keen to participate.
- 8.44 An additional benefit of the course was its inclusion of all Aboriginal cultural groups. The course encouraged women regardless of age, culture, language or ability to get to know one another and build networks of support at the prison. This is vital for out-of-country women who are otherwise at risk of falling through the cracks at metropolitan prisons. Inspection team members who joined the Yarning Session noted the confident, positive interactions of women who had otherwise seemed reluctant to speak up or engage. In this respect the Yarning Session was an inspiring example of Aboriginal engagement and empowerment.

Summary

- 8.45 Despite Departmental documents acknowledging that Aboriginal women in custody have distinct needs, Bandyup is not sufficiently or appropriately responsive.²⁰⁵ Substantive equality requires recognition of the fact that women will engage differently from men, and Aboriginal women will engage differently to non-Aboriginal women. Bandyup caters to a population of 45 per cent Aboriginal women, and must be able to provide services that are adequate and appropriate for this group. The women at Bandyup invariably have such complex backgrounds that they will require support, empowerment, and self-esteem as well as security, control and safety.



A prisoner's artwork

205 DCS, *Female Offender Policy* (September 2011) 1.

MOTHERS AND ABORIGINAL WOMEN: THE GAP BETWEEN POLICY
AND PRACTICE

8.46 The Office therefore expects that the Department, as part of its current restructuring processes, will allocate sufficient resources and personnel to raise the standard of services to Aboriginal women at Bandyup, using substantive equality as a guiding framework.

Chapter 9

HEALTH SERVICES

KEY FINDINGS

- 9.1 One of the announced themes of the 2014 inspection of Bandyup was the appropriateness of mental health services for female prisoners. In order to fully investigate this area, an expert in the area of women's forensic psychiatry was invited to join the inspection.
- 9.2 The inspection found that, despite the efforts of many individuals, the high and complex health needs of women were not being met. Deficiencies in facilities and service delivery were wearying for staff and taking a toll on both general health services (this chapter) and mental health services (Chapter 10):
- The healthcare facilities are unfit for purpose;
 - The Department has failed to properly acknowledge the impact of gender on the management of women in prison. This failure to grasp the principle of equity in healthcare is contrary to the Department's espoused philosophy;²⁰⁶
 - There is a lack culturally safe health care for Aboriginal women;²⁰⁷
 - The level of therapeutic provision, particularly for women who are mentally ill or impaired, is unacceptable; and
 - Chronic underinvestment has put the staff group at risk of losing their identity as a cohesive multidisciplinary team.

INEQUITY IN THE HEALTH CARE OF FEMALE PRISONERS

- 9.3 There is no better example of a population with profound health inequity as the female prison population in Bandyup, just under half of whom are Aboriginal. Indigenous peoples are generally worse off than non-Indigenous people when it comes to the social determinants of health.²⁰⁸ They have a life expectancy 10 to 12 years lower than non-Aboriginal Australians, more disability and a lower quality of life.²⁰⁹ The historical past and loss of connection to traditional lands are examples of social determinants of Aboriginal health and are exacerbated by incarceration.²¹⁰ Overcoming inequities of health is a major drive for the World Health Organization (WHO),²¹¹ and the Commonwealth Government has committed to closing the gap in life expectancy and health outcomes between Aboriginal and non-Aboriginal Australians within a generation.²¹²

206 In response to this finding, the Department has stated that it does grasp the principle of equity, however it is unable to respond to every request within current confines.

207 In response to this finding, the Department claimed that the Aboriginal model of health care is used as a basis. However this Office notes that we have not been provided with any information previously about the Aboriginal model of health care and were not informed of it during interviews with health centre staff.

208 Carson B, Dunbar T, Chenhall RD, and Bailie R (eds), *Social Determinants of Indigenous Health* (NSW: Allen and Unwin, 2007).

209 WHO and Australian Institute of Health and Welfare, *Health Service Delivery Profile: Australia 2012* (2012). <http://www.wpro.who.int/health_services/service_delivery_profile_australia.pdf>

210 Australian Indigenous Health InfoNet, *Summary of Australian Indigenous Health* (2012). <<http://www.healthinfonet.ecu.edu.au/health-facts/summary>>

211 WHO and Commission on Social Determinants of Health, *Closing the Gap in a Generation: Health Equity through Action on the Social Determinants of Health* (2008).

212 WHO and Australian Institute of Health and Welfare, *Health Service Delivery Profile: Australia 2012* (2012).

HEALTH SERVICES

9.4 The Department itself recognises that:

The lives of many women offenders are characterised by a wide range of exclusionary deprivations such as poverty, poor education, lack of employment skills, histories of abuse both as a child and as an adult, unemployment, poor housing, extensive health problems, especially mental health, inability to access services and low life expectancy. This is particularly relevant to Aboriginal women, whose experience of life in society is fraught with danger from violence, social marginalisation and economic disadvantage.²¹³

9.5 It is an unfortunate reality that prisons, both male and female, have to manage significant numbers of offenders who are mentally ill, with histories of substance abuse and trauma. They cannot refuse to take a prisoner from court because they do not have enough beds, there are insufficient staff or the environment is not right. Nor are prisons designed to be therapeutic environments: custodial staff are not trained mental health professionals and managing the immediate risks of suicide and self-harm becomes a predominant focus, leaving specialist staff little or no spare capacity to focus on general mental health needs. Bandyup exemplifies the problem and the situation has deteriorated from an already unacceptable situation in 2011.²¹⁴

9.6 Bandyup's population is so high and so complex that it places constantly rising pressure on an already struggling health care service, and the ability of staff to respond effectively is compromised. The women who responded to pre-inspection surveys rated health care as one of the three worst aspects of the prison, and the survey results were very negative compared with Bandyup in 2011 and the rest of the state.²¹⁵

Positive perception of:	State average ²¹⁶	Bandyup 2011	Bandyup 2014
General health services	45%	45%	14%
Medical specialists	29%	29%	14%
Psychiatric care	19%	27%	14%

Figure 6: Prisoner satisfaction with health services

213 DCS, *Policy Directive 74 – Management of Women in Custody* (2011).

214 See OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 73 (August 2011) and the discussion in Chapter 10.

215 The Department responded to these findings by providing the Office with the results of an internal Patient Feedback Survey conducted mid-2014, which had yielded very positive findings. However, the results of the Department's survey are not comparable to those conducted by the inspection team for a number of reasons. Firstly, the Department's survey only captured patients who had just exited an appointment at the medical centre, rather than a random scan of the entire prison population. This would exclude those prisoners who have been unable to secure a medical appointment (one of the main complaints heard). While still in the medical centre, the women were asked for identifiable information, including each individual's age, Aboriginality, and which medical service they had just seen. This raises concerns about confidentiality. Some of the questions were also potentially leading (for example 'Is the health centre clean and tidy?' compared to 'How did you find the condition of the health centre?'). Furthermore the Department compared its 2014 survey results favourably with a previous survey conducted in 2006, despite the fact that the surveys asked different questions.

216 This refers to the average findings from pre-inspection surveys conducted in the fourth round of prison inspections.

PHYSICAL ENVIRONMENT AND PERSONAL SAFETY

- 9.7 It was most concerning to find that, compared with the 2011 inspection and other prisons, health staff reported that they did not feel safe. During the on-site phase of the inspection, a mental health nurse used a personal duress alarm ('PDA') in response to a threatening situation. Custodial staff are to patrol the health centre on an hourly basis, but in this case the response was slow. Due to PDA inaccuracies, the incident's location was not correctly identified, and responding staff went to the wrong place.²¹⁷
- 9.8 While this incident was being discussed, a Code Red was called in connection with an incident of self-harm. This was the second such alarm in the space of two and a half hours. The responses in these cases were better but the frequency of alarms is indicative of the risks and stress for health staff.
- 9.9 In 2002, Bandyup held 113 prisoners and health services were not meeting acceptable standards.²¹⁸ By the time of the 2014 inspection, there were 290 prisoners. However, the health centre footprint has remained unchanged. The overwhelming message from staff, and one we endorse, was that the health centre building and facilities are no longer fit for purpose. Issues of concern included insufficient space, corridors which are too narrow and therefore unsafe, and insufficient medical equipment.
- 9.10 The Clinical Nurse Manager stated that room availability was one of the most difficult aspects of her job. In order to provide two additional offices, a store room had been converted but space was still inadequate.²¹⁹ The health centre typically accommodates GPs, general and mental health nurses, substance misuse nurses, a pharmacy technician, Prisoner Counselling Service (PCS), and administrative staff. In addition, rooms are intermittently required for visiting external health providers, including the psychiatrist, Aboriginal re-entry worker, physiotherapist, podiatrist, optometrist, and child health nurse.
- 9.11 In addition to being overcrowded, Bandyup's health centre is busy, noisy, and lacks privacy, and maintaining cleanliness is a constant challenge. Yet, to date, the Office is unaware of any departmental plans to improve the facilities.
- 9.12 The centre's infection control program is rudimentary. It has identified deficiencies related to the physical environment (layout, function and aesthetics), increasing daily patient throughput, infection control equipment, staff work practices (including responsibility and accountability for practice), and education. However, one of the centre's priorities for 2014 is to address the deficits identified in infection control audits.²²⁰ Action has already been undertaken to address cleaning and maintenance deficits. The centre has been de-cluttered and painted, and some maintenance needs have been attended to. Snake infiltration has become a definite risk however, with multiple infiltrations around the prison in the summer months. A program is in place to de-clutter the exterior of the health centre and to remove spiders and webs.

217 This issue is discussed further in Chapter 3.

218 OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 13 (June 2002), 6–7 and Chapter 6.

219 This is not atypical for Bandyup. Numerous staff work out of converted store rooms, broom cupboards, and toilets.

220 Hoy A & Brent M, *Infection control audit report recommendations* (Western Australia: DCS, 2014).

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- 9.13 The medical centre monitors prisoners for signs and symptoms of infection/infectious disease. It is able to triage potentially infectious prisoners in the waiting area or the two-bed ‘infirmary’. This is located within the health centre but away from the mainstream of prisoners seeking treatment, and can also be used for post-operative convalescence. However, due to space restrictions, the beds are pushed against the walls. This is an infection risk. It also inhibits staff ability to appropriately lift patients with limited mobility. This could result in staff injury and departmental liability.

WHO ARE THE PATIENTS?

