



OFFICIAL VISITOR SCHEME

Annual Report 21/22

Children and Young People
Visitable Places
Inspection
Report
Inspecting
Visitable Places
Inspection
Visiting
Systemic Issues
Visiting
Visitor
Complaints
Investigate
Report
Investigate
Entitled Persons
Systemic Issues
Human Rights
Complaints
Investigate
Report
Inspection
Inspecting
Systemic Issues
Investigate
Inspection
Inspecting
Systemic Issues
Investigate

Homelessness
Entitled Persons
Visitor
Visit
Complaints
Systemic Issues
Human Rights
Complaints
Investigate
Report
Inspection
Inspecting
Systemic Issues
Investigate
Inspection
Inspecting
Systemic Issues
Investigate

Disability
Complaints
Visitable
Report
Inspecting
Visiting
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Visitor
Systemic Issues
Investigate
Report
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Systemic Issues
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Human Rights
Inspection
Visitor
Systemic Issues
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Report
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Systemic Issues
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Report
Inspection
Inspecting
Systemic Issues
Investigate

Mental Health
Visitor
Complaint
Report
Inspection
Inspecting
Systemic Issues
Investigate
Report
Inspection
Inspecting
Systemic Issues
Investigate

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Message from the Chair, Official Visitors Board

I am pleased to present this report from the Official Visitors Board (the Board) on the Official Visitor Scheme for the 2021-22 financial year. This report highlights the important work of Official Visitors visiting and protecting the interests of vulnerable people in the institutions and facilities covered by the Scheme.

Since 1 July 2021, the Scheme has been supported administratively by the ACT Human Rights Commission (HRC). Prior to that, the Scheme was supported by the Office of the Public Trustee and Guardian and the Public Trustee and Guardian, Mr Andrew Taylor, served as the Board's Chair. I thank Mr Taylor and his office for their crucial support for and leadership of the Scheme over many years.

This is only the second Annual Report of the Board to the Minister, as the requirement to report is fairly new. As required by section 23DA of the *Official Visitor Act 2012* (the Act), the report covers –

- (a) the number of -
 - (i) visits by Official Visitors to visitable places
 - (ii) complaints received by Official Visitors in relation to visitable places
 - (iii) referrals of complaints to investigative entities
- (b) action taken on the complaints received
- (c) systemic issues in relation to the operation of the Act identified by the Board
- (d) the number and kinds of matters referred by an Official Visitor to an investigative entity
- (e) the number of times an Official Visitor inspected records in accordance with section 15(2)(b) of the Act.

The period covered by this report was a challenging one. Official Visitors continued to deal with the complexities of the COVID-19 pandemic and, from August to October 2021, COVID-19 lockdowns saw face-to-face visits suspended. Official Visitors adapted, using technology to maintain contact and connection with entitled people and visitable places. However, there was a drop in the number of visits for the first half of this reporting period compared to the previous year.



The easing of COVID-19 restrictions from October 2021, allowed Official Visitors to resume more 'normal' visiting practices, albeit with the benefit of protective equipment and COVID-safe protocols.

Some of the highlights of the Board and the Scheme's activities during the reporting period were –

- Development of an Official Visitors' manual and induction package
- Review of Official Visitors' records management responsibilities
- Finalisation of a Scheme Complaints Policy
- Supporting the appointment of a number of Official Visitor and Official Visitor Board members
- Development of a Work Health and Safety Risk Register for Official Visitors
- Work to improve the currency of visitable places registers.



This Annual Report also highlights cross-sectional systemic issues across Official Visitor jurisdictions. In particular, Official Visitors note the need for better transition planning for those seeking to move from facility and residential care to other housing, and the risks that delays or inadequate collaboration can result in longer stays or homelessness.

It is pleasing to report that the Scheme operated within budget during the reported year, recording a surplus of \$65,257.46. However, Official Visitor expenditure is highly variable depending on demand and complexity of issues arising during any financial year.

The Board is responsible for recruiting, training and supporting Official Visitors. It oversees the exercise of functions by Official Visitors and is charged with trying to resolve any complaints about them. This year the Board met four times during 2021-22. More detail on the Board's activities is captured in the report. At a high level, the Board's focus has been on improving Scheme governance and improving support for Official Visitors. This included better understanding: the volume and type of work Official

This report highlights the important work of Official Visitors visiting and protecting the interests of vulnerable people in the institutions and facilities covered by the Scheme.

Visitors do; the occupational risks they face; the challenges they encounter and their training needs.

I would like to thank the Board members for the 2021-22 financial year: Ms Mary Durkin (Official Visitor), Ms Jodie Griffiths-Cook (Public Advocate and Children and Young People Commissioner), Mr Chris Redmond (Official Visitor) and Mr Andrew Taylor (Public Trustee and Guardian). I would also like to acknowledge and thank Mr Stefan Dzwonnik, the Scheme's Executive Officer, for his work transitioning the administration of the Scheme to the HRC and for his tireless support for both the Board and Official Visitors.

I conclude by noting that I am proud to be a part of the Scheme. If, as some say, 'The true measure of a society can be found in how it treats its most vulnerable', the Scheme and, most importantly, Official Visitors themselves, certainly help the Territory to measure up.

Jennifer McNeill

Chair, Official Visitors Board

Deputy Director-General (Justice)

Justice and Community Safety Directorate



Scheme Overview

The Scheme

The Scheme plays an important role in safeguarding the rights and wellbeing of people who reside in government institutions, community facilities or supported accommodation. These places are known as “visitable places” and the people visited by Official Visitors are known as “entitled persons”.

Official Visitors are independent statutory officeholders. They meet with and talk to entitled persons in visitable places to hear their concerns and resolve any complaints. They prepare and send reports to the operational Ministers responsible for visitable places about any systemic issues or concerns that they have, giving those Ministers valuable insights. They also prepare summary reports to the Minister responsible for the Scheme.

Official Visitors seek to identify, monitor and resolve service issues, using early intervention and resolution practices, and with a view to improving service quality. They observe the environment and interactions between staff and entitled persons, make enquiries, inspect documents, communicate with entitled persons to ensure they are being supported with dignity and respect, and identify any issues of concern.

The Scheme covers five jurisdictions under each of the following Operational Acts:

- **Children and Young People** under the *Children and Young People Act 2008*
- **Corrections** under the *Corrections Management Act 2007*
- **Disability** under the *Disability Services Act 1991*
- **Housing and Homelessness** under the *Housing Assistance Act 2007*
- **Mental Health** under the *Mental Health Act 2015*.



The Board

Purpose

The establishment of the original Board in 2013 responded to concerns about the absence of centralised, consistent collegiate and professional support and guidance for Official Visitors. Establishment of the Board also facilitated centralised administration under one single, uniform scheme and reduced unnecessary overlap in the functions of Official Visitors and other Government bodies responsible for protecting people in institutions or supported accommodation.

Importantly, the Board facilitates administrative separation from Operational Directorates and dispels notions of direction or control of Official Visitors by any single stakeholder.

Functions of the Board

The Board is a governance board, overseeing and supporting the work of Official Visitors rather than directing or controlling that work.

The Board has the following functions:

- Oversee the exercise of functions by Official Visitors
- Arrange for the recruitment, induction, training and support of Official Visitors
- Provide support for, and manage, the exercise of functions by Official Visitors
- Consider and try to resolve any complaints about Official Visitors
- Any other function given to the Board under legislation.

*Left to right: **Andrew Taylor** (Board Member, Public Trustee and Guardian), **Mary Durkin** (Board Member, Official Visitors' representative), **Jennifer McNeill** (Chair, Deputy Director-General, Justice), **Jodie Griffiths-Cook** (Board Member, Public Advocate and Children and Young People Commissioner), **Chris Redmond** (Board Member, Official Visitors' representative)*



Board Membership

The Board is established under section 23A of the *Official Visitor Act 2012* (the Act) and comprises –

- The Chair as appointed by the Minister
- The Public Trustee and Guardian
- At least one Commissioner under the *Human Rights Commission Act 2005*; nominated by the Commissioners under that Act
- Two Official Visitors elected by the Official Visitors
- Any other member/s appointed by the Minister.

Election of the representatives of Official Visitors is undertaken every three years or when the term of an elected Official Visitor representative expires.

The Act was amended in 2019-20 to the effect that the Public Trustee and Guardian is no longer the *ex officio* Chair of the Board. The Act now provides for the Minister to appoint the Chair and to appoint other Members.

