

Under the Inquiries Act 2013
In the matter of the Royal Commission into Historical Abuse in State Care and in
the Care of Faith-based Institutions

Department of Corrections: Brief of Evidence of Jeremy Lightfoot for Institutional Response Hearing

08 August 2022

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Brief of evidence of Jeremy Lightfoot

I, **Jeremy Lightfoot** of Wellington, Chief Executive, state:

1 Introduction

- 1.1 I am the Chief Executive at the Department of Corrections (**Corrections**), a role I have held since 24 February 2020.
- 1.2 As Chief Executive, I am responsible for the safe management and wellbeing of over 7,000 prisoners and nearly 30,000 community-based offenders.
- 1.3 I have responsibility for ensuring the corrections system operates in accordance with the purposes set out in the Corrections Act 2004, providing administrative support to the New Zealand Parole Board, and contracting with a wide range of commercial and community organisations for the provision of infrastructure, programmes, and services.
- 1.4 In addition, I have legal custody of prisoners in Corrections' prisons and am responsible for ensuring their safe custody and welfare. I am also responsible for the safe management of those serving one of the ten community-based sentences and orders administered by Corrections.
- 1.5 I work at a system level with other public sector agencies to address systemic issues and to realise opportunities to achieve the Government priority of healthier, safer, and more connected communities. This includes contributing to the Government's justice system reform agenda, addressing the over-representation of Māori in the criminal justice system and supporting the Joint Venture to reduce family and sexual violence.
- 1.6 I have worked at Corrections since 2010 and in that time have held a number of senior executive roles covering operations, commercial, critical infrastructure, finance, and strategy.
- 1.7 In these roles and in my current role as Chief Executive, I have developed knowledge and experience across a wide range of issues facing the organisation. I have also developed strong relationships with the wider justice sector and community partners.
- 1.8 I am accompanied by my colleagues in giving evidence before the Royal Commission:
 - (a) Emma Gardner, Director Mental Health and Addictions. Emma can speak to Corrections' Health Services which encompasses health, disability, mental health, and addiction services to all people in Corrections' management.
 - (b) Neil Beales, General Manager Custodial and Chief Custodial Officer. Neil can speak to custodial policies and practices, including those relating to youth managed by Corrections.
 - (c) Jessica Borg, General Manager Psychology and Programmes. Jessica can speak to psychology and rehabilitation services and programmes

available to all people in Corrections' management, including on trauma-informed care.

- (d) Rebecca Barson, General Manager Reintegration and Housing. Rebecca can speak to the reintegration services and programmes available to all people in Corrections' management.

- 1.9 Before covering the detail of Corrections' evidence, I want to acknowledge the incredibly important work of the Royal Commission. I would also like to acknowledge the courage of the almost 1,900 survivors who have so far shared their often harrowing experiences. Without their willingness to share, it would not be possible to achieve the Royal Commission's transformational vision.
- 1.10 I acknowledge that those who have been or continue to be, in the care of the State should have felt safe and protected by those who care for them. While borstal institutions, youth prisons/facilities/centres, corrective training institutions, and detention centres (**the former facilities**) that are subject to this Inquiry were disestablished prior to the formation of Corrections, I acknowledge that this has not always been the case.

2 Overview

- 2.1 When the Department of Justice was abolished in 1995, three new entities including Corrections were established. Corrections assumed the function of the Department of Justice's penal division which included the operation of the prison system.
- 2.2 For the purpose of this Commission, which largely excludes prisons, Corrections' relevant role is to discuss the operation of the former facilities.
- 2.3 The evidence before the Commission has detailed abuse experienced in the former facilities and also the experiences of people who suffered abuse in state care and went on to be imprisoned.
- 2.4 On behalf of Corrections, I acknowledge that abuse in any form in the former facilities is unacceptable.
- 2.5 The former facilities have been abolished¹.
- 2.6 As at 04 August 2022, the number of youth in the youth unit at Christchurch Men's Prison are as follows. Aside from the 17-year old in this youth unit, there is only one other 17 year-old in Corrections' custody at Hawke's Bay Regional Prison who will be transferred to the Christchurch Men's Prison youth unit following the incident at Hawke's Bay Regional Prison.