- 9.14 Female prisoners, while not a homogenous group, tend to have experienced socioeconomic deprivation, childhoods in care, poor educational attainment, employment difficulties, dysfunctional relationships, sexual trauma and physical and psychological violence. They have multiple and complex health needs, but below average rates of contact with health services.²²¹ As a group, their rates of chronic disease are high, with conditions such as asthma, diabetes, hepatitis and cardiovascular disease being common. The prevalence of ear disease and hearing loss is significantly higher in Aboriginal peoples. Female prisoners are at particular risk of sexually-transmitted diseases and HIV, blood-borne viral disease (the inspection team was advised that the prevalence of Hepatitis C remained at 70%), alcohol and drug addiction, dental disease and mental health conditions.
- 9.15 Researchers have concluded that women generally find imprisonment more distressing than men, and separation from family and children is likely to be a contributing factor.²²² The inspection team was advised that about 25 per cent of the prison population was registered with the Bandyup mental health team and the actual number of people with mental health issues is probably higher. Mental health is fully discussed in the next chapter.

STAFFING

- 9.16 The Clinical Nurse Manager, who had been in the substantive post for 12 months, advised that there had been five acting clinical nurse managers in recent years. The position is responsible for health services at both Bandyup and Boronia and for influencing statewide clinical practice in the care of women prisoners. However, the job description for a Clinical Nurse Manager is a generic, statewide document and does not set out the specific responsibilities necessary for the delivery of gender-informed healthcare. If Departmental aspirations are to be met, this should change.

Recommendation 32

Re-define the job description of the Bandyup Clinical Nurse Manager to focus on developing gender-informed clinical expertise in the team and providing a resource and contact point for other prisons holding female prisoners.

221 Ginn S & Robinson R, ‘Healthcare in Prisons: Women Prisoners’ (2013) *BMJ*.
<http://www.rcn.org.uk/__data/assets/pdf_file/0011/510500/Women_Prisoners_BMJ.pdf>

222 Ibid.

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- 9.17 The Clinical Nurse Manager informed inspection staff that she attends Boronia two or three times a week, and noted that a major proportion of her time was spent managing staff to cover rosters. The inspection team was advised of chronic and severe shortages in the clinical nursing team, equating to four FTEs. The health centre is staffed around the clock, with two staff at night and on weekends. However, with the staff shortages this has been difficult to sustain. Agency staff are occasionally employed, but may be unfamiliar with a custodial setting. The ability of contract and agency staff to take leave on request puts additional pressure on rosters. Furthermore, the gender mix of staff also impacts on rostering as two male staff cannot be rostered together. Seventeen shifts had been unfilled during the fortnight preceding the inspection alone. The problem was compounded by the fact that nursing staff from Boronia (who were contracted to work at Bandyup if required) were reportedly reluctant to provide cover due to the acuity of Bandyup's prisoners.
- 9.18 GP coverage is provided by one full-time medical officer employed by the Department, who provides 75 hours of medical care per fortnight. In addition there are four part-time medical officers who provide a total of 56.5 hours of medical care per fortnight. In the event of absence due to sickness, nurses are able to access an on-call doctor through an 'e-consultation' service.
- 9.19 The North Metropolitan Area Health Service has been engaged to provide an Aboriginal Prisoner Re-entry Health Service, funded by the Council of Australian Governments (COAG).²²³ The program aims to engage with Aboriginal prisoners six months prior to their release, to ensure continuity of health care after release. It includes coverage of chronic health issues, drug and alcohol problems, and mental health.
- 9.20 The inspection team was provided with an MoU between Bandyup and the North Metropolitan Area Health Service, and a similar MoU between the Department and the Western Australia Country Health Service. However, both documents were out of date. The team was advised that an Aboriginal re-entry health worker had been appointed to work with prisoners in the six months prior to release. This appointment was due to cover both Boronia and Bandyup, assisting the continuity of care for the small number of Aboriginal women who are transferred from Bandyup to Boronia. This is seen as an improvement from the previous position, when Bandyup fell under the North Metropolitan region and Boronia under the South Metropolitan region, necessitating case load transfer to another re-entry worker.²²⁴
- 9.21 Unfortunately, the re-entry worker will only be able to attend Bandyup one day a week. At the time of the inspection, Aboriginal women accounted for 45 per cent of the Bandyup population and while not all of them will be seen by the re-entry worker, Bandyup releases more women than Boronia, the latter facility also generally accommodating a more settled population.²²⁵

223 Although funded federally, the program is operated by the Western Australian Department of Health.

224 The cessation in federal funding for this initiative has meant that the WA Department of Health is no longer able to fund this position.

225 It is noted that at the time of writing, the COAG funding for the Aboriginal Prisoner Re-Entry Health Service had not been extended, and the program was no longer operating at any prison in Western Australia.

MODELS OF HEALTH STAFFING AND EQUITABLE PRIMARY CARE DELIVERY

- 9.22 Prison healthcare, for both men and women, is best regarded as a “specialist” type of primary care, with a different orientation from that offered to the general population.²²⁶ It needs to meet the ordinary demands for care but also be oriented towards the specific pathologies that are known to be over represented in a prison population: hepatitis, HIV, respiratory diseases, sexually-transmitted diseases, substance abuse and mental illness.
- 9.23 A gender-sensitive prison health care system is one which reflects the special health care needs of women in prison by providing appropriate facilities and regimes, and by allowing easy access to health and social support.²²⁷ It should be able to cope with complex and sensitive issues, including reproductive and sexual health needs.
- 9.24 It follows that for Bandyup to be considered a provider of gender-sensitive health care, services need to be delivered according to a primary care model. This will require a holistic approach to assessing women’s health needs and a range of services and health promotion activities,²²⁸ including self-care, nutrition, exercise, preventive screening services, and advice and help with day-to-day health problems.²²⁹
- 9.25 Staff, who are striving to deliver a level of care equivalent to that offered outside prison, appeared wearied and overwhelmed by the skewed morbidity profile, which is significantly heavier than the general population.
- 9.26 Some staff were frustrated by the prisoners’ negative survey responses and several commented that the patients received better health care in prison than they themselves received. Typical comments included that patients ‘want everything yesterday’, were attention seeking and unduly demanding, and were unhappy at having to wait for external specialist appointments. These attitudes were of serious concern: they are out of line with the Department’s expectations of its staff and indicate a failure to appreciate that incarcerated women have disproportionately disadvantaged health needs.
- 9.27 The principle of “equivalence of care” in prison medicine, by which prison health services are obliged to provide prisoners with care of a quality equivalent to that provided for the general public, is cited in numerous national and international directives and recommendations.²³⁰ However, it is generally now recognised that for primary care in prisons to be effective, it is not enough to provide equality of health care, nor is it always appropriate to measure equivalence of healthcare delivery in terms of process, as this fails to highlight important differences between the outcomes of healthcare delivery within and outside prisons.²³¹

226 Niveau G, ‘Relevance and limits of the principle of “equivalence of care” in prison medicine’ (2007) 33(10) *Journal of Medical Ethics* 610–613.

227 WHO & UNODC, *Women’s health in prison: Correcting gender inequity in prison health* (2009). <http://www.euro.who.int/__data/assets/pdf_file/0004/76513/E92347.pdf?ua=1>

228 Ibid.

229 According to the Department the health care delivered at Bandyup is primarily a holistic service, which is followed within available resources.

230 Niveau G, ‘Relevance and limits of the principle of “equivalence of care” in prison medicine’ (2007) 33(10) *Journal of Medical Ethics* 610–613.

231 Charles A & Draper H, ‘Equivalence of care’ in prison medicine: is equivalence of process the right measure of equity?’ (2012) 38(4) *Journal of Medical Ethics* 215–218.

- 9.28 Despite the continued rise in prisoner numbers over the past three years, no additional investment has gone to either Bandyup’s medical infrastructure or team. This is demoralising the existing skilled workforce, impacting on attitudes to patients, and complicating recruitment to this specialist area.

Recommendation 33

Focus on improved healthcare outcomes not ‘community equivalence’ when funding primary healthcare in Bandyup. Invest accordingly in improved physical infrastructure and adequate staff support and training.

- 9.29 Clinical practice at Bandyup followed a rather vague ‘business planning model’. By necessity, it had become mainly a reactive service, responding to acute demands. It was unable to deliver on the chronic health needs or focus on health promotion or the holistic care female prisoners require. Like custodial staff, medical staff appeared unaware of woman-centred policy imperatives from DCS.²³²
- 9.30 Health staff voiced concern about the absence of a shared model of care. They felt this worked against holistic practice, perpetuated professional silos and resulted in fragmented, and potentially compromised, care. The inspection team heard that within each discipline, valuable health information was collected, but not shared. This resulted, for example, in the dentist triaging referrals without access to nursing consultations for dental pain, other than scrolling through lengthy electronic health records.
- 9.31 The 2011 inspection report recommended that the Department develop a health staffing model that:
- 1) Is based on prisoners’ evidenced health needs;
 - 2) Reflects the cultural diversity of the prisoner population;
 - 3) Enables comprehensive health care, including acute care, preventive care, health promotion and re-entry planning; and
 - 4) Enables appropriate and effective portfolio management of care.²³³
- 9.32 The Department claimed at that time that this model was already in place,²³⁴ and that these items were covered by the Department’s four cornerstones of care model.²³⁵ However, in this Office’s view, and the view of different independent experts, it was not happening in 2011 and was still not happening in 2014.

Recommendation 34

Revisit the four cornerstones of care as a model for health staffing, as espoused by the Department in 2011, and develop a health staffing model for Bandyup as recommended by the 2011 inspection.

232 DCS, *Female Offender Policy* (September 2011) 9.

233 OICS, *Report of an Announced Inspection of Bandyup Women’s Prison*, Report No. 73 (August 2011).

234 DCS, *Health and Medical Research Protocol Research and Evaluation Committee* (November 2013).

235 The Department’s four cornerstones of care are: co-morbidity, chronic disease, BBV and infectious disease, and acute primary care.



Equipment in the health centre

- 9.33 With no shared model of care in practice, it was unsurprising that some professional groups felt as if they practised in isolation.²³⁶ The 2011 inspection recommended development of a health staffing model. The Department's response was that e-learning was available through the Health Service Directorate (HSD) portal and that staff were aware of the commitment by HSD to ongoing education. In 2014, the inspection was advised that four mandatory modules are available on e-learning, namely, cardiopulmonary resuscitation (CPR), fire drill, manual handling and ethical decision-making. The Clinical Nurse Manager stated that all nurses were up to date with their e-learning training requirements, but a number of other training opportunities were apparently deemed too expensive by the Department.
- 9.34 Basic mental health training for custodial staff was intermittently delivered by the mental health nurses. This is an excellent example of relevant training being developed 'in house' to improve the skills of custodial staff who by definition have the greatest contact with mentally ill prisoners. However, it needs further promotion, as only 17 per cent of respondents to the pre-inspection survey felt they had been adequately trained to manage prisoners with mental health issues.

236 The Department has stated that there is a shared model of care, however it is unable to fulfil its potential within existing resources.