Under the new arrangements, Mr Andrew Taylor (Public Trustee and Guardian) was appointed as Chair until 30 June 2021. The Deputy Director-General for Justice, Ms Jennifer McNeill, was appointed as Chair from 7 September 2021 to 6 September 2022.

Board Members during the reported period were –

- **Ms Jennifer McNeill**, Deputy Director-General for Justice, Justice and Community Safety, and Chair
- **Mr Andrew Taylor**, Public Trustee and Guardian
- **Ms Jodie Griffiths-Cook**, Public Advocate and Children and Young People Commissioner and representative of the ACT Human Rights Commission
- **Ms Mary Durkin**, Official Visitor for Disability and Official Visitor representative
- **Mr Chris Redmond**, Official Visitor for Children and Young People and Official Visitor representative.

The Executive Officer was Mr Stefan Dzwonnik, Human Rights Commission.



Meetings

A requirement for the Board to meet quarterly was introduced in April 2020. The Board met four times during the reported year on 13 September 2021, 30 November 2021, 15 March 2022 and 8 June 2022.

Prior to meetings, Board members are required to disclose any material interest to be considered at the meeting. No disclosures were made by Board Members during the 2021-22 financial year.

The main items discussed in the 2021-22 Board meetings were:

- Development of the Work Health and Safety (WHS) Risk Register
- 2020-21 Annual Report development and finalisation
- Official Visitor participation at Annual Report Standing Committee Hearings
- Transitional matters arising from the transfer of administration to the HRC
- Information technology and Records Management
- Official Visitor Scheme website arrangements
- Training arrangements and planning
- Business continuity planning
- Caller identification through the Official Visitor Scheme hotline
- Scope of Official Visitor activities
- Potential legislative amendments
- Budget and Financial Forecast
- Official Visitor appointments and recruitment strategy
- COVID-19 Public Health Emergency lockdown and easing restrictions
- Application of the ACT Remuneration Tribunal Determination
- Currency of visitable places registers
- Official Visitor quarterly reporting summary analysis
- Complaints regarding Official Visitors and the development of a Complaints Policy
- Memorandum of Understanding between Official Visitors for Disability and the NDIS Quality and Safeguards Commission
- Status and responsibilities of the Official Visitors Board, Board members and Official Visitors
- The Official Visitors Board Charter
- Policy Register and Policies
- 2021-22 Annual Report development
- Development of a Manual and Induction package
- Timesheet changes.

Prior to meetings, Board members are required to disclose any material interest to be considered at the meeting



Response to COVID-19 lockdown

The Chief Minister Andrew Barr announced a lockdown in the ACT starting 5:00 pm on 12 August 2021 as the highly contagious COVID-19 Delta variant had been detected in the ACT. The Health Direction confirmed all ACT residents could only leave their homes for essential reasons. In response to the Health Direction, the Board issued guidance confirming lockdown conditions and advising Official Visitors to conduct visits and complaint resolution by means other than in person, such as by telephone, audio-visual technology, email and by referral.

The initial lockdown period was for 7 days, however, this was extended until 1 October 2021.

On 3 October 2021, the Board revised its guidance to Official Visitors, indicating that in-person visits could recommence but that Official Visitors would need to comply with updated Health Directions and to check with each visitable place to determine when it is appropriate to visit and what restrictions may apply.

Since the 2020 lockdowns, the Board has offered Official Visitors personal protective equipment relevant to contagious diseases, including gloves, sanitiser, face shields and face masks. The Board has updated the Work Health and Safety Risk Register enabling the Official Visitor Scheme to be prepared in the event of future contagious diseases and pandemics.

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Analysis of the quarterly summary reporting identified a reduction in visiting across jurisdictions for the July to September 2021 period. The October to December 2021 period reflected an increase in visit numbers, however overall visiting across jurisdictions had decreased by 20% compared to the October to December 2020 period. The Official Visitors Board budget report for the period up to 24 November 2021 identified proportional expenditure decrease of visits by 14% and an increase in complaint handling by 6% compared to the previous financial year.



Complaints received by the Board

The Board is required to consider and try to resolve any complaints about Official Visitors as per section 23C(1)(d) of the Official Visitor Act 2012. The Board resolved two complaints regarding Official Visitors during the reporting period. The complaints related to:

- Access and communication
- Compliance with security and safety procedures and the Official Visitor’s representation of events to stakeholders.

A further complaint was received in respect to an Official Visitor which the Board did not consider as the circumstances that gave rise to the complaint did not relate to the Official Visitor role.

The Board developed and endorsed a Complaints Policy during the reporting period. Official Visitors were consulted prior to endorsement by the Board.

The Guidelines protect the privacy of entitled people and provide a more detailed regime for compliance...

Guidelines

The Minister, in consultation with the operational Ministers, may make guidelines about a range of matters, including visits by an Official Visitor to a visitable place and the inspection of records relating to entitled people at a visitable place.

The former Guidelines relating to each jurisdiction were repealed and replaced with consolidated *Official Visitor Guidelines 2020* (Guidelines), effective from 4 September 2020. The revised Guidelines no longer include details of visitable places, which are instead required to be kept in registers and must be made available to Official Visitors and other stakeholders who have authority to access this information. The Guidelines protect the privacy of entitled people and provide a more detailed regime for compliance with section 15(2) and (3) of the

Act relating to the inspection of records when an entitled person is unable to provide consent.

The Board noted that the *Official Visitor (Children and Young People) Visit and Complaints Guidelines 2019 (No 1)* were inadvertently not revoked when the Guidelines were made effective on 4 September 2020. The *Official Visitor (Children and Young People) Visit and Complaint Guidelines Revocation 2022* was notified on 16 May 2022 and made effective on 17 May 2022 revoking the *Official Visitor (Children and Young People) Visit and Complaints Guidelines 2019 (No 1)*.



Official Visitors

Official Visitors are appointed under section 10 of the Act by the Minister responsible for the Act, for the purposes of each of the Operational Acts. Two of the jurisdictions, Corrections and Children and Young People, establish a mandatory requirement that, at least one of the appointed Official Visitors must be an Aboriginal or Torres Strait Islander person.

Current Appointments

As at the end of the reporting period the following Official Visitors were in place:



Denise Brassler

Corrections Management Act 2007
23.12.2020 to 22.12.2023



Shannon Pickles

Corrections Management Act 2007
17.12.2020 to 16.6.2023



Geoff Dulhunty

Mental Health Act 2015
29.6.2021 to 28.6.2024



Vickie Quinn

Corrections Management Act 2007
11.1.2020 to 10.1.2023
Children and Young People Act 2008
5.10.2021 to 4.10.2024



Mary Durkin

Disability Services Act 1991
18.10.2019 to 17.10.2022



Chris Redmond

Children and Young People Act 2008
12.6.2022 to 11.6.2025



Jane Grace

Mental Health Act 2015
2.7.2019 to 1.7.2022



Simon Rosenberg

Housing Assistance Act 2007
4.9.2020 to 3.9.2022



Matt Hingston

Disability Services Act 1991
25.3.2022 to 24.3.2025



Rob Woolley

Disability Services Act 1991
31.7.2020 to 30.7.2023

(NB: Commencement date does not necessarily represent the full term of service, rather the term as provided in the most recent disallowable instrument)



Expiry of term or resignation of appointment

The following Official Visitors' terms expired during the reporting period –

Name	Jurisdiction	Commencement	Expiry / resignation date
Tracey Harris	<i>Children and Young People Act 2008</i>	1 July 2019	4 October 2021
Tracey Gullo	<i>Disability Services Act 1991</i>	30 March 2021	17 December 2021
Violet Sheridan	<i>Corrections Management Act 2007</i>	11 January 2020	20 December 2021

Acting provisions

Section 9A of the Act authorises an Official Visitor for a visitable place to visit another visitable place if asked, in writing, to visit the place, or deal with an entitled person at the place, by an Official Visitor or the Board. This has been a welcome and highly useful amendment enabling rapid response to temporary service gaps and higher-than-normal workloads.