SITE	UNIT	AGE				Total
		17	18	19	20	
Christchurch Men's Prison	YOUTH KIWI	1	4	7	5	17

¹ Borstal training and detention centres were abolished in April 1981, when Part II of the Criminal Justice Amendment Act 1975 was brought into force. Corrective training was abolished in the late 1980s.

- 2.7 In Corrections' NTP 440 Response dated 13 June 2022, a copy of which is attached as **Tab 1 (Corrections' Response)**, it was noted at paragraph 8.6, that there is an under-20 youth unit at Hawke's Bay Regional Prison, as well as two units for those aged 20-24 situated at Rimutaka Prison and Manawatu Prison. Due to a number of factors such as: operational requirements, funding, and location of demand for youth and young adult beds, the units at Manawatu and Rimutaka Prisons are being returned to mainstream units. The recent incident at Hawkes Bay Regional Prisons Youth Unit has resulted in the unit having to close to enable us to assess damage and determine next steps.

3 Scope of evidence

- 3.1 The Commission has identified the below topics as being of particular interest for Corrections' evidence:

- (a) Te Tiriti o Waitangi
- (b) Priority Groups (being Māori, Pacific, and disabled people)
- (c) Monitoring, Oversight, Safeguarding
- (d) Entry into care
- (e) Staff and caregivers
- (f) Provision of care
- (g) Complaints, Referrals and Criminal Justice
- (h) Funding and resources
- (i) Lessons learned
- (j) Impacts of abuse on the prison population

- 3.2 Each of these topics is the subject of comment in Corrections' Response. That response was prepared by Corrections, and not all subjects discussed in the response are within my personal areas of knowledge.

4 Te Tiriti o Waitangi

- 4.1 Te Tiriti is discussed in section 3 of Corrections' Response. As noted there, the Waitangi Tribunal's 2017 report, *Tū Mai te Rangī!*, noted a number of ways in which Corrections was not meeting its Tiriti obligations and needed to be more proactive in using a cultural approach in its management of people. Corrections has since adopted Hōkai Rangī, launched in 2019. Hōkai Rangī sets out a long term strategic vision for values-led change towards a more culturally appropriate approach to looking after people in Corrections' management, including through the development of services by Māori and for Māori, tailored for specific groups.
- 4.2 The importance of maintaining whānau, whakapapa, and cultural connections is discussed in section 4 of Corrections' Response. As noted, Corrections is of the view that access to culture is a fundamental right as opposed to a privilege and

is working towards a long-term outcome of all Māori in Corrections' management having access to their culture. Section 4 outlines kaupapa Māori and mātauranga Māori programmes and interventions already available to help ensure Māori can continue to remain connected to their culture whilst in Corrections' management.

5 Priority Groups

5.1 The priority groups identified by the Commission are:

- (a) tāngata whenua;
- (b) Pacific peoples; and
- (c) disabled people.

5.2 Issues relating to racism, ableism, and bias are discussed in section 2 of Corrections' Response. Cultural support and considerations are discussed in section 4. Compliance with international human rights law, particularly with respect to persons with disabilities, is set out in section 15.

Supporting cultural continuity of Māori and Pacific people

5.3 As mentioned, Corrections is of the view that access to culture is a fundamental right. Corrections takes proactive steps to ensure that people in Corrections' management are provided with culturally appropriate care that enables access to, or engagement with, culture. The range of culturally-specific programmes, services (including health and education services), and interventions are noted in section 4.

Supporting autonomy and needs of disabled people and people with mental health conditions

5.4 Corrections' health and disability services are informed by Hōkai Rangī. One of the short to medium term actions within Hōkai Rangī is the co-design of a kaupapa Māori health service, one that reflects the aspirations of whānau, delivers equitable health outcomes, and helps to achieve Pae Ora – healthy futures for Māori, and all those in Corrections' management.