HEALTH SERVICES

- 9.35 The *Working With Female Offenders* course does examine a range of issues relevant to health staff but staff shortages made it difficult to be released for three days, and none had attended. A primary health team in a women's prison may require additional training in reproductive and sexual health problems, and in primary mental health support. They should also know how to access therapy to help to process trauma and to promote the wellbeing of women with histories of abuse.²³⁷
- 9.36 The lack of professional development opportunities, combined with low staffing and poor infrastructure, was affecting staff morale and impacting on their ability to deliver comprehensive health care in a safe environment.²³⁸

Recommendation 35

Ensure that health staff maintain and develop professional competencies by encouraging and funding attendance at external programs and courses.

CARE PORTFOLIOS AND HEALTH REGISTERS

- 9.37 At every prison, separate care portfolios are held by nominated nurses. The portfolios target areas including infection control and blood-borne viruses, chronic disease management, and comorbidity/alcohol and substance use. The purpose of care portfolios is to improve care planning, networking with community programs, patient education and discharge planning.²³⁹
- 9.38 Blood-borne viruses are prevalent in the prison population and this portfolio is absolutely critical.²⁴⁰ It was held by a part-time nurse, who found it difficult to manage the role on top of her other workload. Active management of other portfolios was similarly affected. Many health care staff no longer feel able to effectively deliver on their portfolios.
- 9.39 Registers are maintained for pap smears, mammograms for older women and immunisations.²⁴¹ However, the inspection team heard from women who believed they should have been offered smears but had not, and that mammography was not available for younger women with a familial risk for breast cancer. The Clinical Nurse Manager said that due to the need to prioritise resources and avoid 'over-servicing', pap smears were performed as and when they were due and were generally not performed on young women, remandees or women serving brief sentences. This is a missed health opportunity for a highly vulnerable group. It is also out of line with the Department's commitment to an equitable health service.²⁴²

237 WHO & UNODC, *Women's health in prison: Correcting gender inequity in prison health* (2009). <http://www.euro.who.int/__data/assets/pdf_file/0004/76513/E92347.pdf?ua=1>

238 The Department has noted that Health Services provides professional development where possible, and would welcome additional funding to expand training.

239 Stevens M, DCS, *Assessment of Clinical Service Provision of Health Services of the Western Australian Department of Corrective Services* (2010).

240 See also [9.63].

241 The Department has noted that these registers were a pre-cursor to the electronic health record.

242 DCS, *Female Offender Framework* (September 2011).

9.40 Staff faced similar challenges managing care portfolios in 2011, but the growth in numbers has stretched unchanged resources even more. As a result, the health team cannot deliver on the Department's key strategies.²⁴³ A failure to deliver on core health needs, exacerbated by an environment of overcrowding and a high level of morbidity, places patients at risk. Additionally it is demoralising for staff, who reported feeling overcommitted, unsupported by head office, and under increasing pressure.

CLINICAL SCREENING AND ASSESSMENT

9.41 On reception, all women are screened by the primary clinical nursing staff. The Initial Health Screen ('IHS') is a generic tool used across the prison estate. It collects basic health information and screens for chronic disease conditions such as cardiovascular disease, asthma, diabetes, epilepsy, and skin problems. It also screens for conditions which are particularly overrepresented in the prison population, such as Hepatitis C, sexually-transmitted infections, blood-borne viral infections, drug and alcohol misuse and mental ill health. However, it does not screen for visual or hearing difficulties, despite their prevalence in Aboriginal people (45 per cent of Bandyup's population).²⁴⁴

9.42 Consistency of clinical practice is determined across the prison estate by centrally managed policies and procedures. However, the Department's adherence to a generic, 'universal' treatment and care planning tool, and a reliance on female GPs addressing gender issues in future consultations with individual women, renders the IHS of limited value. For example, it includes no questions regarding the following issues of key relevance to women's health:

- History of domestic violence or sexual abuse;
- Parental responsibility;
- Cervical screening history (pap smear);
- Breast pathology or mammography;
- Menopause; or
- Osteoporosis screening.

9.43 The reproductive/gynaecological health screen is also superficial. The IHS does not collect information on a woman's history of live births, the date of the last delivery, or history of miscarriage, stillbirth, or termination. This generates significant risks.²⁴⁵ If a woman is or may be pregnant, the tool refers her to a doctor but it does not also refer her to a dentist, despite the recognised need for good dental care during pregnancy.²⁴⁶

243 DCS, *Women's Way Forward: Women's Corrective Services Strategic Plan 2009–2012* (2009) 4.

244 Burns J & Thomson N, *Review of ear health and hearing among Indigenous Australians* (2013).
<<http://www.healthinfonet.ecu.edu.au/other-health-conditions/ear/reviews/our-review>>

245 See also [9.56].

246 Samant A, Malik CP, Chabra SK, & Devi PK, 'Gingivitis and periodontal disease in pregnancy' (1976) 47(7) *Journal of Periodontology* 415–418.

- 9.44 The tool also has little value for mental health screening. Despite higher rates of mental disorder in prisoners compared to the general public,²⁴⁷ in female prisoners compared to male prisoners,²⁴⁸ and particularly in female Aboriginal compared to female non-Aboriginal prisoners,²⁴⁹ studies have found poor rates of detection of mental illness among prisoners.²⁵⁰ This is despite mental disorder being more prevalent among those screened at the time of reception into prison compared with those already serving a sentence.²⁵¹
- 9.45 Many women, particularly Aboriginal women, are in prison for short periods.²⁵² The inspection team was advised that all women receive health interventions, as generated by the IHS, regardless of the length of stay. This includes pap smears, blood tests, alcohol and drug consultation and GP referral. However, the pressure on staff and clinics was such that rather than being a health opportunity, providing such services to short stay prisoners was seen as a drain on resources.
- 9.46 An annual health assessment, which takes about 30 minutes, is completed on the anniversary of the prisoner's reception.
- 9.47 In summary, the IHS screening tool is of limited value for use with female prisoners, particularly women who may be mentally disordered, and especially so if they are Aboriginal.²⁵³ Bandyup must develop improved health care plans so that individual needs can be met. These individual health care plans should be informed by comprehensive screening and consideration of socioeconomic backgrounds, education level, health and trauma histories, current health status. They also need to identify what skills are required to effectively address each woman's health needs.²⁵⁴

Recommendation 36

Recognise the discrimination inherent in the current health screening tool and develop a tool that is gender-sensitive and culturally appropriate. The tool should include improved screening for visual and hearing difficulties, reproductive/gynaecological issues, and mental illness/impairment.

247 Fazel S & Seewald K, 'Severe mental illness in 33,588 prisoners: systematic review and meta regression analysis' (2012) 200(5) *British Journal of Psychiatry* 364–373.

248 Butler T & Milner L, NSW Corrections Health Service, *The 2001 Inmate Health Survey* (2003).

249 Butler T, Allnutt S, Kariminia A & Cain D, 'Mental health status of Aboriginal and non-Aboriginal Australian Prisoners' (2007) 41(5) *Australian and New Zealand Journal of Psychiatry* 429–435.

250 Birmingham L, Gray J, Mason D, & Grubin D, 'Mental illness at reception into prison' (2000) 10(2) *Criminal Behaviour and Mental Health* 77–87.

251 Butler T, Allnutt S, Kariminia A & Cain D, 'Mental health status of Aboriginal and non-Aboriginal Australian Prisoners' (2007) 41(5) *Australian and New Zealand Journal of Psychiatry* 429–435.

252 For example, seven days in custody for unpaid fines. Bartels L, Australian Institute of Criminology, *Diversion Programs for Indigenous Women*, Research in Practice Report No. 13 (December 2010).

253 This Office acknowledges the Department's position that the IHS is an effective tool and that to include the suggested areas would make the process inappropriately lengthy. Nonetheless we maintain that the IHS lacks a gender-informed approach, and is a missed opportunity to obtain relevant medical information in the first instance.

254 WHO & UNODC, *Women's health in prison: Correcting gender inequity in prison health* (2009). <http://www.euro.who.int/__data/assets/pdf_file/0004/76513/E92347.pdf?ua=1>

ACCESS TO HEALTH CARE

- 9.48 In order to make an appointment with health services at Bandyup, women must complete a Nursing Interview Request Form (known as ‘the purple form’). These are available in each unit for the woman to complete and deposit in a locked and marked box. The form asks for the reason for consultation, who they wish to see, their perceived urgency to be seen, and details of their availability. The forms are collected every afternoon and sorted by a healthcare administrator. It is generally not possible to prioritise appointments from the information received. The form advises the woman that she will receive an appointment card on the morning of her appointment, and that non-attendance will indicate that she no longer wishes to be seen.
- 9.49 It is important to note that many female prisoners may not be literate enough to complete a request for medical consultation form, let alone have sufficient health knowledge to gauge the urgency of their own need or what service they require.
- 9.50 The ‘purple form system’ was brought back into Bandyup prior to the 2011 inspection.²⁵⁵ It replaced a system where women simply had to provide their names and the aim was to improve triaging. However, the purple form system remains fraught with issues, especially for those groups who already have a lower rate of consultation, such as Aboriginal women, the seriously mentally ill, and those with learning disabilities. The inspection team heard from a number of sources that Aboriginal prisoners felt disadvantaged in accessing healthcare.
- 9.51 Both staff and prisoners appeared disillusioned with the ‘purple form’. The inspection team was advised that the time from ‘purple form’ triage to appointment was generally two to three days. However, this was not the experience of the women. Many did not trust the system and said it was difficult to get access to the health centre. They reported that it could take weeks to be seen, and that many complaints were brushed off as ‘drug-seeking behaviours’. A further concern is that once a woman has submitted a form, she has no way of knowing if her request has been processed, often resulting in multiple purple forms being submitted for the same complaint.

MEDICATION MANAGEMENT

- 9.52 Women are asked about their use of prescribed medications on reception and their consent is gained in order to verify this. Health care staff said every effort is made to ensure that medications are not stopped suddenly to ensure safe continuity in treatment. However, many women claimed this was not the case. Some said they had been at Bandyup for several days without medication and that requesting medication was dismissed as ‘drug-seeking’.²⁵⁶ On the other hand, some patients with co-morbid substance abuse problems felt they had been inappropriately prescribed opiate substitution medication, including methadone.

255 OICS, *Report of an Announced Inspection of Bandyup Women’s Prison*, Report No. 73 (August 2011) [9.36].

256 It is noted that the Department maintains that the use of the term ‘drug-seeking’ is an acknowledgement of behaviour. Its use may not be intended as derogatory, however many women spoken to at Bandyup felt that its use was dismissive and prevented them accessing the treatment they felt they needed.