Official Visitor	Current role	Acting role	Commencement	Termination
Mary Durkin	Disability	Homelessness	6 November 2020	Ongoing
Simon Rosenberg	Homelessness	Disability	6 November 2020	Ongoing
Vickie Quinn	Corrections	Disability	13 April 2021	25 July 2021
Shannon Pickles	Corrections	Mental Health	29 June 2021	19 July 2021
Vickie Quinn	Corrections	Disability	4 August 2021	4 August 2021
Shannon Pickles	Corrections	Mental Health	18 August 2021	18 August 2021
Vickie Quinn	Corrections / Children and Young People	Mental Health	29 November 2021	29 November 2021
Vickie Quinn	Corrections / Children and Young People	Mental Health	7 December 2021	6 January 2022
Denise Brassier	Corrections	Disability	15 December 2021	24 March 2022
Denise Brassier	Corrections	Disability	29 April 2022	29 April 2022
Shannon Pickles	Corrections	Disability	20 June 2022	8 August 2022



Training / Professional Development

Official Visitor Professional Development Days (PDDs) were held on 29 July 2021, 6 December 2021, 18 February 2022 and 6 May 2022. Official Visitors discussed a range of issues and had the benefit of several guest speakers.

Training received and items discussed during the 2021-22 PDDs included:

- Official Visitor obligations and complaint handling
- Obtaining responses from external agencies
- Potential legislative amendments
- Information technology issues
- Annual Reporting requests and requirements
- Risk Register, risk assessment and management
- The Board's role including promotional responsibilities
- Common systemic issues across Official Visitor jurisdictions
- ACT and Commonwealth Ombudsman responsibilities and coverage
- Housing issues including transition from institutions, Justice Housing and Supported Disability Accommodation
- Official Visitor Scheme Budget
- Individual and common professional development needs for Official Visitors
- Engagement with the Minister for Human Rights
- Annual Report requirements and photos
- Complaint handling and policy
- Consistent allocation of timesheet activity
- Public Advocate support for Official Visitors.



Guests at PDDs included:

- **Tara Cheyne MLA**, Minister for Human Rights
- **Jennifer McNeill**, Chair of the Official Visitors Board & Deputy Director-General (Justice), Justice and Community Safety (JACS) Directorate
- **Carolyn Langley**, Assistant Director, ACT Strategy & Coordination, Program Delivery Branch, ACT Ombudsman
- **Jodie Griffiths-Cook**, Public Advocate and Children and Young People Commissioner and Official Visitors Board Member.

The 6 December 2021 PDD was held at the Canberra Rex Hotel and attended by several members of the Board.

Additional training in respect to health records handling was provided to Official Visitors on 10 June 2022 by: Ms Alison Murley, Director Complaints Services, HRC; Ms Gabrielle McKinnon, Senior Manager at JACS Legislation, Policy and Programs; and Ms Caitlin Stamford, Senior Intake and Review Officer, HRC.

One Official Visitor completed the Aboriginal and Torres Strait Islander Mental Health First Aid Course supplied by CIT Yurauna.

Professional Development Day on 6 May 2022

Left to right: Chris Redmond, Jennifer McNeill, Simon Rosenberg, Mary Durkin, Denise Brasser, Matt Hingston, Geoff Dulhunty, Vickie Quinn and Tara Cheyne MLA.



Financial – 2021-22 End of Financial Year Summary

The 2021-22 Budget comprised \$616,000 for territorial expenses (remuneration and Scheme related expenses).

Remuneration and expenses funding	\$616,000.00*
Total Budget	\$616,000.00
Less Remuneration and Allowances	\$533,679.73
Less Operational Expenses	\$17,062.81
Total Expenses	\$550,742.54
Surplus	\$65,257.46

*Figure includes \$140,000 increase in recurrent funding.

Remuneration and allowances expenditure increased by \$12,741.61 and operational expenses increased by \$2,012.54 in comparison to the previous year. Despite increases, Official Visitor activity was impacted by the COVID-19 lockdown and health safety restrictions at visitable places.



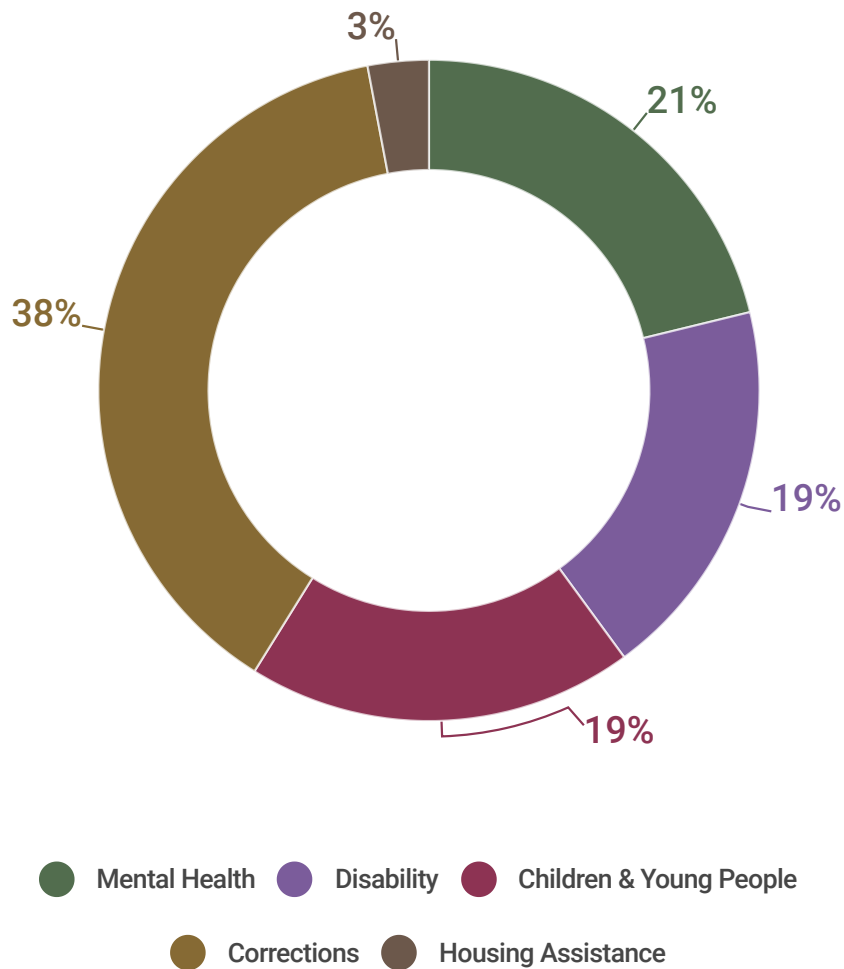
Since the 2020-21 period, the Board has developed a more rigorous approach to tracking and analysing territorial expenditures. This will ensure the Board can better identify and respond to any financial or other pressures as they arise.

The allocation of \$129,000 in departmental funding and expenditures is not included in this year’s financial summary due to financial operating differences between PTG and HRC. Departmental funding covers the Executive Officer’s salary and on-costs in the administration of the Scheme as well as the provision of support to the Board and Official Visitors.

The Executive Officer’s salary and on-costs for the 2021-22 financial year was \$199,705.01. This resulted in a departmental budget deficit of \$70,705.01 which was absorbed by the HRC.

Final expenditure breakdown by Official Visitor jurisdiction in 2021-22 was as follows:

Official Visitor Expenditures by Jurisdiction



Complaints

Official Visitors receive complaints by talking to the entitled person, or by letter, e-mail, telephone or through the National Relay Service. Many complaints are received from third parties.

The entitled person may ask to make a complaint to the relevant Official Visitor privately or to an Official Visitor of the same gender or to an Aboriginal or Torres Strait Islander Official Visitor.

Complaints may typically be made in respect to -

- the conditions of accommodation for an entitled person
- the care or services provided to an entitled person at the visitable place
- the activities available to an entitled person at the visitable place
- how the visitable place is administered.

When an entitled person requests to speak to an Official Visitor through their service provider, the Official Visitor must be notified within 24 hours. The entitled person does not need to provide details about why they wish to speak to an Official Visitor. Service providers cannot refuse or neglect to provide assistance or answer questions and cannot obstruct or hinder an Official Visitor in the exercise of their functions.

Official Visitors can monitor the conditions and services in the place, investigate and seek to resolve complaints, identify and report on systemic issues adversely affecting entitled persons at the place, refer complaints or issues to relevant investigative entities if appropriate, and also report to the Minister and operational Minister.

In doing so, Official Visitors must be guided by the following principles -

- respecting and promoting the human rights of entitled people
- promoting the high quality provision of services to, and care and treatment of, entitled people that is centred on their needs
- considering the wishes of entitled people in relation to visits and how complaints are dealt with
- encouraging early resolution of complaints whenever reasonable and practicable to do so
- having regard to the objects and principles in the Operational Acts.