5.5 Corrections is developing a Disability Action Plan which will be launched by the end of August 2022. The draft Plan has three priorities, as set out in paragraph [4.29] of the Response, which will help ensure tāngata whaikaha feel valued, visible, acknowledged, respected, and enabled to live with dignity.

5.6 In April 2021, Corrections' Health Services incorporated the Washington Group Short Set of Questions on Disability into Corrections' initial health assessment, as per paragraph [5.14] of Corrections' Response. The initial health assessment also collects a description of what impact a disability has, including identifying supports a person has access to in the community before their entry into prison. This information contributes to developing a person's plan of care, which may include provision of particular support or referral to other specific providers or services depending on individuals' specific needs.

- 5.7 All prisons have cells that are considered ‘disability friendly’ with processes in each prison’s Receiving Office to determine if a person requires this type of accommodation. These are likely to be modified to accommodate that person’s disability, for example modifying beds and bathing facilities in order to allow that person to undertake their daily living activities independently, if possible. Nationally, there are 116 of these cells.
- 5.8 Work is underway to partner with experts in Neuropsychology and Mātauranga Māori to conduct a large-scale piece of research to understand the cognitive abilities of the people in prison. This work will help inform interventions and pathways.
- 5.9 In March 2020, Corrections initiated a screening programme to help identify dyslexic learners. Education tutors at prisons have conversations with learners shortly after they enter our care, to ascertain their learning needs and enrol them in appropriate educational programmes, which could be literacy and numeracy support, vocational training, or higher education. During this conversation, education tutors use a pre-screening checklist to triage those learners who would benefit from dyslexia screening. Dyslexia screenings are carried out using the Lucid LADS Plus software. Irlen’s screenings are carried out at the same time. To date, 212 prisoners have been screened for dyslexia, with 65% showing as having a moderate or high (90-95%) probability of being dyslexic. During the same period, 483 Irlen’s screenings have been carried out, with 59% resulting in a learner needing an Irlen’s overlay to help with their reading.
- 5.10 In relation to mental health services, Te Whare Tapa Whā and Meihana are acknowledged as Māori models of health and wellbeing in the Intervention and Support Practice Teams’ Cultural Practice Framework and Cultural Competency Standards. Hikitia, a mental health and addictions service for men in prisons in the Central Region, will also be a new approach to providing such services in a prison environment.
- 5.11 In 2017/2018, Corrections launched Tāmaua te Koronga (a youth-focused programme) specifically designed to meet alcohol and other drug treatment needs of youth in prisons. This programme is designed to be trauma-informed and delivered by kaupapa Māori providers. It is alternatively run between a youth unit and a high security unit with men who are under 25 years of age. Tāmaua te Koronga was a pilot programme and has now been moved into baseline funding.
- 5.12 The Intervention and Support Practice Team are multidisciplinary teams of mental health clinicians currently operating in six prisons.² This Team was initially established to support those vulnerable to suicide and self-harm but is now being strengthened to cater to those with moderate to high mental distress. The Intervention and Support Practice Teams have completed training in youth mental health work and have linked in with the Corrections’ youth team to build on their expertise.

² Christchurch Men’s Prison, Auckland Prison, Auckland Region Women’s Corrections Facility, Rimutaka Prison, Mount Eden Corrections Facility, and Spring Hill Corrections Facility.