- 9.53 Both staff and prisoners were concerned that the administration of medication clashed with other scheduled events such as visits, recreation, and canteen spends.²⁵⁷ Two nurses administer medications together on the units twice daily. The morning round starts around 7.40 am, after the prisoners have been counted, and takes about an hour. The afternoon round starts at about 4.30 pm and takes about an hour and a half.
- 9.54 However, the safe and timely administration of medication is compromised by the prison regime. Some psychotropic medications for mental disorder have unwanted effects such as sedation. They should be taken at night not at 4.30 pm. Yet sedating medication is administered at a time that is not in keeping with its effects or licensing recommendations. This can cause the user to sleep in the early evening and wake in the early hours of the morning, compromising treatment and potentially destabilising the patient's mental state and safety.
- 9.55 Some medications are 'tradable' and staff advised that the secreting of medications is common at Bandyup. They said vulnerable patients with mental illness can either be 'stood-over' and threatened for medication, or may try to trade themselves. Custodial staff are present to manage any attempts to conceal or trade medications. However, the problem is exacerbated as those women receiving Schedule 4 and 8 drugs are required to wait outside the health centre at specific times, and are therefore highly visible and identifiable.²⁵⁸

Recommendation 37

Review medication administration processes at Bandyup and other prisons to ensure that they are safe and timely, in keeping with accepted clinical practice and licensing recommendations.

HEALTH SERVICES FOR RESIDENT CHILDREN

- 9.56 A child health nurse from Midland Child Health Centre visited fortnightly to see new mothers and resident babies, and postnatal care is provided by staff from King Edward Memorial Hospital. As the IHS does not include reproductive history, mothers who have been imprisoned during the postpartum period and who do not have their babies with them, are not detected. The inspection team met an Aboriginal woman who came to prison two weeks after delivery, without her baby. She said she had not received any additional healthcare to monitor her physical and emotional health. The postpartum period is a time of major physical and emotional re-adjustment and requires monitoring for post-delivery complications. It is also a time when women are at increased risk of mental health problems. Failure to identify such women is a major health risk.²⁵⁹
- 9.57 Ngala assists with programs for new mothers, holding information sessions on topics such as feeding and teething. The mothers are also offered instruction on CPR and other first aid techniques by health centre staff. Mothers are able to access infant paracetamol from the health centre but there is no additional budget for this or any other infant health products. In the event that an infant becomes sick, health centre staff provide a primary care health assessment, with GP consultation as necessary.

257 See [6.67]–[6.73].

258 Schedule 4 refers prescription only medicines, while Schedule 8 refers to controlled drugs.

259 It is acknowledged that Health Centre staff are responsible for maintaining care for prisoners and will identify women at-risk.

PREVENTIVE CARE AND HEALTH PROMOTION

- 9.58 Imprisonment provides an opportunity to improve the health of people who usually slips through the healthcare net. This includes preventive care and health promotion programs.²⁶⁰ Efforts to promote health and preventive care need to be maintained when women are released into the community, as the majority will return to the same socio-economic situation that they were in at the time of their imprisonment.
- 9.59 The Clinical Nurse Manager advised that health promotion strategies were held concurrent with campaigns for the general public.²⁶¹ Awareness campaigns mainly consisted of leaflets and prominently displayed posters in the health centre. Staff were aware of the limitations of campaigns which assume literacy, but observed that women needed incentives to participate, and with limited staff, space and resources, the centre is simply unable to do more. These limitations also precluded the use of group activities to address issues such as healthy eating and exercise.
- 9.60 There were no culturally secure health promotion strategies developed for Aboriginal women. The team was advised that the Aboriginal re-entry worker was responsible for incorporating discussion about culturally sensitive health issues in her engagement with Aboriginal women.
- 9.61 The health care team also promoted health awareness for staff. In October 2013, they hosted a Wellness Day, screening staff for hypertension and diabetes, raising alcohol awareness and offering meditation techniques. The day was well attended. The Clinical Nurse Manager advised that she had been asked to chair a reinvigorated bimonthly Health and Wellness Committee, to consider issues such as stress relief in custodial staff and the promotion of team resilience.
- 9.62 Bandyup provides a number of health education initiatives including *Health In Prison/ Health Outta Prison* (or *HIP HOP*), a blood-borne virus (BBV) education program, which is delivered to all women on entry and release from prison. It covers the transmission risks and means of prevention for viruses such as HIV, hepatitis B and C and sexually transmissible infections. The program is two hours in length and is conducted fortnightly to groups of six to 12 women by externally trained staff from Hepatitis WA.
- 9.63 The management of prisoners with BBV at Bandyup is affiliated with Royal Perth Hospital and Fremantle Hospital. The inspection team were informed that approximately 70 per cent of the prisoner population were infected with hepatitis B and/or C. All prisoners entering the prison are offered BBV screening including pre and post-test counselling. BBV status remains confidential and known only to medical centre staff, unless the prisoner discloses status to others.
- 9.64 Unfortunately, there was strong anecdotal evidence from staff and prisoners that unsafe needle sharing and at-risk behaviour is continuing at the prison.

260 Charles A & Draper H, 'Equivalence of care in prison medicine: is equivalence of process the right measure of equity?' (2012) 38(4) *Journal of Medical Ethics* 215–218.

261 This included World Asthma Day, Diabetes Week, Breast Cancer month, the QUIT smoking cessation campaign and Red Nose Day (SIDS).

Chapter 10

MENTAL HEALTH AND ADDICTIONS

MENTAL DISORDER IN PRISON – HOW BIG IS THE PROBLEM?

- 10.1 The relationship between mental ill health and offending is complex. The socioeconomic disadvantage experienced by female offenders is also shared by women with mental illness.²⁶² It is a sad observation that a considerable number for whom care in the community has failed, end up in prison.²⁶³ Mental disorder in prison is higher among women than men, and more prevalent among those screened at the time of reception into prison compared with those already serving a sentence.²⁶⁴
- 10.2 Aboriginal women prisoners are one of the most psychologically vulnerable groups in the country.²⁶⁵ They are more likely to screen positive for symptoms of psychosis in the prior women. They are more likely to be depressed than non-Aboriginal women and to have a diagnosis of obsessive compulsive disorder,²⁶⁶ and are more likely to be classified as having high or very high psychological distress.²⁶⁷
- 10.3 The level of psychiatric morbidity at Bandyup is high, and in some cases it is clearly and distressingly visible. During the inspection approximately 80 patients (28% of the population) were registered as receiving mental health services, and approximately half were Aboriginal. However, as the screening process on reception does not adequately detect psychiatric morbidity, this is likely to be a significant underestimate.²⁶⁸
- 10.4 There is also increasing professional awareness of the presence of neuro-developmental disorders such as Fetal Alcohol Spectrum Disorder (FASD) and Attention Deficit/Hyperactivity Disorder (ADHD), in the prison population, the former being more prevalent in Aboriginal than non-Aboriginal children.²⁶⁹ The plight of those with an intellectual impairment has recently come to public attention with the case of Rosie-Anne Fulton, a young Aboriginal woman born brain-damaged with fetal alcohol syndrome.²⁷⁰
- 10.5 While there is currently no Australian estimate of the number of offenders with FASD, overseas studies of individuals with FASD demonstrate high rates of contact (60%) with the criminal justice system.²⁷¹ ADHD is particularly frequent in adolescent and young adult female offenders and increases the risk of further psychiatric morbidity. Neuro-developmental disorders and intellectual impairment are also associated with additional psychiatric morbidity and substance misuse.

262 DCS, *Policy Directive 74 – Management of Women in Custody* (2011); *United Kingdom Department of Health, Women’s Mental Health: Into the Mainstream Strategic Development of Mental Health Care for Women* (2002).

263 Niveau G, ‘Relevance and limits of the principle of “equivalence of care” in prison medicine’ (2007) 33(10) *Journal of Medical Ethics* 610–613.

264 Butler T, Allnutt S, Kariminia A & Cain D, ‘Mental health status of Aboriginal and non-Aboriginal Australian Prisoners’ (2007) 41(5) *Australian and New Zealand Journal of Psychiatry* 429–435.

265 Ibid.

266 Ibid.

267 Ibid.

268 Birmingham L, Gray J, Mason D, & Grubin D, ‘Mental illness at reception into prison’ (2000) 10(2) *Criminal Behaviour and Mental Health* 77–87.

269 Bower C, Silva D, Henderson TR, Ryan A, & Rudy E, ‘Ascertainment of birth defects: the effect on completeness of adding a new source of data’ (2000) 36(6) *Journal of Paediatrics and Child Health* 574–576.

270 OICS, *Mentally impaired accused on ‘custody orders: Not guilty, but incarcerated indefinitely* (April 2014). See also: <<http://www.abc.net.au/lateline/content/2014/s3962171.htm>>

271 National Indigenous Drug and Alcohol Committee, *Addressing Fetal Alcohol Spectrum Disorder in Australia* (2012); Streissguth AP, Brookstein FL, Barr HM, Sampson PD, O’Malley K, & Young JK, ‘Risk factors for adverse life outcomes in foetal alcohol syndrome and foetal alcohol effects’ (2004) 25(4) *Journal of Developmental and Behavioural Paediatrics* 228–238.

- 10.6 Bandyup is not a therapeutic environment and that was never its purpose: it is a prison, not a health facility. While it may provide a roof for mentally ill women who are in contact with the law, it is overcrowded, there is bullying and fighting, and health care is poorly resourced. Some symptoms of mental disorder can be mistaken for difficult, obstructive behaviours which disrupt prison routine. This can place those with mental illness at risk of disciplinary processes or assault and, as noted earlier, Bandyup has by far the highest rate of assaults on staff of all the state's prisons.
- 10.7 During 2013, Bandyup's mental health patients accounted for a significant number of incidents that required monitoring under the ARMS policy. However, as already discussed, most custodial staff felt ill-prepared to manage patients with mental illness. They were keen to improve their knowledge and understanding but while this is desirable, it is not a substitute for specialist professional care.