Section 23DA Official Visitor Act 2012 Reporting

Section 23DA of the Act provides that the Board must give the Minister a written report for the financial year about:

- a) The number of -
 - i. Visits by Official Visitors to visitable places
 - ii. Complaints received by Official Visitors in relation to visitable places
 - iii. Referrals of complaints to investigative entities
- b) Actions taken on the complaints received
- c) Any systemic issues in relation to the operation of the Act identified by the Board
- d) The number and kinds of matters referred by an Official Visitor to an investigative entity
- e) The number of times an Official Visitor inspected records in accordance with section 15(2)(b)

The following statistics and information have been drawn from Official Visitor quarterly summary reports and from consultation with Official Visitors.

Section 23DA(1)(a) and (e) Visits, Complaints, Referrals and Inspection of Records

Jurisdiction	Visits s. 23DA(1)(a)(i)	Complaints Received s. 23DA(1)(a)(ii)	Complaints referred to investigative entities s. 23DA(1)(a)(iii)	Inspected client records under s. 15(2)(b) s. 23DA(1)(e)
Mental Health	204	175	38	0
Disability	99	45	17	39
Corrections	116	1,245	10	0
Children and Young People	194	60	4	0
Homelessness	22	8	0	0
Total	635	1,533	69	39

Visiting, complaints, referral and inspection activity has decreased compared to last year due to COVID related lockdowns and restrictions at visitable places.



Section 23DA(1)(b) Actions taken on complaints received

Mental Health

During the 2021-22 financial year Mental Health Official Visitors received a number of complaints concerning:

- Dissatisfaction with staff - poor behaviour, language competency, use of personal mobile phones while consumers wait, punitive and non-therapeutic treatment, lack of support in reporting assaults and accessing information, use of excessive force, and culturally insensitive treatment
- Environmental issues - limited maneuverability in unit, hygiene and cleaning, food quality and dietary requirements, personal care supplies, access to the courtyard and external garden beds, unit temperature, wheelchair accessibility and assistance, access to TV, lack of clothing, stolen personal belongings, leaking roof, no smoke alarm, and lack of hot water
- Access to exercise / entertainment / activities / programs
- Access to services - delay, lack of or seeking access to social services such as counselling, Aboriginal Mental Health Team, Legal Aid, Tribunal Liaison Officer, Hearing Voices, Public Trustee and Guardian, case worker
- Medical diagnosis and treatment - limited access and delays in medical diagnosis and treatment, dissatisfaction with involuntary treatment, clarification and review of Psychiatric Treatment Orders
- Medication / sedation issues – concerns regarding medication prescribed, accessibility, cost, dosage and timing, pain relief and medical assistance for injuries
- COVID-19 - outbreaks and restrictions
- Discharge and transfer issues - delayed or inadequate information, complaint by patient wanting leave while unstable, and discharge location
- Interpatient violence
- Privacy concerns
- Self-harm / boredom and loneliness / trauma triggers
- Assistance / information requests - NDIS, Stolen Generations restitution, housing applications, legal aid forms, statement of account from the Public Trustee and Guardian, application for university, issues with Housing ACT properties.

Action taken on complaints

- Directly contacted and liaised with senior staff, management, or specialists
- Contacted or referred matters to outside assistance or advocacy organisations
- Contacted or referred matters to housing provider for resolution
- Provided information, explained, and clarified circumstances to the entitled person
- Empowered entitled persons to express actionable views and goals
- Provided printed resources and assisted patients to fill out forms
- Liaised with staff to assist and request additional services or come to a compromise
- Provided supplies / clothing to the entitled person
- Facilitated access of phone to entitled person to make a call to assistance organisations
- Monitor concerns raised.



Disability

During the 2021-22 financial year Disability Official Visitors received a number of complaints concerning:

- Accessibility and maintenance issues in a number of houses
- Use of unauthorised restrictive practices
- Issues where the actions of family members and / or guardians impacted on the services provided to residents
- Matters relating to the management of COVID-19, including vaccination of residents and workers
- Issues related to the actions of support workers, including claims of abuse and neglect
- Impacts on service provision and equipment for residents resulting from reduced NDIS funding
- Resident behavioural issues.

Action taken on complaints

- Raised issues with staff or senior managers on the day or after a visit
- Direct intervention or reasonable explanation given conveyed back to the complainant
- Monitored concerns raised and ensured undertakings were implemented
- Referral of matter to other investigative entities.



Corrections

During the 2021-22 financial year Corrections Official Visitors received a number of complaints concerning:

- Maintenance issues - Pest control challenges, poor heating / cooling, broken or missing items, plumbing / flooding problems
- COVID related challenges – Lack of visits / physical contact, increased lockdown due to staff leave, lack of access to services
- Computers / Information and Communications Technology (ICT) – Lack of access to computers, delays having emails approved, communal computers broken, inability to contact Official Visitors (OVs), access to visits / visit system
- Boredom – Lack of education program, lack of diversity of programs / activities, inability to engage with study, lack of work / employment options, lack of access to exercise / ovals
- Justice health – Lack of timely access to doctors, medication problems, inability to access the same medication as the community
- Accommodation challenges – Lack of ability to cater for all cohorts, level of double ups / overcrowding in some areas, major challenges since women’s move back to Women’s Community Centre (WCC)
- Inconsistent practice – Inconsistent disciplining applied based on Corrections Officer (CO) / detainee, claims of unfair treatment, inconsistent access to visits / finance issues
- Case management - Lack of access / poor timing, poor / bad reporting, lack of support to access Transitional Release Centre (TRC)
- Aboriginal persons support - Lack of compassion / understanding of cultural needs, lack of - and difficulty in receiving - recognition of Aboriginal and Torres Strait Islander status.

Action taken on complaints

- Liaise, follow up, recommend, plan and encourage resolution or improvements for detainees with staff, senior officers and Operational Management at the AMC
- Liaise, follow up, recommend, plan and encourage resolution or improvements for detainees with other sections / services at the AMC / Corrections
- Refer matters to staff / sections / services
- Escalate and follow up with the ACT Corrective Services Commissioner
- Speak to the detainee confirming or explaining a circumstance and advise other channels to seek further support
- Encourage detainee to take appropriate action
- Review CCTV footage, incident documentation, case files and notes
- Investigate matters including speaking to stakeholders, reviewing policies etc
- Take immediate rectification / intervention action where possible
- Refer matters to investigative bodies
- Prepare quarterly reporting to the operational Minister and relevant Minister.



Children and Young People

During the 2021-22 financial year Children and Young People Official Visitors received a number of complaints concerning:

Out of Home Care Complaints

- Regular support from Case Managers
- Lack of engagement with support staff
- Consistent staffing arrangements in houses allowing for relationship development
- Lack of activities during school holidays
- Poor implementation of incentives program and payment of pocket money
- Punishment for perceived bad behaviour
- Inconsistent policy application in respect to use of electronic devices and access to Wi-Fi
- Consultation with young people regarding transition between residential houses
- Exit planning for leaving care
- Concerns about the welfare of young people in out of home care absconding from care and self-selecting accommodation
- Food quality and appropriateness for dietary needs.

Out of Home Care Actions

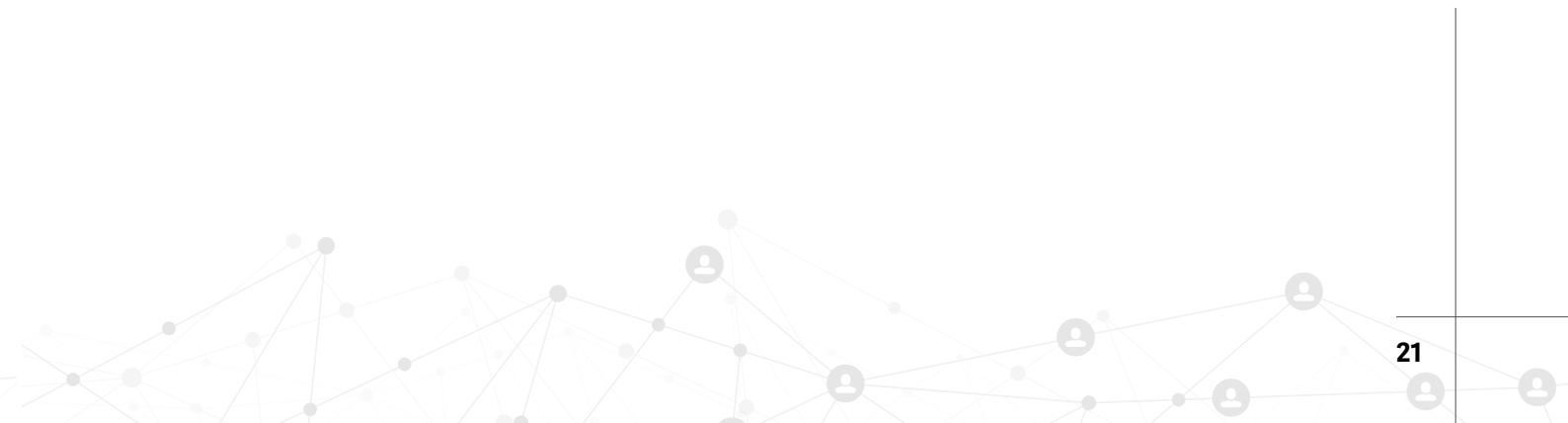
- Raised and discussed with ACT Together Residential Care, ACT Together Management or Child and Youth Protection Services for resolution
- Direct intervention or reasonable explanation given conveyed back to the young person.