Impacts of racism, ableism, and bias on resourcing and delivery of care services

- 5.13 Section 3 of Corrections' Response outlines the findings of the Waitangi Tribunal's 2017 report *Tū Mai re Tangi!* and how Corrections has adopted Hōkai Rangi as a result. As Corrections' tuakana strategy, Hōkai Rangi focuses Corrections' efforts on achieving better outcomes for Māori.
- 5.14 Hōkai Rangi recognises the impacts of structural racism and unconscious bias and aims to proactively recognise and eliminate this behaviour, such as by recognising that access to culture is a fundamental right and taking proactive steps to ensure people in Corrections' management are received safely with culturally appropriate care and services that enables access to, or engagement with, culture.
- 5.15 Youth, women, and men have access to tailored services delivered by the right people, with the right skills. These are based on kaupapa Māori approaches, and designed and delivered by Māori, for Māori.
- 5.16 The Māori Pathways programme is a good example of a programme that supports the corrections system to be more effective by using whānau-centred approaches. These provide a fundamental shift in Corrections' approach to improve outcomes for Māori. Iwi have also played a lead role in strategic leadership, decision-making, and the design of key aspects of Māori Pathways.
- 5.17 In terms of ableism, as noted, Corrections is developing a Disability Action Plan which will be launched by the end of August 2022. Key actions planned for 2022 to 2023 include:
- (a) Establishing a national governance group to oversee and monitor progress on the Disability Action Plan. Make up of this group to include tāngata whaikaha, whānau and disability service provider representatives.
 - (b) Continuing to develop accessible communication by translating the Disability Action Plan into Easy Read, Large Print, NZSL and Te Reo versions.
 - (c) Undertaking strategic networking with tāngata whaikaha Māori/disabled persons service providers with aim to deliver integrated and culturally appropriate disability supports.
 - (d) Collecting data from the Washington Group Short Set of Questions (WGSSQ) on disability into all four health screening tools as part of our MedTech health data collection. Currently we have the WGSSQ in two health screening and committed to the other two by December 2022.

Representation of Māori, Pacific, and disabled communities among staff

- 5.18 As noted in Corrections' Response from [4.51], Corrections now has a very diverse workforce. Representation of Māori and Pacific people among Corrections' staff is noted in paragraphs [4.57] to [4.63] of the Response.
- 5.19 In terms of representation of disabled communities among Corrections' staff, there are currently 353 staff employed who identify as being disabled, with 33 holding leadership roles.

- 5.20 The Department's recruitment policy encourages hiring managers using the *Haerenga o Hou tatou* guide, which includes consideration of Te Ao Māori in its approach to recruitment. As noted in the Response, Corrections is continuing to look to ways to increase partnership with Māori at key levels of the corrections system, and to explore how Pasifika people may be better represented particularly in decision-making roles at national steering and governance group levels.
- 5.21 Corrections also has an Inclusion and Diversity Council which has, as its key objectives, to:
- (a) maintain the currency of an Inclusion and Diversity Strategy;
 - (b) provide guidance on prioritisation of initiatives, based on the wider organisational landscape and resources;
 - (c) create alignment of existing and new inclusion and diversity initiatives across Corrections;
 - (d) coordinate and participate in inclusion and diversity events both internally and across the public sector; and
 - (e) evaluate and monitor the impacts of the Inclusion and Diversity Strategy, implementation plan, and key diversity metrics on a regular basis.
- 5.22 The Inclusion and Diversity Council will soon be advertising for a Principal Adviser role which is going to be focused on disability for staff and be responsible for the development of a disability action plan for staff.

6 Monitoring, oversight, safeguarding

- 6.1 Monitoring and oversight mechanisms are outlined in detail in section 10 of Corrections' Response.
- 6.2 The vetting, safeguarding and training practices in relation to Corrections staff, including staff working in youth units, are set out in section 12. Third party contractors are required to complete a criminal record check prior to being contracted by Corrections. They also need to undergo a site induction.
- 6.3 Historically, all deaths in custody were referred to the Coroner, and subject to investigations by the Police and Prison Inspector. Corrections' current practice is for all deaths in custody to be investigated by the Office of the Inspectorate and reported to the Chief Executive of Corrections. A detailed overview of this process is provided in section 13 of Corrections' response.
- 6.4 In 2021, a Suicide Advisory Group (**SAG**) was formed composed of senior representatives from relevant groups within Corrections as well as representatives from relevant external agencies (including the Suicide Prevention Office and the Suicide Mortality Review Committee). Part of the role of the SAG was to contribute expert advice towards the development of Corrections' Suicide Prevention and Postvention Action Plan (2022-2025), which was published in March 2022.