PRISON COUNSELLING SERVICE

- 10.8 The Prison Counselling Service (PCS) is managed off-site through the Offender Services Division of the Department. At Bandyup, it is made up of four clinical psychologists and one social worker. PCS staffing levels varied in the 12 months prior to the inspection, with multiple positions being covered by temporary transfers and fixed term contracts. Historically, PCS was also expected to provide counselling services to Boronia two to three days per week. This was supposed to have changed after August 2013, when a part-time counsellor position was created at Boronia. However, no appointment had been made and Bandyup PCS continued to cover this role.
- 10.9 In summary, PCS staffing at Bandyup has not expanded to take account of the growing numbers and needs of the prison population. It is also effectively depleted by 0.8 FTE from what has been approved. The inspection team was advised that recruitment to the permanent vacancies was in progress for Boronia and Bandyup. To further complicate matters, although the PCS have requested an additional full-time position at Bandyup, they simply do not have the office space for five practitioners.
- 10.10 PCS play a major role in self-harm and suicide prevention. This is managed through the At Risk Management System (ARMS) and the Support and Monitoring System (SAMS). ARMS is overseen by the Prisoners Risk Assessment Group (PRAG). Due to the dynamic and high-risk nature of Bandyup's population, PRAG meet twice weekly for a full review and on the remaining weekdays to discuss new cases and prisoners placed in the Crisis Care Unit (CCU).
- 10.11 The percentage of prisoners managed as part of ARMS is proportionately higher in Bandyup than other prisons. On average, three new prisoners are placed on ARMS per day, and approximately four to five have daily ongoing risk monitoring. The overall referral rate to PCS has increased by 19 per cent in the last three years. It was reported that a growing proportion of ARMS referrals received by PCS are mental health-related, and deemed inappropriate for ongoing PCS review. Women with 'mental health issues' account for approximately 36 per cent of threats and incidents of non-critical self-harm at Bandyup, and as stated previously, the focus across the estate is on the managing at-risk prisoners through ARMS, SAMS and PRAG.

- 10.12 In addition to attending PRAG, PCS carry out an average of 10 consultations per day. But despite the increase in referrals there was a decrease in the number of sessions completed in 2013. This was due to staffing shortages and an emphasis from head office on accountability and procedural quality control measures. These requirements have eroded clinical contact time, particularly for the Clinical Supervisor.
- 10.13 While PCS functioned well together, enjoyed a good relationship with custodial staff, and were well-supported by senior prison management, there appeared to be a disconnect between managerial requirements and operational practice. Head office, who manage the service remotely, understandably insist on adherence to procedure. However, it is vital to ensure that these guidelines are not so prescriptive that they inhibit clinical judgement. They must also be in a form that can be incorporated into clinical practice. This balance did not appear to be met.
- 10.14 PCS were only able to comply with the ARMS protocols if they reduced ongoing counselling for non-crisis related matters. In short, the service was only able to focus on the 'at risk' group. This was to the detriment of the majority of women who would benefit greatly from other treatment. PCS were unable to run any therapeutic programs addressing offending behaviour (including sexual and violent offending), nor could it provide ongoing counselling for trauma and grief.
- 10.15 The all-consuming focus on ARMS is understandable but wholly unsatisfactory, for the prison, for the prisoners, and for a highly skilled group of staff. The team is at risk of becoming de-skilled in other areas and losing its clinical focus.
- 10.16 Pre-inspection survey results indicated that only 16 per cent of responding prisoners trusted PCS to support them. The team heard similarly from women during the site visit, that they did not trust healthcare or PCS staff to maintain their confidentiality. This was a departure from the 2011 inspection, when 47 per cent of responding prisoners indicated their trust in PCS.
- 10.17 This may reflect the dilution of clinical care identified by PCS, and the Department's focus on ARMS. Prisoners' expectation of trust in healthcare professionals and counsellors is eroded when security considerations override professional obligations of confidentiality, which are not absolute. Information disclosed to counsellors or health professionals, and then shared with custodial staff, can result in the initiation of ARMS. This can entail a range of responses, from additional support, to continuous monitoring, or involuntary placement in the CCU.
- 10.18 The inspection team were informed that ARMS and SAMS were due for review in March 2014. ARMS identifies periods of increased vulnerability to self-harm or suicidal ideation, including initial reception into prison and times of personal crisis such as bereavement. It also identifies 'mental health' as a trigger for ARMS placement. However, the generic initial health screening (IHS) tool which ARMS relies on, is inadequate for identifying psychiatric morbidity.²⁷² Prisoners identified as having 'mental health' needs during their incarceration require easy access to skilled support and treatment. While ARMS can manage risk, it is not designed to meet the needs of the mentally ill. Indeed,

272 See Chapter 9.

the mental health vulnerabilities of those who are at risk of suicide or self-harm may be exacerbated by increased security and social isolation.

- 10.19 In summary, while the ARMS process generally works well for what it is, it is not a stand-alone solution. In order to improve their effectiveness, ARMS and PRAG need to be incorporated into a wider fully integrated multidisciplinary health team approach. A recommendation is made later on this, arguing also for a stronger focus on community re-entry services.

PRISON ADDICTION SERVICES TEAM

- 10.20 The prevalence of drug use and drug-related offending among the female prison population in Western Australia is higher than among the male prison population.²⁷³ Substance abuse is managed at Bandyup by the Prison Addiction Services Team (PAST) which comprises two registered nurses and GP support.
- 10.21 Prisoners can access the service in two ways. They are either directly referred following assessment by health staff on reception, or they may request an appointment by completing the purple form which the PAST nurse triages.²⁷⁴
- 10.22 The main focus of PAST is the daily management of the Opiate Substitution Treatment program. At the time of the visit, 22 clients were being prescribed methadone but numbers have been as high as 38. Although processes are in place to ensure continuity of treatment, this was not the experience of many prisoners. Some described feeling strung out for several days while awaiting their medications.
- 10.23 The pre-inspection survey found that 43 per cent of respondents felt that prisoners with drug/alcohol addictions were given help at Bandyup. This contrasts favourably with the 2011 response of 34 per cent. There are no particular interventions utilised for the cessation of non-opiate drugs of addiction at the prison, and withdrawal symptoms are monitored and treated as they arise.
- 10.24 Delivering an equitable service in prison to those with addictions is clearly a challenge. Imprisonment itself often forces withdrawal, and clients turn to health care for assistance in highly distressed states.²⁷⁵ Throughout the inspection, this Office heard from prisoners that their requests for help were frequently dismissed as ‘drug-seeking behaviour’.²⁷⁶

273 DCS, *Annual Report 2012–2013* (2013).

274 For further discussion [9.48]–[9.51].

275 Niveau G, ‘Relevance and limits of the principle of “equivalence of care” in prison medicine’ (2007) 33(10) *Journal of Medical Ethics* 610–613.

276 It is noted that the Department maintains that the use of the term ‘drug-seeking’ is an acknowledgement of behaviour. Its use may not be intended as derogatory, however many women spoken to at Bandyup felt that its use was dismissive and prevented them accessing the treatment they thought they needed.

- 10.25 It is important to acknowledge the role that substance abuse plays in women's experience of sexual abuse and trauma. Psychoactive substance use is a common response to managing trauma. In prison, this option is restricted and women may have little experience of other help-seeking behaviour. It is inhumane and degrading not to alleviate distress, which may present with physical symptoms and requests for strong opiate analgesics. Such presentations demand skilled professional intervention to contain distress without prescribing drugs which may not be in the woman's best clinical interests, facilitate addiction, and have bad side effects.²⁷⁷
- 10.26 It is of particular concern that despite the high prevalence of psychoactive substance use and drug-related offending among Aboriginal women at Bandyup, there was no culturally secure Aboriginal withdrawal service available. Staff advised that they work in the same way with Aboriginal and non-Aboriginal women. This lack of cultural sensitivity and responsiveness is unacceptable. The need for a culturally secure drug and alcohol service has been identified by the Government of Western Australia Drug and Alcohol Office in their framework document *Strong Spirit Strong Mind. Aboriginal Drug and Alcohol framework for Western Australia 2011–2015*, and should form part of Bandyup health centre practice.

Recommendation 38

Improve services to address drug use and withdrawal at Bandyup. This should include a culturally secure drug and alcohol service for Aboriginal prisoners in line with the Government's framework for Aboriginal drug and alcohol service development.

PSYCHIATRIC SERVICES

- 10.27 In 2011 psychiatric consultation was provided by two doctors employed by the Department. They offered some experience in psychiatry but had not completed specialist training. In response to the report, the Department developed a contract with the State Forensic Mental Health Service to provide psychiatric services in prisons. A visiting Consultant Forensic Psychiatrist now attends one day per week. In practice, however, this equates to a maximum of only six-hours clinical contact per week: the clinic cannot start until 9.30 am when the population count has been completed, and the women must then return to their units at 3.30 pm.
- 10.28 This level of service is woefully inadequate to manage the 25 per cent of women (around 75 people) who suffer from major disorders such as schizophrenia, schizoaffective disorder, major mood (bipolar affective) disorder, and drug-induced and other psychotic disorders. In addition, as discussed, a large number of other women have histories of significant physical, sexual and emotional trauma and related substance abuse, and should be accessing specialist intervention.

²⁷⁷ Charles A & Draper H, 'Equivalence of care' in prison medicine: is equivalence of process the right measure of equity?' (2012) 38(4) *Journal of Medical Ethics* 215–218.

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- 10.29 Mental health staff at Bandyup noted that the reduction in psychiatrist hours had increased their workload and responsibility. However, the psychiatrist was available by telephone and access to a doctor was also available through the e-consultation service, to advise on urgent medication needs. If patients are in the CCU, they are not reviewed by mental health trained staff after hours or at weekends. This is clearly unacceptable for those who may be acutely disturbed.²⁷⁸
- 10.30 Prisoners are able to self-refer to the mental health team by completing a purple form, four or five of which are triaged daily. Staff advised that on average they see 80–90 prisoners a month. Of these, approximately 50 are referred on to the psychiatrist who is able to see approximately 10 patients per week. In addition, they check for women admitted to the CCU as part of the ARMS process, who have been deemed to be at risk of suicide or self-harm.
- 10.31 At present there is no separate mental health screening tool to assist the mental health nurses.²⁷⁹ However, the mental health nurse obtains and records all relevant background information from community providers prior to patients being seen by the psychiatrist. This information however, is limited by the fact that Department of Corrective Services staff do not have access to the Department of Health statewide database, which includes information on all mental health patients who have had contact with a public service.
- 10.32 The mental health/comorbidity team comprises two clinical nurse specialists (mental health), one of whom is currently acting as the Clinical Nurse Consultant (comorbidity). There is one FTE clinical nurse specialist vacancy (80 hours). As was the case at the last Bandyup inspection, there is no emergency after hours mental health provision, to assist with the management of acute behavioural disturbance, much of which is related to mental health issues.²⁸⁰
- 10.33 In addition to supporting the psychiatric clinic, the mental health nurses offer ongoing mental health monitoring to those patients seen by the psychiatrist and manage their own case load. However, this is eroded by the disproportionate amount of clinical time taken up with ARMS and the daily attendance at PRAG, which includes comprehensive PRAG meetings twice weekly. These commitments are estimated to take up approximately 50 to 60 per cent of their available clinical time. This leaves insufficient time for face-to-face patient contact, to meet the clinical need.

278 The Department has stated that while service hours have reduced, they are now provided by a forensic psychiatrist rather than a registrar as was previously the case. It further acknowledged that current psychiatric availability is unable to meet demand at Bandyup.

279 This Office acknowledges the Department's position that the IHS is an effective tool and that to include the suggested areas would make the process inappropriately lengthy. Nonetheless we maintain that the IHS lacks a gender-informed approach, and is a missed opportunity to obtain relevant medical information in the first instance.

280 It is noted that the Frankland Centre does not have an out of hours psychiatrist available for use by the Department.

- 10.34 Bandyup’s mental health service is fragmented both in location and process. In addition to being in short supply, the consulting rooms in the health centre are not conducive to psychiatric examination and are surrounded by medical equipment. Working in close proximity to the GPs and primary care team is helpful, and there is a good collegial relationship with the PCS. But there is no formal relationship that enables information sharing, as PCS are managed through the programs and assessment area. PCS however, have access to information that would be helpful to mental health. The mental health nurse attends PRAG, along with PCS, as part of the ARMS process, but there is no other mechanism by which the mental health care of vulnerable, seriously mentally unwell patients can be jointly discussed and planned.
- 10.35 There is a clear need for forensic services to transition patients with mental health problems and/or mental illness from prison to community mental health services.²⁸¹ Community re-entry services are provided by Ruah, and mental health nurses liaise with the local Medicare providers (local GPs), Outcare, Women and Newborn Drug and Alcohol Services (WANDAS), and Partners in Recovery. While recognising that it is challenging to deliver an equitable service to mentally ill patients, particularly in a non-therapeutic environment and with limited resources. However, this Office believes that the introduction of more collaborative work methods and a shared care planning process could significantly improve care delivery.

Recommendation 39

Improve services to mentally ill and psychologically vulnerable female prisoners, including: (a) a more integrated and comprehensive response in which ARMS, SAMS and PRAG are one part of a holistic ongoing counselling and treatment service; (b) increased psychiatrist consultation sessions; (c) individualised shared care plans promoting multidisciplinary teamwork; and (d) improved services to assist transition to the community.

CRISIS CARE UNIT

- 10.36 Those patients who require more intensive monitoring to maintain their safety are transferred to the CCU. Those who present a risk to others as part of their psychosis, are transferred to the Management Unit (MMU), which has a much more restrictive regime. Neither are suitable environments for the treatment and recovery of patients with mental illness. Furthermore, the CCU and MMU are not staffed by a team of up-skilled staff, but by custodial officers who rotate throughout the prison as a whole.

²⁸¹ Government of Western Australia Mental Health Commission, *Mental Health 2020: Making it personal and everybody’s business – Reforming Western Australia’s Mental Health System* (2011).

MENTAL HEALTH AND ADDICTIONS

10.37 The CCU is a six-bed wing for women in crisis and at risk of self-harm. However, it is also used to accommodate women with acute mental illness, a purpose for which it is entirely unsuitable. The individual cells are sparsely furnished, and medication is given through a hatch in the door. There is a communal day room and outdoor area but this is not secure, and women had been able to access a roof from the courtyard.



Crisis Care Unit: cell door and interior



The Management Unit: cell interior and 'exercise yard'

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- 10.38 The Department acknowledges that the age and condition of the existing prison infrastructure within the female estate makes it difficult for its mission and outcome to be fulfilled.²⁸² The 2011 inspection of Bandyup, this Office recommended the development of a dedicated mental health unit for women prisoners, to be managed by a multidisciplinary team of clinical/allied health staff, and supported by appropriately trained custodial staff. This was supported in principle by the Department, who noted however, that at that time no further resources were available.²⁸³
- 10.39 The findings of the 2014 inspection indicate that the imperative for such a unit is now even stronger. Working jointly with the Department of Health and the Mental Health Commission, the Department of Corrective Services needs to commission a dedicated mental health unit at Bandyup, to replace the CCU.

Recommendation 40

Working jointly with the Department of Health and the Mental Health Commission, the Department should commission a dedicated mental health unit at Bandyup, and decommission the CCU. The new unit should be operated differently from standard prison units, with a multidisciplinary team, including a full-time forensic psychiatrist, supported by an appropriately trained staff. It should include a strong focus on reintegration services.

ACCESS TO THE FRANKLAND CENTRE

- 10.40 The Frankland Centre is a maximum-security psychiatric hospital on the Graylands Hospital campus, operated by the State Forensic Mental Health Service. Although this Office does not have a remit to inspect the Frankland Centre, it is not possible to adequately consider psychiatric services at Bandyup without including a discussion of this facility.
- 10.41 The Frankland Centre provides a service for patients from all prisons including Bandyup, who are acutely mentally disturbed. The 30-bed facility assesses, treats and rehabilitates mentally ill patients, most of whom have been referred from the courts or prison system. The demand for beds far outstrips availability, hence the centre admits approximately 210 patients per year, but the average length of stay is only four weeks. The rapid turn-around reflects the need to accommodate new referrals and those ordered to hospital by the courts, but this inhibits long-term treatment.
- 10.42 The Frankland Centre, although secure, is not a prison and its milieu is therapeutic. However, it has not had any expansion since it was opened 20 years ago. There are three units: an 8-bed acute unit, a 12-bed sub-acute unit and a 10-bed longer-term unit. There is no dedicated section for women, whose histories of trauma render them particularly vulnerable when being treated for mental illness in a mixed gender setting. If female patients do not feel safe, their recovery is impeded. Staff are very aware of their particular needs and manage emotional and physical safety concerns with higher levels of relational security.

282 DCS, *Female Prisoners Plan 2012–2022* (2013) 26.

283 OICS, *Report of an Announced Inspection of Bandyup Women's Prison*, Report No. 73 (August 2011) 109.

- 10.43 As the state’s only provider of secure mental health care, the Frankland Centre is clearly under-resourced and requires significant expansion if it is to offer anything other than an “ambulance at the bottom of the cliff” response to vulnerable prisoners. With the rising rate of female incarceration, services for mentally disordered and mentally impaired female offenders need to be developed at Frankland.
- 10.44 In 2013, Bandyup conducted 26 transfers to the Frankland Centre, where the average length of stay was four to six weeks. It is clear that if more beds were available this number would be higher. The completion of a ‘Form One’ initiates the process of admission to the Frankland Centre,²⁸⁴ however, if no beds at the Frankland Centre are available at the time a Form One is initiated, it becomes null and void. As a result, Bandyup staff under-utilise this process. This means, as in 2011, that the exact level of unmet need at the prison remains unidentified.
- 10.45 Furthermore, even once a patient has been placed at the Frankland Centre, the pressure on beds is so great that they are often discharged back to prison prematurely, with their treatment only partially completed. There are significant risks in returning a partially-treated patient to prison, including the discontinuation of medication, as this is detrimental for continued recovery and could place the patient – and others – at risk.
- 10.46 In summary, prisons should not be expected to function as de facto secure mental health units. Both the 2012 Stokes Review and a recent report by this Office have recommended that the government increase the number of dedicated forensic mental health beds in hospitals as well as increasing mental health services into prisons.²⁸⁵ Everybody seems to accept the proposition in principle, but they have done so for many years. Bandyup exemplifies why action is needed.

284 This initiates the process of compulsory referral for an examination by a psychiatrist in hospital within seven days.

285 Stokes B, *Review of the admission or referral to and the discharge and transfer practices of public mental health facilities/services in Western Australia* (July 2012); OICS, *Mentally impaired accused on ‘custody orders: Not guilty, but incarcerated indefinitely* (April 2014).

Appendix 1

THE DEPARTMENT'S RESPONSE TO THE 2014 RECOMMENDATIONS

Recommendation	Acceptance Level/Response
<p>1. The Department should ensure that Bandyup's practices and procedures align with Departmental strategic policy documents relating to women in prison, and that all its employees are aware of its core values and expectations. There should be an action plan to address deficiencies.</p>	<p>Supported The Department will review its strategic policies and frameworks with respect to the management of women prisoners and ensure that the practices and procedures at Bandyup are aligned. Performance and evaluation practices will also be included in the review in order to effectively monitor the women prisoner's policy framework.</p>
<p>2. The Department institute a 'lessons learned' exercise arising out of events at Bandyup in 2012 and 2013 to ensure that, in the future, appropriate, timely, and effective corporate support is given to prisons.</p>	<p>Supported The Department's reform agenda includes a lessons learned program, which involves reviewing incidents and events, evaluating responses and follow-up actions. A lessons learned program will be considered to discuss the events of 2012 and 2013 at Bandyup.</p>
<p>3. (a) Appoint a new substantive Superintendent to Bandyup or appoint a person to a long-term acting position; (b) examine the best management structure for the prison, including additional resources for the short or long-term; and (c) firm up and reinvigorate the Bandyup management team.</p>	<p>Supported a) The Department will review the current situation with a view to establishing a long term arrangement in keeping with the parameters of the current industrial framework. b) The management structure will be reviewed. c) In addition to the achievement of a) and b) the Department will implement an effective performance management framework to ensure that the Bandyup management team and senior managers are performing to the required standards.</p>
<p>4. Reinvigorate Bandyup's performance management system and procedures with an emphasis on developing relationship and communication skills, as well as improving the PADS system.</p>	<p>Supported The Department will thoroughly review and implement an effective performance management framework. This will ensure that the staff at Bandyup, including the management team, are performing to the required standard and receiving the appropriate support from head office.</p>
<p>5. Improve Bandyup's focus on consistent customer service to visitors to the prison, and establish a community reference group to enhance accountability, communication and community involvement.</p>	<p>Supported The Department will thoroughly review and implement an effective performance management framework. This will ensure that the staff at Bandyup, including the management team, are performing to the required standard and receiving the appropriate support from head office.</p>

THE DEPARTMENT'S RESPONSE TO THE 2014 RECOMMENDATIONS

Recommendation	Acceptance Level/Response
<p>6. Develop all unused space at the Bandyup site to maximise opportunities for recreation and relaxation and for personal and cultural development.</p>	<p>Supported The Department will establish immediate, medium and long term strategies to better identify and develop all unused and under-used space within the Bandyup site to maximise opportunities for recreation, relaxation and personal and cultural development. The Department will also consider opportunities external to the site.</p>
<p>7. Replace Unit 1 with appropriate, contemporary accommodation, and ensure that the new accommodation is designed to take account of key needs, including mental health.</p>	<p>Supported The Strategic Asset Plan is currently being updated with a specific focus on the women's estate, to address current and future needs.</p>
<p>8. Cease the practice of compelling women to sleep on floors.</p>	<p>Supported The Department is committed to cease the incidences of women sleeping on mattresses on the floor. The development of additional bed capacity strategies that have an immediate, medium and longer term benefit are being prioritised both within Bandyup and across the women's estate.</p>
<p>9. In order to reduce recidivism rates, and with due regard to risk, the Department should examine and implement measures to improve Aboriginal women's access to the better accommodation areas at Bandyup and to the re-entry opportunities presented by Boronia.</p>	<p>Supported Current practices will be reviewed, with a view to improving the hierarchal management of Aboriginal women prisoners at Bandyup, which will enable this cohort to access better accommodation and re-entry opportunities at Boronia.</p>
<p>10. Ensure that Bandyup's regime and processes actively tackle issues of prisoner on prisoner bullying and better protect potentially vulnerable individuals.</p>	<p>Supported Bandyup is currently reviewing their anti-bullying policy in order to address the issues raised.</p>

THE DEPARTMENT'S RESPONSE TO THE 2014 RECOMMENDATIONS

Recommendation	Acceptance Level/Response
11. Ensure that Bandyup is better resourced to meet the needs and legal entitlements of remand prisoners, including improved access to legal resources and improved opportunities for contact with lawyers.	<p>Supported</p> <p>The Department is looking at how to support the needs of remand prisoners.</p>
12. Provide regular traditional foods for Aboriginal prisoners, and allow them to prepare and cook that food themselves.	<p>Supported In Principle</p> <p>The Department is looking at the demographic profile of female offenders and is exploring their dietary requirements.</p>
13. Increase prison officers' responsibility for supervising unit activities such as food distribution and cleaning with a view to improving hygiene practices.	<p>Supported</p> <p>The Department has clear expectations and responsibilities of all staff which form part of the Prison Officers Enterprise Bargaining Agreement 2013.</p>
14. Resource and implement a proactive, preventative maintenance program.	<p>Supported In Principle</p> <p>The Department is committed to maintaining facilities and already has a comprehensive preventative maintenance program which covers all sites.</p>
15. Bandyup should develop a response to the recommendations contained in the Infection Prevention Consultant's report and implement an appropriate action plan.	<p>Supported In Principle</p> <p>The recommendations contained in the Infection Prevention Consultant's report are currently being progressed and implemented by Bandyup.</p>
16. Improve relational/dynamic security at Bandyup, including a renewed emphasis on respectful relations and positive interactions.	<p>Supported</p> <p>Bandyup is committed to implementing a renewed emphasis on respectful and positive interactions, in light of the observations provided within this report. All necessary adjustments to policy, procedure, behaviour and performance management will be made, complimented with frequent reflective and evaluation practices to ensure that relational and dynamic security are maximised.</p>
17. The Department should ensure that when key security staff are deployed out of prisons, the positions are backfilled by appropriate staff.	<p>Supported In Principle</p> <p>The Department will ensure that appropriately skilled staff are utilised when the backfilling of positions is required. Effective succession planning strategies for key prison management positions will be established.</p>

THE DEPARTMENT'S RESPONSE TO THE 2014 RECOMMENDATIONS

Recommendation	Acceptance Level/Response
<p>18. Improve control room processes and practices by rotating night shift officers through the control room position and ensure that staff in the control room are at all times fully focused on the task.</p>	<p>Supported In Principle A comprehensive review of control room staffing and work practices will be undertaken, taking into account the observations of this report and other benchmarks of good practice. All necessary changes identified to improve processes and practices, will be made.</p>
<p>19. For as long as drug detection dogs are used, the Department should ensure that they are available to cover all high-risk periods in prisons. The Department should also actively pursue options based on non-invasive body screening technology.</p>	<p>Supported The Department's Drug Detection Unit has recently undergone an external review. Operational coverage for prisons will be greatly enhanced to ensure that high risk periods are covered by drug detection dogs. The Department conducts continual research into emerging technologies for the use in prisons. Non-invasive body type scanning technologies will be considered.</p>
<p>20. In reviewing the 'structured day' at Bandyup, the Department should ensure that the principles of a women-centred philosophy are reflected in policy and firmed up in practice.</p>	<p>Supported The Superintendent has commenced a review of the 'structured day' at Bandyup to ensure principles of women-centred philosophy are reflected in policy and practice.</p>
<p>21. Bandyup management should continue to explore improved employment opportunities and, given the lack of investment in women's imprisonment over recent years, the Department should prioritise Bandyup's needs.</p>	<p>Supported Employment strategies within Bandyup will be reviewed to optimise the levels of meaningful employment. This will include the identification of 'work readiness' strategies to ensure prisoners maximise their opportunities for employment following their release from custody.</p>
<p>22. In order to maximise opportunities for reducing recidivism, enhance the facilities and increase the resources at Bandyup for part-time and full-time education and training.</p>	<p>Supported The Department is committed to prioritising strategies aimed at reducing recidivism. The implementation of Individualised Integrated Case Management (IICM) will ensure all education and training opportunities are explored and maximised.</p>

THE DEPARTMENT'S RESPONSE TO THE 2014 RECOMMENDATIONS

Recommendation	Acceptance Level/Response
<p>23. Improve recreational activities for Bandyup prisoners, both during recreation time and as part of the structured day, and make better use of areas that are currently unused or underutilised. As part of this improvement, provide more culturally appropriate recreation options for Aboriginal prisoners, including library materials and visits by Aboriginal elders.</p>	<p>Supported The Department will establish immediate, medium and long term strategies to better identify and develop all unused and under-used space within the Bandyup site to maximise opportunities for recreation, relaxation and personal and cultural development.</p>
<p>24. Build a new social and official visits centre inside Bandyup, and also a new external visitors' centre for people arriving at the prison, in line with the Department's stated philosophy of women-centred service delivery.</p>	<p>Supported The Strategic Asset Plan is currently being updated with a specific focus on the women's estate, to address current and future needs.</p>
<p>25. Expand the bus service to and from visits at Bandyup to include access to earlier and more frequent visit sessions.</p>	<p>Supported In Principle The bus service is currently being reviewed to ensure the timing issues are rectified. Should the service require significant expansion, and funding needs unable to be met by Bandyup, appropriate applications will be submitted.</p>
<p>26. Taking full account of the best interests of the child the Department should take steps to facilitate appropriate family connections are maintained between young people in Banksia Hill Detention Centre and adult family members in Bandyup and other prisons.</p>	<p>Supported – Existing Departmental Initiative There is no 'blanket policy' denying contact between women and children in custody. Adult Custodial Rule 7 and Youth Custodial Standing Order 12 allow provision for visits between prisoners and detainees.</p>
<p>27. Restructure the afternoon routine to ensure that clashes between visits, recreation, medication, and canteen spends are reduced and that there is adequate staff monitoring and supervision during recreation.</p>	<p>Supported The afternoon routine is currently being reviewed to avoid the issues raised. New canteen times have already been introduced.</p>

THE DEPARTMENT'S RESPONSE TO THE 2014 RECOMMENDATIONS

Recommendation	Acceptance Level/Response
<p>28. Overhaul the orientation process and ensure that each new prisoner has adequate support and is familiar with the prison and its operations before leaving the orientation unit.</p>	<p>Supported The orientation process is currently being reviewed at Bandyup in order to update the information contained in the handbook and DVD. The issues identified by this report will be considered in order to ensure each new prisoner has adequate support and is familiar with the prison and its operations.</p>
<p>29. Ensure that adequate resources are allocated to Bandyup to facilitate re-entry; revitalise the Transitional Manager's role; and reintroduce prison employment positions to assist the Transitional Manager.</p>	<p>Supported The Department will undertake a thorough review of the entire women prisoner's re-entry framework and provide all resource needs at Bandyup to ensure that prisoners leaving custody are best supported to successfully re-assimilate back into the community. The Transitional Manager role will be revitalised and once complete, it will then be possible to reintroduce the previous prison employment position.</p>
<p>30. (a) Reintroduce the Nursery Coordinator position in order to deliver a more appropriate service to mothers with resident babies; (b) Revise the Nursery Unit plans in order to provide up to date and accurate information; and (c) Ensure all staff who work in the Unit 5/nursery houses are appropriately trained and certified to work with children and babies.</p>	<p>Supported a) The allocation of functions at Bandyup are being reviewed to ensure a more holistic approach is provided to mothers with resident babies. b) The Nursery Unit plans will be reviewed c) Bandyup will review the training requirements for staff working within the Nursery and ensure all necessary certifications are held by staff.</p>
<p>31. Update Policy Directive 10 to provide: (a) more flexible transfer criteria for pregnant women in regional prisons so that they are not routinely moved to Bandyup at 20 weeks and that transfers are based on individual risk assessment; and (b) enhanced opportunities for children to have overnight or day-stays with their mothers or other carers in Bandyup, subject to appropriate risk assessments.</p>	<p>Supported In Principle The Department is currently reviewing Policy Directive 10 and will take into consideration the issues raised.</p>

THE DEPARTMENT'S RESPONSE TO THE 2014 RECOMMENDATIONS

Recommendation	Acceptance Level/Response
<p>32. Re-define the job description of the Bandyup Clinical Nurse Manager to focus on developing gender-informed clinical expertise in the team and providing a resource and contact point for other prisons holding female prisoners.</p>	<p>Not Supported The Clinical Nurse Manager is a managerial position, not a portfolio holder. Gender-informed clinical expertise should be at the operational level within all prisons holding females.</p>
<p>33. Focus on improved healthcare outcomes not 'community equivalence' when funding primary healthcare at Bandyup. Invest accordingly in improved physical infrastructure and adequate staff support and training.</p>	<p>Supported The Department will reorientate its focus on healthcare standards with a view to improved outcomes for female prisoners and in recognition of their disadvantaged backgrounds.</p>
<p>34. Revisit the four cornerstones of care as a model for health staffing, as espoused by the Department in 2011, and develop a health staffing model for Bandyup as recommended by the 2011 inspection.</p>	<p>Supported In Principle The four cornerstones referred to are actually philosophical concepts which are supported by Health Services. Health Services ongoing development and strategic planning for future service provision at Bandyup includes increasing staffing levels to accommodate service requirements, muster increases, the increased complexity of health conditions, and the ageing inmate population. Staff modelling, and hence workforce increases, are dependent on budget approval (as well as infrastructure and prison regime).</p>
<p>35. Ensure that health staff maintain and develop professional competencies by encouraging and funding attendance at external programs and courses.</p>	<p>Supported The Department will review the health staff professional development and competency maintenance framework and, where necessary, progress submissions for additional funding needs.</p>
<p>36. Recognise the discrimination inherent in the current health screening tool and develop a tool that is gender-sensitive and culturally appropriate. The tool should include improved screening for visual and hearing difficulties, reproductive/gynaecological issues, and mental illness/impairment.</p>	<p>Not Supported The Initial Health Screening (IHS) tool is generic because it is the initial assessment performed to determine the acute danger of a new prisoner at the time of their reception. This is an extremely successful tool due to the low incidences of self-harm and medical incidents at this time. Gender-sensitive information is captured at a more appropriate time when a full health assessment is undertaken by health staff.</p>

THE DEPARTMENT'S RESPONSE TO THE 2014 RECOMMENDATIONS

Recommendation	Acceptance Level/Response
<p>37. Review medication administration processes at Bandyup and other prisons to ensure that they are safe and timely, in keeping with accepted clinical practice and licensing recommendations.</p>	<p>Supported Medication administration processes are currently being reviewed.</p>
<p>38. Improve services to address drug use and withdrawal at Bandyup. This should include a culturally secure drug and alcohol service for Aboriginal prisoners in line with the Government's framework for Aboriginal drug and alcohol service development.</p>	<p>Supported In Principle Addiction and withdrawal services are provided to Bandyup using evidence based practice. Every effort is made to return women to country although this may not be possible on admission/remand. The Aboriginal Drug and Alcohol framework for Western Australia 2011–2015, specifically relating to services being culturally secure, has limited practical applicability to services in prison, as it focuses heavily on community input which is impractical in a prison setting.</p>
<p>39. Improve services to mentally ill and psychologically vulnerable female prisoners, including:</p> <ul style="list-style-type: none"> (a) a more integrated and comprehensive response in which ARMS, SAMS and PRAG are one part of a holistic ongoing counselling and treatment service; (b) increased psychiatrist consultation sessions; (c) individualised shared care plans promoting multidisciplinary teamwork; and (d) improved services to assist transition to the community. 	<p>Supported A comprehensive review of policies, practices and procedures to optimise the care and supports provided for mentally ill and psychologically vulnerable prisoners at Bandyup has commenced. Where necessary, to improve services and outcomes, a funding submission will be made for Government consideration.</p>

THE DEPARTMENT'S RESPONSE TO THE 2014 RECOMMENDATIONS

Recommendation	Acceptance Level/Response
<p>40. Working jointly with the Department of Health and the Mental Health Commission, the Department should commission a dedicated mental health unit at Bandyup, and decommission the CCU. The new unit should be operated differently from standard prison units, with a multidisciplinary team, including a full-time forensic psychiatrist, supported by an appropriately trained staff. It should include a strong focus on reintegration services.</p>	<p>Supported In Part</p> <p>The CCU can not be decommissioned as its purpose is to provide crisis care to those prisoners at an acute risk of self-harm.</p> <p>The Department has reviewed the mental health management facilities and staffing needs at Bandyup. Immediate, medium and long term strategies are being developed that will address the needs of mentally ill prisoners and those in need of crisis care.</p>

Appendix 2

SCORECARD ASSESSMENT OF THE PROGRESS AGAINST THE 2011 RECOMMENDATIONS

Recommendation No.	Recommendations	Assessment of the Department's Implementations				
		Poor	Less than acceptable	Acceptable	More than acceptable	Excellent
	Report No. 73, <i>Report of an Announced Inspection of Bandyup Women's Prison</i>					
1.	Cease the practice of compelling women to sleep on floors.	•				
2.	As part of Bandyup's review of its hierarchical system of prisoner management, develop and implement a strategy which results in Aboriginal women being proportionately represented in the more desirable accommodation areas of the women's estate.	•				
3.	Invest in contemporary accommodation and service delivery infrastructure at Bandyup, including a replacement social visits centre.	•				
4.	Commit dedicated resources to the task of driving the Department's strategic direction of women's corrective services.	•				
5.	Develop a funding model which recognises the unique needs and demands of women's custodial management.	•				
6.	Implement a staff attendance management policy.		•			
7.	(a) Review PD 41 as a whole. (b) Revise the sections of PD 41 dealing with assaults to ensure that all serious assaults are covered. (c) Ensure that all officers receive training in the scope, meaning, and implications of PD 41, and in the need for comprehensive incident reporting.			• ²⁸⁶		
8.	Improve communication strategies with the VSO group.		•			
9.	Ensure all existing and prospective staff complete the Working with Female Offenders course as a condition of their employment at Bandyup.	•				
10.	Ensure that staff have (a) sufficient, appropriate and functional work spaces and equipment to effectively and efficiently carry out their roles; and (b) sufficient and functional rest and recreational facilities.	•				
11.	Ensure the safety system at Bandyup is known and used by all staff, and is effective in minimising risk, ensuring remedial follow-up, and identifying opportunities for prevention and improvement.			•		

286 The Department conducted a review of Policy Directive 41 which resulted in improvements being made to the document. However a number of outstanding concerns remain, in particular regarding definitions of staff assaults. These issues are discussed at length in this Office's report *Assaults on Staff in Western Australian Prisons* (July 2014) [3.17]–[3.22], [8.7]–[8.22].

SCORECARD ASSESSMENT OF THE PROGRESS AGAINST THE
2011 RECOMMENDATIONS

Recommendation No.	Recommendations	Assessment of the Department's Implementations				
		Poor	Less than acceptable	Acceptable	More than acceptable	Excellent
	Report No. 73, <i>Report of an Announced Inspection of Bandyup Women's Prison</i>					
12.	Consistent with Women's Way Forward, adopt an integrated case management model which will enable consistent assessment of women's welfare needs and planning for individualised and appropriate service delivery.	•				
13.	Provide Indigenous-specific treatment programs for female prisoners at Bandyup.	•				
14.	In the absence of high need violent offending and sex offending treatment programs for women, offer individual counselling to assist prisoners to address their offending behaviour.	•				
15.	Secure a permanent dedicated position that coordinates the organisation of the structured day.	•				
16.	Secure the reclassification of the Aboriginal Education Worker position to a level which will attract and retain high quality applicants – and recruit as a matter of urgency.			•		
17.	Provide access to Department owned computers for personal, legal and educational purposes and ensure their availability in the evenings and on weekends.	•				
18.	Provide a regular Department sponsored transport service to Bandyup for social visitors.			• ²⁸⁷		
19.	Ensure appropriate and sufficient accommodation to meet the needs of pregnant women and the demand for children to reside with their mothers.			•		
20.	Extend eligibility for day stays to 'significant' children to enable grandmothers or other significant women in a child's life to be able to develop and maintain such relationships.		•			
21.	Provide equipment, extraction training, and a rapid response capacity for the use of razor wire, or provide alternative security measures.		•			
22.	Ensure Bandyup prisoners are provided with their legal entitlements in respect of access to legal resources and assistance to research their cases.	•				
23.	Provide both a canteen and a town spend service and ensure that the range of goods available reflects women's needs.		•			

287 While a bus service has been introduced for visitors to Bandyup a number of issues remain with the service. For discussion see [6.55] onwards.

SCORECARD ASSESSMENT OF THE PROGRESS AGAINST THE
2011 RECOMMENDATIONS

Recommendation No.	Recommendations	Assessment of the Department's Implementations				
		Poor	Less than acceptable	Acceptable	More than acceptable	Excellent
	Report No. 73, <i>Report of an Announced Inspection of Bandyup Women's Prison</i>					
24.	Ensure that all prisoners are provided with a food hygiene course as part of their orientation at Bandyup.	•				
25.	Implement a healthy lifestyle program involving all major service areas at the prison.		• ²⁸⁸			
26.	Develop a health staffing model that: (1) is based on prisoners' evidenced health needs; (2) reflects the cultural diversity of the prisoner population; (3) enables comprehensive health care delivery, including acute care, preventive care, health promotion, and re-entry planning; (4) enables appropriate and effective portfolio management of care; (5) promotes employee loyalty and continuity; (6) provides relevant, comprehensive and ongoing professional development, support and supervision; and (7) encourages links with other health care organisations.		•			
27.	Recruit Aboriginal Health Workers.		• ²⁸⁹			
28.	Undertake a program of team development for all health care and custodial staff who work in health services with a view to creating a culture of joint working in which care and custody have equal influence over operations.	•				
29.	Review and revise assessment and care planning tools to ensure that they are gender-based and culturally appropriate, and facilitate more comprehensive identification of and support for health issues.	•				
30.	Review and revise pharmacy services and medication administration processes to better provide for prisoners' evidenced needs. Outcomes should include 24-hour pharmacy coverage; flexibility in prescribing, dispensing and administration processes; and compliance with prescribing guidelines.	•				

288 While there has been some progress in this area (including a dietary review of meals served from the Bandyup kitchen) this does not meet the broad scope of intent behind this recommendation.

289 This Office acknowledges that an Aboriginal Prisoner Re-Entry Health Service has been engaged, however this service is funded and driven by COAG, not by the Department of Corrective Services. Furthermore this service specifically focuses on a prisoners' transition back into the community, rather than providing an ongoing health service to those in prison. At the time of finalising this report, federal funding for this program had been withdrawn and the WA Department of Health is no longer able to fund such positions.

SCORECARD ASSESSMENT OF THE PROGRESS AGAINST THE
2011 RECOMMENDATIONS

Recommendation No.	Recommendations	Assessment of the Department's Implementations				
		Poor	Less than acceptable	Acceptable	More than acceptable	Excellent
	Report No. 73, <i>Report of an Announced Inspection of Bandyup Women's Prison</i>					
31.	Review and revise resourcing for dentistry at Bandyup to ensure that service provision reflects prisoners' evidenced needs; that preventative care can be routinely provided as part of the suite of services; that facilities for the reading of digital X-rays are available; and that quality monitoring processes are integral to service provision.	•				
32.	Develop a dedicated mental health unit for women prisoners, which is managed by a multi-disciplinary team of clinical/allied health staff, supported by custodial staff who are trained in mental health.	•				
33.	Provide 24-hour mental health nursing coverage, and psychiatrist and therapy input sufficient to meet prisoners' evidenced needs.	•				

Appendix 3

THE INSPECTION TEAM

Professor Neil Morgan	Inspector of Custodial Services
Lauren Netto	Principal Inspections and Research Officer
Stephanie McFarlane	Inspections and Research Officer
Amanda Coghlan	Inspections and Research Officer
Michelle Higgins	Inspections and Research Officer
Jim Bryden	Inspections and Research Officer
Joseph Wallam	Community Liaison Officer
Dr Jacqueline Short	New Zealand Forensic Mental Health Services
Anita Knudsen	New South Wales Office of the Inspector of Custodial Services
Clara Hawker	New South Wales Office of the Inspector of Custodial Services
Fiona MacLeod	Price Consulting
Rochelle McIntosh	Price Consulting
Cheryl Wiltshire	Department of Training and Workforce Development
Megan Reilly	Hands-On Infection Control

Appendix 4

KEY DATES

Formal notification of announced inspection	14 November 2013
Pre-inspection community consultation	4 February 2014
Start of on-site phase	9 March 2014
Completion of on-site phase	21 March 2014
Inspection exit debrief	25 March 2014
Draft Report sent to the Department of Corrective Services	1 August 2014
Draft report returned by the Department of Corrective Services	19 September 2014
Declaration of Prepared Report	14 October 2014

*Inspection of prisons, court custody centres, prescribed lock-ups,
juvenile detention centres and review of custodial services in Western Australia.*



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