Bimberi Youth Detention Centre Complaints

- Program access
- Ability to mix with other young people
- Fair treatment by staff / staff engagement issues
- Reliability of information provided by staff
- Provision of quality and quantity of food
- Impact of COVID restrictions on visits and transitions in the centre
- Exit planning.

Bimberi Youth Detention Centre Actions

- Many matters were reported and discussed with Bimberi Operations Management for resolution
- Some matters escalated from Bimberi Operations Management to the Unit Manager, Operations Manager and Branch Manager for resolution.



Homelessness

During the 2021-22 financial year the Homelessness Official Visitor received a number of complaints including:

- Alleged unreasonable service rules or requirements
- Inter-resident dispute
- Delayed service referrals
- Delayed housing approvals.

Action taken on complaints

- Discussed and referred matters back to service staff and other relevant agencies.



Section 23DA(1)(c) Systemic Issues in relation to the operation of the Act

Systemic issues have been identified by the Board in two ways –

- *through issues identified by the Board itself in relation to the administration of the overall Scheme; and*
- *through the Board's consultation with Official Visitors regarding systemic issues identified in their implementation of the Official Visitor Act 2012 (the Act) across their respective jurisdictions.*

The Board

Budget expenditure and expenditure volatility

As noted in the last Annual Report, budget expenditure pressure is a key systemic issue in the operation of the Scheme. In the 2021-22 Budget, the Scheme was able to secure additional recurrent funding which has eased budgetary pressures. However, Official Visitor expenditure is highly variable depending on demand and complexity of issues during any particular financial year.

Visitable places registers

The Scheme has also identified issues with the maintenance of visitable places registers. Under section 23DB(3) of the Act:

- the relevant Director-General responsible for a visitable place must keep a register of each visitable place
- that register must include, at least, the address of each visitable place and the contact details of a person who can provide access to the place
- the relevant Director-General must, on request, give information on the register to relevant Official Visitors and the Board.

Official Visitors rely on the registers to know where and how their visiting efforts should be directed. Official Visitors have noted problems with the completeness and currency of visitable places registers. They can have difficulties following up a complaint if a visitable place's status changes (e.g. the ward changes from visitable place to no longer being a visitable place), particularly as a previously entitled person may continue to face discrimination.

The Board notes there are challenges for relevant Directorates to maintain complete and current registers especially those including community-based housing and work in cooperation with Operational Directorates to improve the currency of the registers is ongoing.

Supporting Official Visitors with key responsibilities

During the reporting period, the Board developed a Charter that captures Board and Official Visitor roles, duties and responsibilities. The Board will provide training and support to Official Visitors to assist them to comply with their identified obligations.



Mental Health

Mental Health Official Visitors (MHOV) are responsible for visiting accommodation facilities in which people are receiving care or treatment for a mental health illness. Under the provisions of the MHOV scheme such people are referred to as “eligible persons”. The total number of visited facilities was 9 government operated facilities with a total of 142 beds, a private facility with 28 beds, 6 government funded community facilities with 32 beds, and approximately 58 National Disability Insurance Scheme (NDIS) group homes ranging from 2 - 5 beds each. Total beds numbers visited ranged between 260 – 350 beds. COVID impacted on the usual face to face visiting schedule where services were provided by telephone consultation, email and follow-up. The MHOVs found that there was high demand for service from the acute facilities, although some issues were raised by eligible persons in NDIS group homes.

Transparency of Consumers’ Rights

Consumers regularly complained that the reasons they were being held in the service, against their will, were not clear to them. In a number of circumstances MHOVs had to intervene to assist consumers to be provided with a copy of their orders. It is considered that provision of orders to consumers should be a standard practice and that all consumers should be provided with this information at the time the orders are made. In addition, staff should allocate time to ensure that the consumers can understand what the order means and the impact the order may have on their care.

Culture of Dhulwa Secure Mental Health Unit

A significant concern has been regular complaints from consumers at Dhulwa Secure Mental Health Unit (Dhulwa) regarding the restrictive nature of services provided. The service operates using an observation, supervision and containment model that is more in keeping with a correctional environment rather than a contemporary mental health model of care. There is a distinct lack of any therapeutic model of care and interactions appear limited to observation and supervision and lack empathy, compassion or a person-centred approach. Although there has been a slight improvement in recent times, there remains significant scope for ongoing improvements. One MHOV appeared before the Dhulwa Inquiry and gave evidence to the Inquiry regarding these concerns.

Quantum of Funding for Mental Health Consumers in NDIS Community Housing

Consumers have indicated that they are experiencing a decrease in their NDIS funding when their Care Plans have come up for review. There is a need to ensure that when funding and care plans are reviewed that a qualified and competent staff member is available to ensure appropriate articulation and understanding of the consumer’s clinical and quality of life needs in order to ensure adequate ongoing funding to meet the consumer’s care requirements.

Culture of the Gawanggal Rehabilitation Unit

An ongoing concern in relation to the Gawanggal Rehabilitation Unit (Gawanggal) is a culture of risk aversion resulting in the control and limitation of decision making for consumers. There is a need to re-focus the culture of the unit to a model of care that is more in keeping with a least restrictive, rehabilitative environment where consumers are encouraged to manage their own decisions and risks. This environment has resulted in complaints about access times to television, provision of plastic rather than real cutlery, access to courtyard areas during the evening and loss of control over day leave options.



'Internal' and external leave application processes

The processes for approving consumer leave at both Dhulwa and Gawanggal Units is complex, convoluted and poorly understood by consumers. The application for leave should be seen as a therapeutic encounter with the consumer, case manager and a decision maker and typically should be a usual part of ongoing care planning. Instead, formal leave committees review and approve or deny applications by consumers, often in the absence of the consumer and without adequate explanation of why some leave is approved and some is denied.

Case study

X is a forensic consumer at Dhulwa having been transferred there from the Alexander Maconochie Centre (AMC). X complained that he does not like confined spaces and has identified that he becomes paranoid and unsettled if he cannot 'walk off' his anxiety and agitation. X uses walking as a mechanism to 'self soothe' and manage his agitation arising from his psychotic illness.

X is only allowed to walk inside the unit and into the small courtyard attached to that unit. Although the grounds and gardens at Dhulwa are surrounded by fences that are suited to a jail and are not climbable – X has to apply to the leave committee to have 'internal leave' to access the walking paths and gardens at the facility.

Despite questioning of this process by the MHOVs – the practice continues. The MHOVs have made the HRC Mental Health Advocate aware of their concerns and have raised this matter with both management and the Inquiry into Dhulwa



Disability

Housing

During the reporting period, the Official Visitors for Disability Services (OVDS) continued to raise long-standing concerns about the standard of some houses where visitable people reside and the failure of Housing ACT to address issues around the use of Specialist Disability Accommodation (SDA) funds. Feedback from service providers in the ACT is that the National Disability Insurance Agency (NDIA) is including SDA funds in people's NDIS Plans who are currently living in eligible properties, but that these funds are not being claimed by Housing ACT or any community housing providers managing the properties. The OVDS received a number of complaints about the use of these funds for modifications but were unclear about Housing ACT's processes and intentions.