- 6.5 The Action Plan outlines a range of short and long term actions aimed at reducing the prevalence of suicide within Corrections. The Action Plan seeks to promote a proactive response to the issue of suicide and rather than viewing suicide prevention as the sole responsibility of mental health professionals, encourages collective action in addressing this important issue.
- 6.6 The Action Plan also encourages partnership and collaboration between different areas of Corrections, key external stakeholders such as iwi, and service users and their whānau to make sure that all are working together toward achieving the same goals.
- 6.7 Data collection and record keeping practices are explained in section 16 of Corrections' Response. Corrections' data collection and record keeping practices complies with the Privacy Act 2020 and public sector guidelines on data collection and records management.

7 Entry into care

- 7.1 Entry into care, either to the former facilities historically or current Corrections facilities, has been a process largely governed by statute and the operation of the courts.
- 7.2 Management of entrants into borstals are outlined in section 7 of Corrections' Response.
- 7.3 Corrections recognises the importance of reintegration services in providing people serving sentences, and their whānau, with skills and support to live healthy and sustainable lives to reduce or avoid entrance into care once again. Corrections' reintegration services are outlined in section 14 of Corrections' Response.

8 Staff and caregivers

- 8.1 Information regarding staff and caregiver training are provided in paragraphs [12.14] to [12.24] of Corrections' Response.
- 8.2 Appendix Five in Corrections' Response provides a list of existing programmes currently available to all staff working with adults, young people, and youth (either directly or indirectly, for example, through whānau).
- 8.3 Corrections also launched its Young Adult Hub in 2022. This Hub provides a range of online resources to aid staff in learning about working with youth and young people. In addition, micro-learnings or leader-led discussions have also been hosted on the Corrections' Safety Conversations website relating to mental health and trauma.
- 8.4 Health staff at Rolleston and Christchurch Men's Prison also work alongside the Laura Fergusson Brain Trust for specific training. Work is also underway to roll out Withdrawal Management Training (for addictions management) for frontline health staff to be undertaken as part of their orientation and every two years thereafter as a one-day refresher course.
- 8.5 In 2021, Corrections' Child Protection Policy was launched and work is underway to provide staff access to learning materials regarding safeguarding the needs of

children. Further, a new motivational approaches programme is under development to ensure all staff understand stages of change, moments that matter, and motivational approaches to achieve change. This is due to be launched in late 2022.

- 8.6 Corrections will also be developing the second part to Hoake te Manaakitanga. This programme is aimed at a higher level of understanding and practice for family violence practitioners and will comprise an assessment to measure competence and recognise achievement.

9 Provision of care

- 9.1 Access to health care services is set out in section 5 of Corrections' Response, which is focused particularly on access to mental health services and natal care. Section 4, in particular paragraphs [4.27] to [4.38] sets out the provision of culturally appropriate health support, including Corrections' kaupapa Māori health service and the Disability Action Plan which will be launched by the end of August 2022.
- 9.2 Corrections' Young Adult Framework, attached as Appendix One in Corrections' Response, outlines priorities for the care of youth and young adults under Corrections' management.
- 9.3 Opportunities of access to education whilst under the care of Corrections are discussed in section 6 of Corrections' Response.
- 9.4 The actions Corrections has taken, since 1995, to provide care in a way that caters to the different needs of young people and vulnerable adults (including, but not limited to, persons with disabilities, persons who are neurodiverse, mothers, those who have experienced trauma and those from marginalised identifies) are summarised in section 8 of Corrections' Response from paragraph [8.29] onwards.

10 Complaints, referrals and criminal justice

- 10.1 Corrections' complaints system is set out in section 11 of Corrections' Response. Currently, the Corrections Act 2004 applies to complaints by people who are or were under the control or supervision of Corrections.
- 10.2 Currently, Corrections receives complaints, including those about children, young persons, and vulnerable adults, through various avenues. These generally come direct from prisoners using the site Internal Prison Complaints (PC.01) but may also be raised by whānau of those in Corrections' management, or by their lawyers, or other advocates.
- 10.3 Complaints about health services provided within prisons can be given both verbally to a health services staff member or written using a separate Health Services Feedback Form. Once a complaint is received, the Health Centre Manager will acknowledge the complaint within five days and provide information on the next steps. Complaints will be investigated to understand what went wrong, and why, through root cause analysis and a 'no blame' approach. A response is to be provided in writing within 20 days.

- 10.4 Offenders in the community can submit complaints to a probation service or district manager using the Community Probation Complaint Process.
- 10.5 Prisoners and Community Offenders are also able to make contact with a number of external bodies or agencies such as the Office of the Inspectorate (OOTI), the Office of the Ombudsman, or the Health and Disability Commission via 0800 phone services. Whānau and other advocates also have the ability to use these 0800 services (or the OOTI email service) or write directly to these external complaint bodies. Whānau and other advocates can also write directly to the Prison Director, District Probation Manager, or Chief Executive of Corrections.
- 10.6 Corrections currently does not have a formal process or procedure to manage historical claims.

Redesigning the Ara Poutama Aotearoa Complaints System

- 10.7 In 2020/21, the OOTI conducted a special investigation into the management of three women at Auckland Region Women's Corrections Facility. On 22 March 2021, the Minister of Corrections wrote to the Chief Executive setting out his views and expectations in response to the preliminary findings from the investigation. Accordingly, an independent external party was contracted to complete the review with oversight from the Chief Inspector.
- 10.8 The review built on the findings of a 2018/19 review of the complaint resolution system undertaken by KPMG, as well as a second internal review conducted in 2013. The review proposed a redesign of the complaint resolution system to move Corrections towards a model that places the person at the centre of the issue. It highlights key changes that will improve complainants' outcomes and wellbeing, such as a strengthened resolution policy, the use of dedicated staff, and improving access to the complaint resolution system. Redesigning the complaint resolution system provides Corrections the opportunity to align this system to the values and principles of Hōkai Rangi.
- 10.9 Corrections has developed a response to the report and accepted 22 recommendations, and partially accepted one recommendation. The report and response are publicly available on the OOTI website. We welcome the report and are highly supportive of the vision of a manaakitanga approach to complaints and resolutions. Immediate changes have already been made including:
- (a) the appointment of a senior manager to lead the implementation of the recommendations;
 - (b) a new online complaint form implemented on Corrections' website to improve access to the system;
 - (c) prison kiosks being progressively enhanced site by site to enable people in prison to directly submit complaints thereby improving their access;
 - (d) enhanced complaint reporting established on both Corrections' and the OOTI's websites; and
 - (e) implementation of an enhanced interim health complaint policy.

- 10.10 As noted in the report, some changes are achievable in the short to medium-term, and some are longer-term.

11 Funding and resources

- 11.1 Former facilities would have been funded from within budget allocations to relevant operating departments such as the former Department of Justice over the years. It is not clear that the specific allocations for facilities has always been clearly demarcated in a way that is visible in the historic budget records. Corrections does not hold or have access to any historic records of specific funding allocations to the former facilities.
- 11.2 The present day prison system is funded through Vote Corrections. Corrections monitors the achievement of its outcomes and outputs using key performance indicators and non-financial performance measures, which are presented in Vote Corrections Estimates of Appropriations 2022/23 and Corrections' Statement of Intent 2021-2022. Performance is reported annually in Corrections' Annual Report, which is audited by Audit New Zealand.