Official Visitors across all jurisdictions requested a meeting with senior staff from Housing ACT in December 2021 to discuss a range of issues, including any proposed use of SDA funding in relation to houses owned by Housing ACT. The meeting was due to occur in March 2022 but was postponed until May 2022. The Official Visitor for Homelessness represented concerns to Housing ACT on behalf of the Official Visitor group. Feedback from the meeting included an acknowledgement that there was an absence of a clear path forward for the ACT Government's SDA stock and this was causing confusion for NDIS participants, their families, the sector and the Official Visitors.

The Directorate advised that the Government is continuing to work with the NDIA to progress steps towards implementing SDA and that Housing ACT will continue to communicate with community sector providers as SDA implementation progresses. Housing ACT agreed that an update would be drafted for all local stakeholders within a few weeks. The OVDS saw no indication by the end of the reporting period that this has occurred.

While some providers have been regularly advised that SDA issues would be resolved within three to six months, no solution appears to have yet been progressed. The issue has been unresolved for several years and is a continuing source of frustration for all parties involved.

COVID-19 / Vaccinations / Rapid Antigen Tests (RATs)

COVID-19 continued to impact on the work of the OVDS during the current reporting period. Phone calls were made in lieu of visits on many occasions, which limited the OVDS' ability to monitor the services provided to people with disabilities and the environments in which they were living. The OVDS welcomed the Government's decision to mandate vaccinations for disability support workers. Quarterly reports noted that some residents remain unvaccinated because guardians will not consent to vaccinations. These cases were discussed with the Public Guardian and with the Disability and Community Services Commissioner.

The OVDS ceased visiting in January 2022 when it became apparent that Omicron was spreading among residents and staff in a large number of properties. This was a difficult decision, but the OVDS did not wish to be a source of the spread of COVID as they moved from property to property. The OVDS sought to be included in ACT Health's advice in relation to this issue on an ongoing basis, so that sensible decisions could be made about places to visit. The OVDS welcomed the support of the ACT Office for Disability in progressing the provision of Rapid Antigen Tests to allow for testing prior to visits, which enabled a safer resumption of visiting after the Omicron wave peaked.

Unregistered practitioners' legislation

During discussions with the Disability and Community Services Commissioner, the OVDS requested an update on progress with implementing legislation in the ACT to establish a code of conduct for unregistered practitioners (who are not subject to regulation by the Australian Health Practitioner Regulation Agency). Such legislation would provide the Commissioner with authority to prohibit unregistered practitioners from working, or to place conditions on their provision of services. The proposed legislation has been under consideration for many years and the ACT is lagging behind other jurisdictions in providing this additional protection for the community.

The OVDS often deals with complaints regarding the actions of unregistered practitioners in providing services to people with disabilities and have ongoing concerns about the professionalism of some of these

practitioners, such as naturopaths, speech therapists, dieticians etc. We also understand that the legislation would apply to disability support workers, to the extent that they are providing a health-related service. If this is the case, this would be a measure that would significantly improve the professionalism and accountability of this workforce, enhancing existing worker screening processes and requirements to comply with the NDIS Code of Conduct. The OVDS urged that this legislation be given priority as many vulnerable people in the disability community are not well served by the actions of workers who fail to meet acceptable standards.

Integrated Service Response Program (ISRP)

The OVDS welcomed interactions with the ISRP, located in the ACT Office for Disability, which provides valuable assistance and funding to people with disabilities when urgent issues need to be addressed. The OVDS noted in a quarterly report that it is often by accident, however, that they discovered a new client had been placed in supported accommodation with the support of the ISRP. While the ISRP is not a service provider, in the sense that it is required to advise the existence of a new place for the register of visitable places, the OVDS recommended that the Official Visitors be advised when new residential support is established. The OVDS noted that this would provide an extra check and balance in the system, and facilitate timely visiting to vulnerable people settling into new homes. The ISRP agreed to this recommendation.

Deaths of people with disability in supported accommodation

The OVDS continued during the reporting period to raise concerns about a lack of insight into deaths of people with disability in supported accommodation in the ACT. In the 2020-21 Annual Report the OVDS noted that, from their experience, there appeared to have been a rise in the number of deaths in disability accommodation in recent years, but it was not possible to quantify whether this belief was correct as no data was being collected locally to measure differences over time. The OVDS recommended that the ACT Government consider establishing a disability death review function to collect data, to monitor deaths of people in the ACT, and to identify systemic concerns so that appropriate measures could be established to prevent the deaths of people with disabilities in care.

Supported Independent Living (SIL) funding reductions

The OVDS noted in its 2022 quarterly reports that they had received a number of reports of reductions in SIL funding in NDIS Plans. Some of these reductions have been against the recommendations of allied health professionals and often result in reduced staff time available for the person. This downward pressure on SIL budgets seems to be consistent across providers and participants. Towards the end of the reporting period, the OVDS discussed this issue with a number of providers and there is widespread concern about the ability of providers to continue to support individuals who have experienced severe funding cuts. Some providers reported that they are subsidising a number of clients but that this is unsustainable. Examples of funding cuts, ranging from -3% to -50% of individual packages, were provided. The OVDS noted a number of examples of the negative impact that SIL funding cuts were having on residents. Information obtained by the OVDS was passed on to the ACT Office for Disability and some individual cases were referred to the ISRP for support.

Corrections

COVID-19

Impacts of COVID in the Alexander Maconochie Centre (AMC) were significant. The largest of which was the restrictions on visits and the difficulties in maintaining workforce numbers. It was pleasing to note that the number of outbreaks in the AMC was relatively low, and in each case was handled quickly and a widespread outbreak was prevented.

Women's move

A significant and ongoing challenge has been the impact of the move of the female detainees from the Special Care Centre (SCC) back to the Women's Community Centre (WCC). Unfortunately, the same issues that were part of the reason for female detainees being originally moved to SCC were not addressed prior to moving back. Predominately there is a limited capacity to manage separation and management of a wide variety of cohorts and regimes within a limited space. It has led to a large number of complaints about violence, lack of access to activities / programs, and distress to vulnerable detainees.

Boredom

An unfortunate confluence of events including the impacts of COVID, workforce challenges, having no education provider for a significant portion of the year, difficulty or inability to access employment (many jobs were put on hold or cancelled with COVID), and high level of 'repeat visits' of detainees means there is a regular complaint of boredom. Many detainees have already attended programs previously, access to oval time / activities was impacted and access to visits were reduced. This led to regular complaints and frustrations from detainees having nothing to do.

Justice Health

The most regular source of complaints in the last year was regarding justice health services. This ranged from long waiting times, inability to access medications that detainees were receiving in the community, poor service capacity out of business hours / weekends due to an inability to access mental health supports. The Corrections Official Visitors regularly work with Justice Health management to address these issues and are participating in the current Justice Health model of care review project.

Maintenance Issues

Exacerbated due to COVID and a number of heavily fire damaged buildings in need of significant work, complaints about maintenance were a regular occurrence. Many times these were about simple matters that were addressed quickly once raised with the Corrections management team. More often the issue was around the process of how these issues are raised from detainees to Corrections Officers and then allocated and prioritised into the system.

Communal Computers

It was positive to see in the last year that communal computers were reinstated in every accommodation block / unit across the AMC. It is frustrating however to note that many of them were quickly unusable due to the fact that the main screen / computers were secured to the desk however the peripheral devices (keyboard / mouse) were not and were consistently taken by detainees for personal use.



Access to Housing

A system wide challenge that creates real issues for detainees is the lack of affordable and safe housing. Detainees are rarely if ever able to access a public housing property on exit from the AMC, and a requirement for those exiting on parole is access to housing that meets the requirements of the Sentence Administration Board. This can and has resulted in detainees serving longer sentences than they need to purely due to a lack of housing.

Blueprint for Change

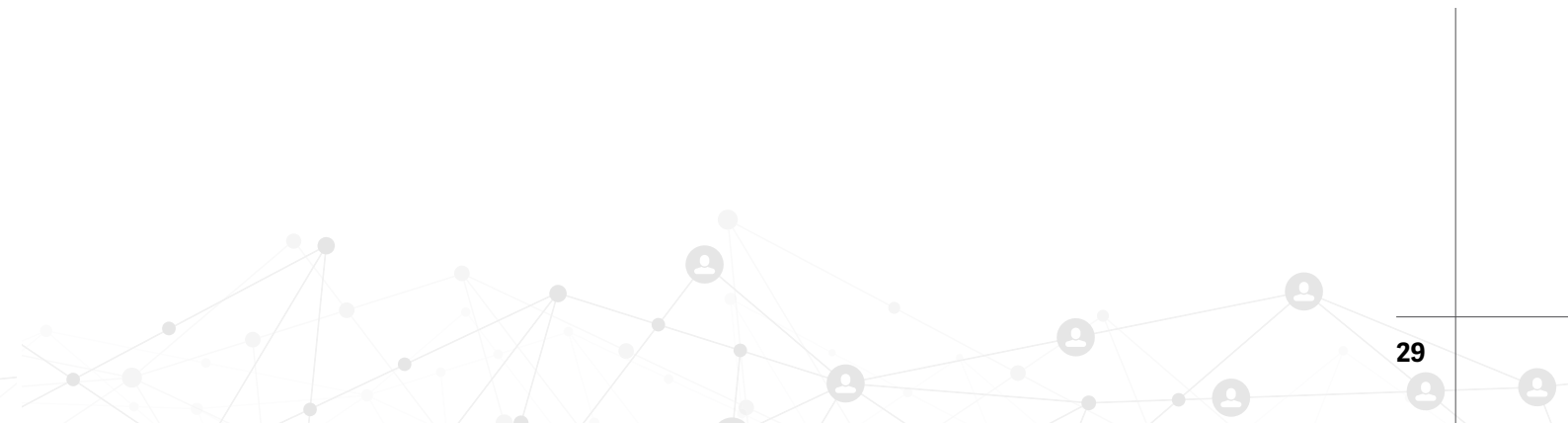
Over the last year the Corrections Official Visitors were heavily involved in the Minister for Corrections' Blueprint for Change process. This was a very positive group / series of meetings that is hoped will lead to significant change in the culture, level of supports and professional nature of the AMC.

Case Study

Detainee X requested via a Corrections Officer that they wished to speak with an Official Visitor (OV). X was currently unable to contact an OV as they were in management without access to a phone or computer. The detainee alleges a particular Corrections Officer (CO) was targeting them, raising 3 specific circumstances where X was assaulted and also had a fire extinguisher sprayed directly into their face.

The OV raised the issue with Corrections and requested copies of any relevant incident documentation and footage. This was provided and a session organised where the OV sat down with a number of senior staff to review footage and discuss. It was determined one of the circumstances the CO in question was not even working, the second incident review of the footage revealed a reasonable use of force was applied as part of an incident, the third incident review found that the detainee did indeed receive a face full of extinguisher spray, however it was in the process of putting out a fire next to the detainee that they had lit.

It was however clear that no warning was given to the detainee and there is a real risk of harm from these sprays. A recommendation was given that part of training and procedure use should include a reasonable and clear advance warning to any detainees nearby that spray is about to be used.



Children and Young People

There are 32 visitable places including Bimberi, Narrabundah House and Out of Home Care (OOHC) residences. Some of the OOHC residences accommodate young people over the age of 18 who determine whether they want the Official Visitor to meet with them and a few others are run by a disability organisation accommodating young people with a disability who are involved with care and protection or youth justice systems. The number of visitable places varies from quarter to quarter depending on the number of young people in OOHC and the houses used to accommodate them.

The number of young people seen is not indicative of the number of young people in care and protection or juvenile justice systems. A significant proportion of young people in Bimberi are on remand and are seen repeatedly while their charges are investigated and court appearances arranged. Some young people do not apply for bail, meaning they will remain in Bimberi for longer periods before being released or sentenced for short periods.

Young people in OOHC were also seen repeatedly as they are either on long term care orders or voluntary care orders between their parents and Child and Youth Protection Services (CYPS). There were 194 visits and 375 young people were seen.

Out of Home Care

Many of the issues raised as complaints (earlier in the Annual Report) are systemic issues within the OOHC system across all residential care houses. While it is acknowledged that ACT Together (ACTT) seek to provide a quality service and individualised response to young people in OOHC, particularly with some of the complex issues that young people in care experience, staffing issues and consistency of care exacerbate their ability to meet the needs of all young people.

There are also issues with access to social housing to support young people's transition from care. Young women under 18 years are also placed in Crisis Accommodation Program (CAP) housing without regular supports.

COVID restrictions at Bimberi

During the COVID restrictions, family visits were limited to Audio Visual Links (AVL) and 'box' visits (i.e. confined room visit between family and young person with glass separating them) not allowing any direct contact. There were concerns COVID reasons were used for isolating young people from one another and as an unnecessary quarantine measure.

Exit planning at Bimberi

The Official Visitors have continued to engage with Bimberi management and members of the oversight group to develop a non-statutory support service for young people in Bimberi to provide ongoing assistance to them upon release and to reduce the incidence of recidivism. Efforts will continue to establish such a service in the coming year.

Food at Bimberi

There have been complaints as to food quality, quantity and appropriateness for the dietary needs of young people.



Mental Health

There are concerns regarding secure mental health services for young people under the age of 18 and access to appropriate clinical care. Some young people are being inappropriately placed in the Adult Mental Health Unit (AMHU) due to lack of an age-appropriate service. There is no provision for the administration of medication for a young person with a mental health condition.

Young women

There are issues as to the welfare of young women absconding from care, self-selecting accommodation and being at risk of sexual exploitation. Some of these young women are also detained in Bimberi.

Social housing

There have been concerns as to young people's access to social housing upon release from residential care and Bimberi.

Uncoordinated support

There is lack of a coordinated service response by Bimberi and ACTT to young people who cycle between the two service systems. A number of young people in out of home care are detained in Bimberi and released from the detention centre to OOHC on a regular basis.

Case Study

Despite the best of intentions and time involved to assist the transition of a young person from Bimberi into safe secure accommodation with supports in place, their exit from Bimberi resulted in the young person returning to their former lifestyle. There is no framework to support the successful exit for young people from detention. This young person, who had made significant gains during detention and who had decided to remain in Bimberi over the holiday period to avoid exposure to old associates and habits, was exited to Narrabundah House, however due to the lack of active engagement and follow up, contact was lost and all planning (focused on their return to a regional town) deemed unsuccessful given the apparent inability of services to work together to provide a sufficient safety net. It highlighted the need for a framework to support transition from entry to Bimberi to release and post release.



Homelessness

Housing ACT

The wait for social housing properties – including over 12 months for priority housing – is continuing to put a strain on both residents of homelessness services, and the services themselves, who are finding people needing to stay longer. This is also causing bottlenecks for people experiencing homelessness who are needing to enter temporary accommodation and support.

Within that context, there was a trend across the year towards greater satisfaction with the way Housing ACT staff are dealing with housing applicants. Residents described better communication, more consistency in messaging, and greater understanding and adjustment for varying needs, such as low literacy or mental illness. It is understood that Housing ACT is undertaking service improvement measures, and these appear to be bearing fruit.

Where problems did arise, these appeared to be largely due to staff shortages and turnover as a result of COVID, and the inevitable frustration of long wait times.

Specialist homelessness sector

Homelessness services run by community agencies appear to be functioning well and delivering high quality services, with collaborative relationships across other service domains, such as legal assistance, financial counselling, and domestic violence support. However, there were concerns raised by some residents with complex needs, such

as alcohol and other drug issues, who felt they did not always receive the understanding and support needed.

It is pleasing to see that the specialist homelessness sector is now developing a closer relationship with Alcohol and Other Drugs (AOD) services, including cross-sectoral professional development. Inevitably, it will take some time for improved culture and practice to take hold. This is an area that service managers may wish to pay special attention to.

Service gaps

Several residents and service providers have noted an absence of temporary or transitional couples' accommodation for people in housing and financial stress.

Women with babies have reported several instances where they had to reside in specialist accommodation which could not accommodate their male partners. While this apparent need is only anecdotal to date, the Community Services Directorate may wish to work with the homelessness sector to test the evidence for such specialist accommodation.

Gaps between services remain an issue, especially for people transitioning from various statutory services such as AMC, Bimberi and the Adult Mental Health Unit (AMHU). Improvements in protocols and collaborative practice between these institutions and specialist homelessness services would assist in improving outcomes.

Case Study

X was a young person with a history of mental illness and street homelessness who was referred by OneLink and accommodated by a specialist homelessness service. With the support of the service staff, they applied and were approved for priority housing.

The service has a notional time limit of 3 months to accommodate residents, and after this time was able to house X in transitional accommodation, with outreach support.

The service had committed to maintaining this housing for X until their priority housing was allocated. However, before this occurred, X had a severe mental health episode and left the transitional house, with no known destination. Service staff were unsure whether X had gone back to rough sleeping in Canberra, or travelled interstate.

X's priority housing allocation came through a few weeks later, but X was unable to be contacted.



Common systemic issues across Official Visitor jurisdictions

Transition planning

Official Visitors (OVs) have noted problems for entitled persons and others transitioning to various housing options from other human services areas, such as Adult Mental Health Unit (AMHU), Alexander Maconochie Centre (AMC), Bimberi Youth Justice Centre (Bimberi) and Out of Home Care. Such transitions are often at a vulnerable time, and people sometimes fall through service system cracks, and risk becoming homeless.

Sometimes the issue is the inability to transition due to the lack of housing options. This includes:

- people with disabilities who are forced to remain in hospital, or in some cases are moved inappropriately to aged care facilities
- AMC detainees who may be denied parole
- Residents of AMHU who stay beyond their involuntary detention periods.

Recommendation

All relevant ACT Government Directorates to work with Housing ACT to develop cross-agency procedures that plan for the needs of people transitioning from government facilities and services into social or community housing.

COVID in correctional settings

AMC detainees raised concerns around their safety during the lockdown including:

- Corrections Officers not wearing masks
- detainees from different accommodation blocks / sites mixing together for work
- problems with access to vaccinations and Rapid Antigen Tests

Bimberi residents raised concerns regarding:

- restricted visiting arrangements, including via Audio Visual Links (AVL) and non-contact "box" visits
- use of COVID to unduly isolate and quarantine young people and limit their access to programs.

These issues will be monitored.

Cultural sensitivity and awareness towards Aboriginal and Torres Strait Islander consumers

OVs and Aboriginal and Torres Strait Islander entitled persons have observed that cultural competence remains patchy across the service system.

Recommendation

All Directorates should provide effective cultural awareness and competency training to staff and regularly refresh the training as needed, with priority for client-facing staff.

Client needs and cross-government integration

Many entitled persons have complex needs that do not fit neatly within the remit of a single government agency. The most effective response is collaboration across administrative boundaries to progress and resolve. OVs have observed that there is scope for better integrated services. This should start from a 'client first' perspective, rather than an agency focus.

Recommendation

Health and human service agencies should examine the need for better policy coordination, collaborative practice and information sharing aimed at delivering effective outcomes for clients with complex needs.



Section 23DA(1)(d) Number and kinds of matters referred by an Official Visitor to an investigative entity

Official Visitors refer matters to different organisations.

Mental Health

During the 2021-22 financial year the following kinds of matters were referred to investigative entities -

- 2 x referrals to NDIS Quality and Safeguards Commission for review of NDIS quantum of funding
- 6 x referrals to Housing ACT for maintenance issues
- 4 x referrals to Legal Aid for criminal and civil matters
- 5 x referrals to the Public Trustee and Guardian for guardianship concerns
- 4 x referrals to the Australian Federal Police for inter-consumer violence
- 3 x referrals to ACT Disability, Aged and Carer Advocacy Service (ADACAS) for advocacy around systems and emotional support matters
- 1 x referral to Aboriginal Legal Service for consumer requesting access to the healing farm
- 2 x referrals to Advocacy for Inclusion for emotional support
- 5 x referrals to the Mental Health Advocate for consumers requesting / requiring advocacy
- 1 x referral to the Human Rights Commission (HRC) for cultural safety concerns
- 2 x referrals to Capital Region Community Services for NDIS funding progress issues
- 3 x referrals to Corrections Official Visitors for matters related to consumers with mental health care issues.

Disability

During the 2021-22 financial year the following kinds of matters were referred to investigative entities -

- 4 x referrals to the Office of the Senior Practitioner in relation to restrictive practices
- 4 x referrals to the NDIS Quality and Safeguards Commission for formal investigation
- 4 x referrals to the Public Trustee and Guardian in relation to guardianship concerns
- 5 x referrals to the HRC for consideration.

Corrections

During the 2021-22 financial year the following kinds of matters were referred to investigative entities -

- 4 x referrals to the HRC for consideration of issues relating to health, education, excessive use of force, management, parole, personal information and guardianship
- 1 x referral to the Inspector of Custodial Services to investigate complaints regarding lost possessions
- 3 x referrals to the ACT Ombudsman to investigate issues around probation and parole, education and the Management Unit
- 2 x referrals to the Mental Health Official Visitors to investigate difficulties in referring detainees requiring urgent mental health intervention.

Children and Young People

During the 2021-22 financial year the following kinds of matters were referred to investigative entities -

- 4 x referrals to the Public Advocate seeking advocacy for young persons due to physical / psychological incidents or issues.

Homelessness

No matters were referred to investigative entities for the 2021-22 financial year.



Executive Officer / Administrative Support

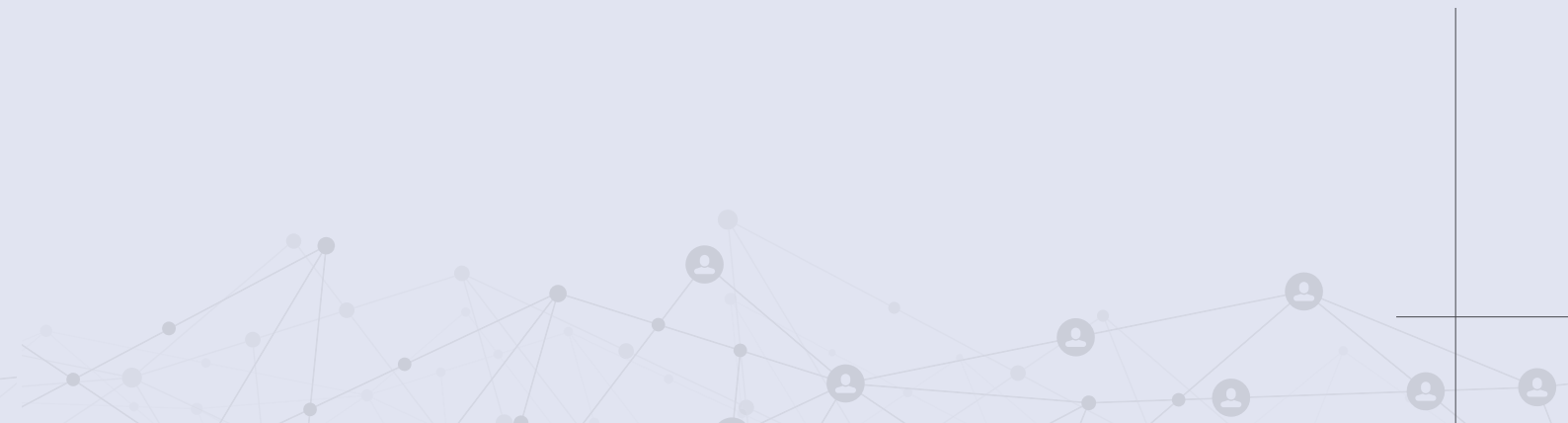


Mr Stefan Dzwonnik
is the Executive Officer
of the Official Visitor Scheme.



Glossary of Abbreviations and Acronyms

Act, the	<i>Official Visitor Act 2012</i>
ACTT	ACT Together
AMC	Alexander Maconochie Centre
AMHU	Adult Mental Health Unit
AOD	Alcohol and Other Drugs
AVL	Audio Visual Links
Bimberi	Bimberi Youth Justice Centre
Board, the	Official Visitors Board
CAP	Crisis Accommodation Program
CO	Corrections Officer
CYPS	Child and Youth Protection Services
Dhulwa	Dhulwa Secure Mental Health Unit
Gawanggal	Gawanggal Rehabilitation Unit
Guidelines, the	<i>Official Visitor Guidelines 2020</i>
HRC	ACT Human Rights Commission
ICT	Information and Communications Technology
ISRP	Integrated Service Response Program
JACS	Justice and Community Safety
MHOV	Mental Health Official Visitor
NDIA	National Disability Insurance Agency
NDIS	National Disability Insurance Scheme
OOHC	Out of Home Care
OV	Official Visitor
OVDS	Official Visitors for Disability Services
PTG	ACT Public Trustee and Guardian
RAT	Rapid Antigen Test
SCC	Special Care Centre
Scheme, the	Official Visitor Scheme
SDA	Specialist Disability Accommodation
SIL	Supported Independent Living
TRC	Transitional Release Centre
WCC	Women's Community Centre





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