12 Lessons learned

- 12.1 Corrections is subject to scrutiny and oversight through a number of different mechanisms, including the courts, the Ombudsman, the Office of the Inspectorate, and this Royal Commission itself. Corrections carefully considers the outcomes of these processes, including any findings or recommendations made, in order to improve its operations. This is an ongoing process and the complexity of considering and implementing recommendations reflects the complexity of Corrections' role. Some examples are noted below.
- 12.2 Corrections has implemented recommendations made by the Ombudsman following that Office's investigation of the death of Liam Ashley. The changes already made by Corrections are set out in paragraphs [12.31] and [12.32] of Corrections' Response.
- 12.3 Section 3 of Corrections' response also sets out the steps that Corrections took, and the development and implementation of Hōkai Rangi, following the Waitangi Tribunal's 2017 report, *Tū Mai te Rangi!*.
- 12.4 Section 15 of the Response also sets out Corrections' compliance with international law and instruments. Paragraphs [15.4] to [15.8] in particular outline Corrections' response to the recommendations relating to compliance with the United Nations Convention on the Rights of Persons with Disabilities.

13 Impacts of abuse in the prison population

- 13.1 I acknowledge that any abuse experienced can have long-lasting impacts on the victims as well as their whānau. We also understand that this Commission has heard from people who have suffered abuse in state care that have then gone on to end up in prison.
- 13.2 Corrections adopts a trauma-informed approach to the delivery of custodial services as well as an oranga (wellbeing) approach in its rehabilitative programmes. Our trauma support is outlined in paragraphs [8.53] to [8.63] of

Corrections' Response. To determine when trauma support is needed, individuals will undergo a reception risk assessment. In relation to the Young Person Placement Assessment, part of this assessment measures a person's vulnerability including health problems and intellectual impairment, significant family trauma, past suicide attempts, their past history of secure institutions, their social skills, history of victimisation by peers, alcohol and drug use, active suicide ideation and suicide attempts, and previous contact with psychiatrist, psychologists or other professionals, and psychotropic medication. Assessments are also conducted for psychological distress, vulnerability to suicide and self-harm as well as their own risk to others (including attitudes and behaviours that may have been shaped by trauma-related experiences).

- 13.3 For those who are eligible for Corrections offence-focused Psychological Services, it is noted that during the psychological assessment to determine an individual's risk of reoffending, a key aspect is understanding an individual's background. This assists the psychologist to formulate around why an individual has offended in the manner that they have. During the assessment it may become apparent that an individual is suffering from a mental health condition or has a history of trauma, which may be impacting on their current day-to-day functioning. It is also possible that assessment and formulation may indicate that traumagenic and/or other mental health factors may have either an indirect or direct role in an individual's offending pathway, and therefore addressing the trauma/mental health issue may have some risk mitigating effect in terms of reoffending (as well as being generally beneficial for the individual, in terms of overall personal functioning).
- 13.4 Consequently, in determining an individual's suitability for psychological intervention (related to their risk of reoffending) consideration is given to those factors that may impact an individual's ability to benefit and/or engage meaningfully from the intervention. This means factors such as their mental health and past trauma will be considered in determining their rehabilitation pathway. Depending on the nature of the presentation, these can either be addressed in the individual's work with the psychologist, assisting to get the individual treatment ready, and may also require a referral to an appropriate service (i.e. ACC or the health team).
- 13.5 In addition, I also wish to correct an error in paragraph 8.58 of our Response. That paragraph should instead read as follows: If a person is referred to a Corrections' psychologist, they will be screened for risk of harm to themselves and others. As part of assessing for mental health and/or emotional concerns, a psychologist may administer the MCMI-IV to a person over 18 years old. This assessment measures post-traumatic stress symptoms indicative of trauma. This assessment also measures for types of trauma-related sequelae including eating disorder, emotional dyscontrol, explosive anger, health preoccupation, interpersonal alienation, prescription drug abuse, self-destructive potential, and self-injurious tendency.



Signed:

08 August 2022

Date: