

Adults with cognitive disability in the Queensland criminal justice system

Discussion Paper 4:
Detention

February 2026



The
Public Advocate
Influencing change to transform lives

Acknowledgement of Country

The Public Advocate and staff acknowledge Aboriginal and Torres Strait Islander peoples as Australia's first peoples and as the Traditional Owners and custodians of the land on which we live. We celebrate the diversity of Aboriginal and Torres Strait Islander cultures across Queensland and pay our respects to Elders past, present and emerging.

Acknowledgement of Lived Experience

We acknowledge the experiential expertise of adults with impaired decision-making ability, whose rights we seek in our work to promote and protect.

Acronyms

EBLR	Elevated Baseline Risk
HASI	Hayes Ability Screening Index
IMP	Intensive Management Plan
IOMS	Integrated Offender Management System
IRNA	Immediate Risk Needs Assessment
IRS-TCFP	Individual Recovery Support-Transition from Correctional Facilities Program
JLO	Justice Liaison Officer
NDIS	National Disability Insurance Scheme
NPM	National Preventative Mechanism
OPCAT	Optional Protocol to the Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment
PoC	Prisoner of Concern
PRSA	Post Release Supported Accommodation
QCS	Queensland Corrective Services
QPS	Queensland Police Service
RNR	Risk, Needs and Responsivity



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Summary and critical questions

The Public Advocate is undertaking a project on the interactions of adults with cognitive disability and the criminal justice system in Queensland. The aim of this project is to identify opportunities for reform to ensure that the rights of adults with cognitive disability are upheld during these interactions.

This discussion paper is the fourth in a series of papers that will be used to guide stakeholder consultation.

The focus of the current paper is detention in Queensland. It aims to provide an overview of the issues that adults with cognitive disability may experience during their time in a correctional centre (prison) and as they transition back into the community.

These issues include:

- identification and recognition of cognitive disability and support needs;
- access to reasonable adjustments and disability-related supports;
- access to health and mental health services;
- experiences of harassment, violence and abuse;
- separate confinement;
- access to rehabilitation, education and training programs;
- parole;
- the intersection between corrective services and the NDIS; and
- the transition from a correctional centre to the community.

The paper also includes a summary of key policies and legislation relevant to detention in Queensland, including:

- the *Corrective Services Act 2006* (Qld);
- the QCS Custodial Operations Practice Directives;
- the *Inspector of Detention Services Act 2022* (Qld); and
- the Inspection Standards for Queensland prisons.

Relevant recommendations from previous reports, studies and inquiries are also discussed.

The following **key questions** are posed for further discussion:

1. Are current cognitive disability screening processes adequate for adults entering detention?
2. Do adults with cognitive disability in detention have appropriate access to disability, mental health and general health services and support?
3. How might current rehabilitation, education and training offerings be improved for adults with cognitive disability who are in detention?
4. Is the treatment of adults with cognitive disability who are in detention adequately monitored?
5. Are specific initiatives required to address the treatment and rehabilitation prospects of First Nations adults with cognitive disability who are in detention?
6. Are current community-based correction order requirements (e.g., Probation, Community Service, Court/Board Ordered Parole) and services suitably adapted for adults with cognitive disability?



Introduction

The Public Advocate

The position of the Public Advocate is established under chapter 9 of the *Guardianship and Administration Act 2000* (Qld) to promote and protect the rights and interests of Queensland adults with impaired decision-making ability through systemic advocacy.

Section 209 of the *Guardianship and Administration Act* states that the functions of the Public Advocate are:

- a) promoting and protecting the rights of adults with impaired capacity (the adults) for a matter;
- b) promoting the protection of the adults from neglect, exploitation, or abuse;
- c) encouraging the development of programs to help the adults to reach the greatest practicable degree of autonomy;
- d) promoting the provision of services and facilities for the adults;
- e) monitoring and reviewing the delivery of services and facilities to the adults.¹

Cognitive disability

The term used to describe the people who are the focus of this paper is 'adults with cognitive disability'. Cognitive disability, as the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability (Disability Royal Commission) has noted, 'arises from the interaction between a person with cognitive impairment and attitudinal and environmental barriers that hinder their full and effective participation in society on an equal basis with others.'² People may experience cognitive impairment if they have an intellectual disability, acquired brain injury, neurological disorders (such as dementia), or if they have a mental health condition.³

People with cognitive disability may experience difficulty with communication, attention, concentration, memory, thinking, and learning.⁴ Sometimes a person with cognitive disability will have impaired decision-making ability. This may be episodic or temporary for some, requiring intensive supports at specific times, while others may require lifelong support with decision-making and communicating their choices and decisions.

Other terms used in reports, legislation, policies, research and official documents referenced in this paper include; 'people with impaired decision-making ability', 'people with impaired capacity', people with an 'impairment of the mind', 'people with cognitive impairment' or, more broadly, 'people with disability' or 'people with a mental health condition'.

Similarly, a range of terms are used in this paper to refer to custodial facilities ('prisons', 'custodial centres', 'detention') and people who are in custody in these settings (e.g., 'prisoners', 'offenders', 'people in prison'). These terms are often used interchangeably in this paper to reflect the language used by key stakeholders, and in relevant legislation and policies.

The title of this paper is 'detention'. This broad term was chosen because this paper includes issues relevant to adults with disability who are being detained in watchhouses, in correctional centres (either while on remand or following a custodial sentence), and in authorised mental health services as classified patients. It also reflects the language used in the *Human Rights Act 2019* (Qld)

¹ *Guardianship and Administration Act 2000* (Qld) s 209.

² Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Executive summary: Our vision for an inclusive Australia and recommendations', *Final report*, 2023, p. 316.

³ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Executive summary: Our vision for an inclusive Australia and recommendations', *Final report*, 2023, p. 316; DV Jeste, GML Eglit, BW Palmer, JG Martinis, P Blanck, ER Saks, 'Supported decision making in serious mental illness', *Psychiatry*, vol. 81, no. 1, 2018, pp. 28-40.

⁴ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Executive summary: Our vision for an inclusive Australia and recommendations', *Final report*, 2023, p. 316.



and the Optional Protocol to the Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT), which are discussed in this paper.

It is acknowledged that 'detention' is often used in reference to the youth justice system, which is outside of the scope of this paper, and that views on the use of this terminology in this paper may differ.

The criminal justice system

The criminal justice system in Australia is complex, with considerable variability evident at Commonwealth, state and territory levels when it comes to the existence of particular criminal offences and ways that police services and courts deal with alleged breaches of them. Each jurisdiction also differs in terms of enforcement, prosecution and judgement of criminal charges. Given this variability, it is important to note that this paper explores the criminal justice system in Queensland and the issues that arise in this state.

The criminal justice system in Queensland involves a vast array of people and roles, including the police service, prosecutors, defence lawyers, support groups, the courts, the corrections system, forensic care systems and the parole system.

Adults with cognitive disability may interact with the criminal justice system for a number of reasons, including as witnesses, as victims of crime, or as those accused of committing a criminal offence. There have been many concerns raised in the past regarding how the criminal justice system interacts with people with disability, including recently in the work of the Disability Royal Commission.⁵

In short, adults with cognitive disability, and indeed people with disability generally, are overrepresented in the criminal justice system, leading to concerns about the lack of access to justice for people with disability, and about the mainstream criminal justice system's failure to make sufficient accommodations for the needs of people with disability.⁶

These matters are highly relevant to the Public Advocate's systemic advocacy functions in relation to adults with impaired decision-making ability.

Adults with cognitive disability in the Queensland criminal justice system

This project aims to explore the various issues faced by adults with cognitive disability in Queensland when they interact with the criminal justice system and identify opportunities for reform to ensure that their rights are upheld during these interactions.

As part of this project, the Public Advocate is seeking feedback from key stakeholders and asking questions focusing on issues relevant to adults with cognitive disability.

A series of discussion papers have been developed and are being used as the basis for consultation with stakeholders. The papers and consultations explore key elements of a person's potential involvement with the criminal justice system, and include these topics:

- policing;
- courts;
- the forensic disability system (mental health and disability);
- detention; and
- victims and witnesses.

⁵ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, *Overview of responses to the Criminal justice system issues paper*, 2020.

⁶ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, *Overview of responses to the Criminal justice system issues paper*, 2020.



The findings from the consultations will be used to inform the development of a reform recommendations report for consideration by the Queensland government.

Scope of this paper

This paper is the fourth in the series of discussion papers and focuses on detention in Queensland.

The first part of the paper provides an overview of some of the challenges faced by adults with cognitive disability in detention that have been identified in previous reports and inquiries, as well as some of the approaches and initiatives that have been implemented to address some of these issues. It also provides a summary of some of the areas and recommendations for reform that have been identified previously that could help to improve outcomes for adults with cognitive disability.

A more detailed analysis of key policies and legislation is also provided in Appendix 1.

The paper includes six questions to guide targeted consultations to be undertaken with stakeholders.



Overview

The journey through the Queensland detention system

After being found guilty of an offence, either through pleading guilty or being found guilty after a trial, a person will be sentenced in accordance with the *Penalties and Sentences Act 1992* (Qld).

In deciding a sentence, a judge considers a range of factors, including a person's 'intellectual capacity',⁷ and may impose a sentence for one or more of the following purposes:

- Punishment: 'to punish the offender to an extent or in a way that is just in all the circumstances'.⁸
- Rehabilitation: 'to provide conditions in the court's order that the court considers will help the offender to be rehabilitated'.⁹
- Deterrence: 'to deter the offender or other persons from committing the same or a similar offence'.¹⁰
- Denunciation: 'to make it clear that the community, acting through the court, denounces the sort of conduct in which the offender was involved'.¹¹
- Community protection: 'to protect the Queensland community from the offender'.¹²

A person may receive a non-custodial sentence (for example a fine, probation order or a community service order), or they may be sentenced to imprisonment, during which time they may serve part, or all, of the sentence in custody.

Further information about sentencing, the guiding principles, and the *Penalties and Sentences Act* can be found in the second discussion paper in this series, which focused on courts.

This paper will primarily focus on the challenges experienced by people with cognitive disability who receive a custodial sentence, including during their time in a correctional centre and their transition back into the community.

A person who receives a custodial sentence and is required to spend time in a correctional centre will be taken into custody by Queensland Corrective Services (QCS). Further information about QCS is discussed on page 31.

Admission to a correctional centre

Upon admission to a correctional centre, a prisoner completes an induction program where they are given information about the corrective services system, the correctional centre at which they are located, and the rules with which they must comply.¹³ There is an Easy Read Prisoner Handbook available for adults who have been identified as 'being vulnerable due to special needs',¹⁴ including cognitive impairment.

Prisoners also undergo an Immediate Risk Needs Assessment (IRNA), which is used to identify any immediate risk factors and any issues that might need immediate intervention, as well as informing decisions about a prisoner's placement within the custodial facility.¹⁵ The assessment also enables the identification of prisoners with needs and risk factors that are not immediate but require referral.

⁷ *Penalties and Sentencing Act 1992* (Qld) s 9.

⁸ *Penalties and Sentencing Act 1992* (Qld) s 9(1)(a).

⁹ *Penalties and Sentencing Act 1992* (Qld) s 9(1)(b).

¹⁰ *Penalties and Sentencing Act 1992* (Qld) s 9(1)(c).

¹¹ *Penalties and Sentencing Act 1992* (Qld) s 9(1)(d).

¹² *Penalties and Sentencing Act 1992* (Qld) s 9(1)(e).

¹³ Caxton Community Legal Centre, *Going to prison*, The Queensland Law Handbook, (2 September 2019), <<https://queenslandlawhandbook.org.au/the-queensland-law-handbook/offenders-and-victims/prisons-and-prisoners/going-to-prison>>.

¹⁴ Queensland Corrective Services, *Custodial Operations Practice Directive, Reception processes, Admission and assessments*, ver. 11 (26/05/2025), p. 19.

¹⁵ Queensland Corrective Services, *Custodial Operations Practice Directive, Offender pathways*, ver. 08 (22/04/2024).



The first component of the Hayes Ability Screening Index (HASI), which is a tool used to screen for intellectual disability, is also incorporated into the IRNA.¹⁶ (Further information about the identification and assessment of disability is discussed on page 56.)

The Risk of Reoffending Screening Tool is administered to understand a person's general risk of reoffending.¹⁷ It is also used to determine eligibility for QCS intervention programs.

Prisoners who are serving six or more months of their sentence in custody must be provided with an opportunity to complete literacy and numeracy assessments within three weeks of their admission.¹⁸ If a prisoner is serving less than six months in custody, they may undertake this assessment 'if it is considered beneficial (for example, to support their enrolment in a course) and subject to resource availability'.¹⁹

A Rehabilitation Needs Assessment must also be conducted within three weeks of admission for people serving a sentence of more than 12 months.²⁰

For prisoners serving more than 12 months of imprisonment, a Progression Plan must be developed within three weeks of completion of the relevant assessments.²¹ This plan is entered into the Integrated Offender Management System (IOMS), which is QCS's 'primary application for managing prisoner and offender information'.²²

More information about the screening tools and assessment processes used in the corrections system is provided on page 556.

During their prison sentence, prisoners may be able to participate in education, rehabilitation and training to enable them to gain new skills, change behaviours related to their offending, and to prevent recidivism.²³

Parole

Depending on their sentence and a range of other factors affecting eligibility (see page 48 for further information on parole), a prisoner may, at some stage, be eligible for parole. A parole order enables a person to return to the community, under the supervision of QCS, until their sentence has been completed.

People released on parole must meet certain conditions. If a person fails to meet these conditions, the conditions of the parole order may be changed, or the parole order may be suspended or cancelled, and the person may be required to return to prison.²⁴

Parole orders and issues relating to breaches of parole orders are discussed further on page 266.

Discharge from prison

If a person is not granted parole, they are discharged and able to return to the community once their sentence has been served.

The discharge process includes:

- a) recording discharge details (including address to discharge);

¹⁶ Queensland Corrective Services, *Custodial Operations Practice Directive, Offender pathways*, ver. 08 (22/04/2024).

¹⁷ Queensland Corrective Services, *Custodial Operations Practice Directive, Offender pathways*, ver. 08 (22/04/2024).

¹⁸ Queensland Corrective Services, *Custodial Operations Practice Directive, Offender pathways*, ver. 08 (22/04/2024).

¹⁹ Queensland Corrective Services, *Custodial Operations Practice Directive, Offender pathways*, ver. 08 (22/04/2024), p. 5.

²⁰ Queensland Corrective Services, *Custodial Operations Practice Directive, Offender pathways*, ver. 08 (22/04/2024).

²¹ Queensland Corrective Services, *Custodial Operations Practice Directive, Offender pathways*, ver. 08 (22/04/2024).

²² Queensland Corrective Services, *Annual report 2024-2025*, p. 15.

²³ Queensland Government, *Intervention while in custody*, (8 June 2018), <<https://www.qld.gov.au/law/sentencing-prisons-and-probation/rehabilitation-and-community-service/intervention-while-in-custody>>.

²⁴ Queensland Government, *Applying for parole*, (8 June 2018), <<https://www.qld.gov.au/law/sentencing-prisons-and-probation/sentencing-probation-and-parole/applying-for-parole>>.



- b) verifying sentence details; and
- c) management and return of property, trust accounts and valuables.²⁵

Prisoners with cognitive disability will have their discharge date and conditions explained to them by Sentence Management Services and will undergo a medical examination prior to discharge.²⁶

Discharge processes for Aboriginal and Torres Strait Islander prisoners must include involvement from Cultural Liaison Officers.²⁷

For those prisoners who have a Guardianship and/or Administration Order flag indicator in the IOMS, staff must contact their guardian to involve them in the person's release from custody or the parole application process.²⁸

Some prisoners may be eligible for services that can support their transition from custody back to the community. These programs are discussed in further detail on page 34.

²⁵ Queensland Corrective Services, *Custodial Operations Practice Directive, Reception processes, Custodial discharge*, ver. 14 (24/08/2025), p. 3.

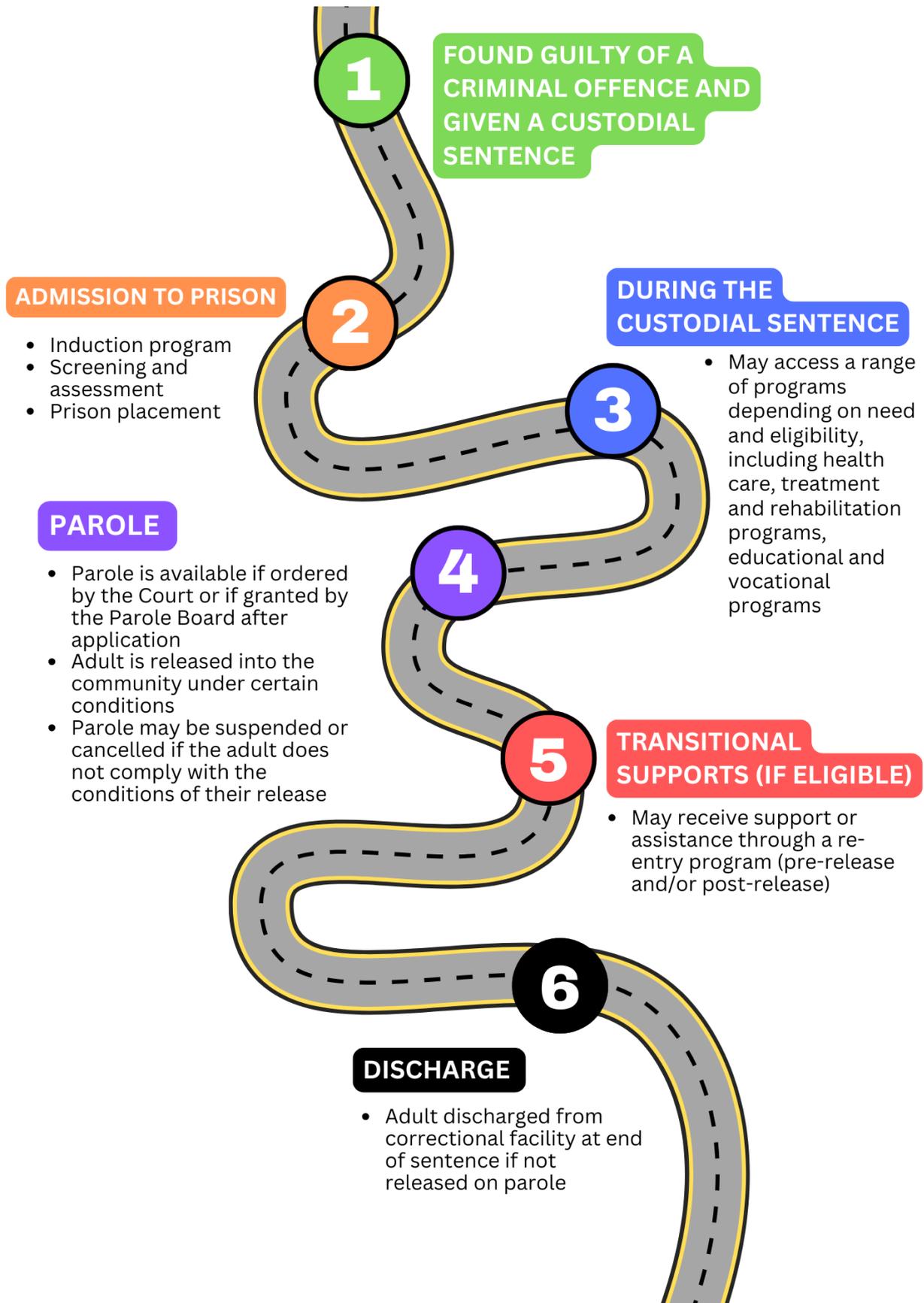
²⁶ Queensland Corrective Services, *Custodial Operations Practice Directive, Reception processes, Custodial discharge*, ver. 14 (24/07/2025).

²⁷ Queensland Corrective Services, *Custodial Operations Practice Directive, Sentence management, Release/discharge*, ver. 09 (21/08/2025).

²⁸ Queensland Corrective Services, *Custodial Operations Practice Directive, Reception processes, Custodial discharge*, ver. 14 (24/07/2025).



Summary of a person's potential journey through the corrective services system



Issues

The purpose of corrective services, according to the *Corrective Services Act 2006* (Qld) (the Act), is 'community safety and crime prevention through the humane containment, supervision and rehabilitation of offenders'.²⁹

The Act also recognises:

- (a) the need to respect an offender's dignity; and
- (b) the special needs of some offenders by taking into account—
 - (i) an offender's age, sex or cultural background; and
 - (ii) any disability an offender has.³⁰

Further information about the Act is provided on page 46.

The importance of rehabilitation for people who have committed an offence is also reflected in the core portfolio values outlined in the Ministerial Charter Letter to the Honourable Laura Gerber MP, Minister for Youth Justice and Victim Support and Minister for Corrective Services, which includes:

Create an environment where correctional facilities are a place where reform can occur for the perpetrators of crime.³¹

Even while detained in prison, people maintain a number of basic rights and entitlements.³²

For example, the *Human Rights Act 2019* (Qld) includes the rights to 'Protection from torture and cruel, inhuman or degrading treatment'³³ and to 'Humane treatment when deprived of liberty'.³⁴

There are also a number of international human rights treaties and instruments under which Australia has obligations relevant to the rights of people with cognitive disability in prisons, including:

- The International Covenant on Civil and Political Rights;³⁵
- The Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment;³⁶
- The Optional Protocol to the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment;³⁷
- The United Nations Standard Minimum Rules for the Treatment of Prisoners (the Nelson Mandela Rules);³⁸ and
- The United Nations Convention on the Rights of Persons with Disabilities.³⁹

Despite these obligations, and the rights held by them, people with cognitive disability can still face disproportionate challenges during their interactions with the corrections system.⁴⁰ People with cognitive disability can also face challenges in accessing opportunities for rehabilitation.

²⁹ *Corrective Services Act 2006* (Qld) s 3(1).

³⁰ *Corrective Services Act 2006* (Qld) s 3(3).

³¹ Ministerial Charter letter from The Honourable David Crisafulli MP, Premier and Minister for Veterans to The Honourable Laura Gerber MP, Minister for Youth Justice and Victim Support and Minister for Corrective Services, 8 November 2024

³² Queensland Government, Prisoners Rights, (28 February 2025), <<https://www.qld.gov.au/law/sentencing-prisons-and-probation/prisons-and-detention-centres/prisoners-rights>>.

³³ *Human Rights Act 2019* (Qld) s 17.

³⁴ *Human Rights Act 2019* (Qld) s 30.

³⁵ *United Nations, International Covenant on Civil and Political Rights*, [1980] ATS 23 (entered into force 23 March 1976).

³⁶ *United Nations, Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment*, [1989] ATS 21 (entered into force 26 June 1987).

³⁷ *United Nations, Optional Protocol to the Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment*, [2018] ATS 5 (entered into force 22 June 2006).

³⁸ *United Nations Standard Minimum Rules for the Treatment of Prisoners (the Nelson Mandela Rules)*, GA Res 70/175, UN Doc A/RES/70/175 (8 January 2016).

³⁹ *United Nations, Convention on the Rights of Persons with Disabilities*, [2008] ATS 12 (entered into force 3 May 2008).

⁴⁰ Human Rights Watch, 'I needed help, instead I was punished': Abuse and neglect of prisoners with disabilities in Australia, 2018.



A number of previous reports and inquiries have identified issues experienced by people with disability, including cognitive disability, during their time in detention and their transition back into the community.

The following paragraphs summarise some of the key issues raised in these reports, as well as feedback provided to the Public Advocate, who, as part of his legislative remit, regularly engages with stakeholders to inform his systemic advocacy.

It is noted that the papers and reports included in this discussion paper span a range of years since publication. Additionally, some references may be focused on Queensland, while others (for example those relating to the work of the Disability Royal Commission) have explored issues at a national level and across different states and territories. However, the purpose of this paper is to highlight issues that have previously been raised to facilitate discussion on current challenges and opportunities for improvement in the Queensland criminal justice system.

Overrepresentation of people with cognitive disability and a lack of data

The number of people in prison, and the costs associated with imprisonment, have been increasing.⁴¹

During 2023-2024 there was a daily average of 10,580 prisoners in Queensland.⁴² According to QCS, during the ten-year period from June 2015 to June 2025, the number of prisoners has increased by 54%.⁴³

Further information about QCS is provided on page 31.

The proportion of older adults in prison is also growing.⁴⁴ According to the Australian Institute of Health and Welfare, this is reflective of the ageing population and longer lifespans seen in the general community and may also be due to increased prosecutions of historical offences and changes to sentencing options, including mandatory sentencing and non-parole periods.⁴⁵

It is widely accepted that, as with all other areas of the criminal justice system, people with cognitive disability are overrepresented among the prison population.⁴⁶

However, there is limited data available on the number of people with cognitive disability in Queensland prisons.

QCS has reported that, as at June 2022, 7.1% of the total prison population had a cognitive impairment recorded in its system with a Cognitive Impairment Flag.⁴⁷ It should be noted that this does not necessarily indicate a diagnosed cognitive impairment, but rather is based on the results of the Hayes Ability Index screening tool (discussed further below).

⁴¹ Productivity Commission, Australian Government, *Report on Government Services 2025*, Part C, Section 8, Corrective services data tables, table 8A.2, 8A.5 and 8A.20; Queensland Productivity Commission, *Inquiry into imprisonment and recidivism*, Final report, 2019.

⁴² Productivity Commission, Australian Government, *Report on Government Services 2025*, Part C, Section 8, Corrective services data tables, table 8A.5.

⁴³ Queensland Corrective Services, Annual report 2024-2025.

⁴⁴ Australian Institute of Health and Welfare (AIHW), *Health and ageing of Australia's prisoners 2018*, Cat. no. PHE 269, Canberra, AIHW, 2020.

⁴⁵ Australian Institute of Health and Welfare (AIHW), *Health and ageing of Australia's prisoners 2018*, Cat. no. PHE 269, Canberra, AIHW, 2020.

⁴⁶ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023.

⁴⁷ Queensland Corrective Services, *Disability Service Plan 2022-2025*.



Within QCS's IOMS, warning flag indicators are used to highlight 'any current and/or historical factors that must be taken into consideration in the management of a prisoner throughout their sentence'.⁴⁸

In addition to the Cognitive Impairment flag mentioned above, there are a number of flags that are potentially relevant to cognitive disability, including:

- the Guardianship and/or Administration Order warning flag;
- the National Disability Insurance Scheme warning flag; and
- the Prisoner of Concern warning flag, which is used for prisoners who are 'identified as having prominent and/or profound factors that significantly impair their functioning, and therefore require greater oversight and monitoring than that of the general prisoner population'.⁴⁹ (Further information about the management of prisoners of concern is provided on page 53).

In its final report, the Disability Royal Commission reviewed the data collection practices utilised in criminal justice systems across Australia, including in Queensland, and noted that:

Data about these flags is 'collated if and when necessary and are accessible on demand'. However, it is not possible to extract this data in disaggregated form, such as by disability type, because it is maintained through manual and local records. Other information pertaining specifically to Prisoners of Concern is maintained locally and is not available in a consistent and centralised format that can be readily extracted.

[QCS] acknowledged 'its reporting on disability amongst prisoners is currently limited' and expressed a commitment to improving processes for both identifying prisoners with disability and reporting data on disability more comprehensively.⁵⁰

Overrepresentation of Aboriginal and Torres Strait Islander peoples in prisons

Aboriginal and Torres Strait Islander peoples, including those with cognitive disability, are also overrepresented in adult prisons compared to non-Indigenous people.⁵¹ The Disability Royal Commission heard many concerns about their interactions with the criminal justice system, including in adult prisons:

We heard about racist and ableist attitudes towards First Nations people with disability in these settings, as well as physical violence against them, and use of physical and chemical restraints.⁵²

Although not specific to people with disability, the National Agreement on Closing the Gap, an agreement between the Coalition of Peaks and all Australian Governments (including the Australian Government, state and territory governments, and the Australian Local Government Association) includes the following target:

Target 10: By 2031, reduce the rate of Aboriginal and Torres Strait Islander adults held in incarceration by at least 15 per cent.⁵³

⁴⁸ Queensland Corrective Services, *Custodial Operations Practice Directive, Reception processes, Admission and assessments*, ver. 11 (26/05/2025), p. 8.

⁴⁹ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoners of concern*, ver. 08 (06/06/2024), p. 3.

⁵⁰ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023, pp. 241-242.

⁵¹ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'First Nations people with disability', *Final report*, volume 9, 2023.

⁵² Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'First Nations people with disability', *Final report*, volume 9, 2023, p. 142.

⁵³ Coalition of Aboriginal and Torres Strait Islander Peak Organisations and Australian Governments, National Agreement on Closing the Gap, July 2020, <https://www.closingthegap.gov.au/sites/default/files/2022-09/ctg-national-agreement_apr-21-comm-infra-targets-updated-24-august-2022_0.pdf>.



Progress towards this target in Queensland has been assessed as 'worsening' as there has been an increase in the rate of imprisonment of Aboriginal and Torres Strait Islander adults.⁵⁴

The Queensland Government has recently released the Queensland Justice Reinvestment Framework and announced a new \$5 million grants program to 'support initiatives in First Nations communities, including prevention strategies that reduce the likelihood of justice system involvement'.⁵⁵ The approach to justice reinvestment aims to support progress towards target 10 of the National Agreement on Closing the Gap, as well as recommendations from the Women's Safety and Justice Taskforce (Qld).⁵⁶

Identification and recognition of cognitive disability and support needs

Like other stages of the criminal justice system, identification of disability and support needs for people entering prison, or in prison, is critical to enabling access to necessary adjustments and supports.

The importance of identifying a person's needs, including those relating to disability, is also highlighted in the Guiding Principles for Corrections in Australia, which includes the principle that:

Upon reception or transfer, prisoners undergo an initial assessment to identify any immediate needs and facilitate access to appropriate services, including health, interpreters, disability services and/or cultural supports.⁵⁷

However, concerns have been raised that cognitive disability is not consistently identified in custodial settings.⁵⁸

In Queensland, people undergo several assessments upon admission to prison, including an IRNA and screening for intellectual disability using the first component of the HASI.⁵⁹ Prisoners who score less than 85 on the HASI have a Cognitive Impairment flag recorded.

A study by researchers from the University of Queensland noted that several professionals who took part in the study reported that while the HASI provides a mechanism to screen for intellectual disability, it does not screen for other types of cognitive disability such as an acquired brain injury.⁶⁰ They also noted that even where a person was identified as potentially having an intellectual disability through the use of the HASI, there was 'limited capacity to do confirmatory testing'.⁶¹

Stakeholders have also discussed with the Public Advocate the importance of screening that does not simply identify cognitive disability, or likely cognitive disability, but that also provides information about support needs in a format that enables necessary supports to be identified and implemented.

⁵⁴ Productivity Commission, Australian Government, *Closing the Gap Annual data compilation report*, July 2025; Productivity Commission, Australian Government, Closing the Gap, Information Repository, Dashboard, Target 10 Justice Data tables, table CtG10A.1.

⁵⁵ D Frecklington (Attorney-General and Minister for Justice and Minister for Integrity), *New justice grants to make Queensland safer and support local communities*, media release, The State of Queensland, 11 November 2025.

⁵⁶ The State of Queensland (Department of Justice), *Queensland Justice Reinvestment Framework*, 2025.

⁵⁷ Corrective Services Administrators' Council, *Guiding Principles for Corrections in Australia*, revised 2025, p. 7.

⁵⁸ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023.

⁵⁹ Queensland Corrective Services, *Custodial Operations Practice Directive, Reception processes, Admission and assessments*, ver. 11 (26/05/2025).

⁶⁰ K Ellem, L Dowse, S Rowe, L Holland, J Cullin, M Parker, and C Henderson, *Final report: Insights from people with lived experience of disability and the justice system*, report to the Department of Justice and Attorney General, Queensland, 2023.

⁶¹ K Ellem, L Dowse, S Rowe, L Holland, J Cullin, M Parker, and C Henderson, *Final report: Insights from people with lived experience of disability and the justice system*, report to the Department of Justice and Attorney General, Queensland, 2023, p. 67.



Research has also highlighted the importance of using culturally validated tools to facilitate the identification of disability amongst Aboriginal and Torres Strait Islander peoples.⁶²

This is also reflected in principle 3.1.15 of the Guiding Principles for Corrections in Australia, which states that:

Culturally appropriate, community equivalent screening processes are in place to support timely identification of prisoners/offenders with disabilities (particularly on or shortly after admission/registration), and facilitated access to support, health and mental health services.⁶³

Reliance upon self-reports for disability and support needs, as noted in previous discussion papers, can be problematic as people with cognitive disability may be reluctant or unable to disclose their disability.⁶⁴

Access to reasonable adjustments and disability-related support

It has been reported that many prisons are not accessible for people with disability. For example, a report by Human Rights Watch that examined the situation in Queensland, Western Australia, New South Wales and Victoria found that prisoners with disability can face challenges in accessing basic facilities such as toilets, showers, bathrooms and kitchens due to limitations of the physical environment.⁶⁵

Stakeholders have described concerns to the Public Advocate regarding the barriers that people with cognitive disability may face in participating in education, employment and rehabilitation programs that would support their return to the community and assist in reducing the risk of recidivism (this issue is discussed further below).

The Public Advocate has also been advised that, as prisons are still quite reliant on paper-based processes, it can be difficult to ensure that people with cognitive disability receive information in a format that is accessible and easily understood.

It has also been reported that people with cognitive disability experience difficulty obtaining the supports or adjustments necessary to enable them to overcome these barriers.⁶⁶

The Disability Royal Commission heard evidence from an individual with disability who described that, due to limited access to appropriate supports and adjustments, they had to go without showering or changing their clothes for several days at a time.⁶⁷ They also reported being injured while being transferred to and from wheelchairs.

In Queensland, prisoner carers can be employed, enabling prisoners who require assistance, such as those with disability, to be assisted by another prisoner with:

- a) cleaning the ill/infirm prisoner's cell;
- b) getting that prisoner's meal and other basic needs (e.g. reading material, etc.); and
- c) transporting the prisoner (e.g. by wheelchair, etc.) to the Health Centre or other location

⁶² Synapse and The Hopkins Centre, Griffith University, *Assessing the disability needs of Indigenous Prisoners (ADNIP)*, ADNIP final summary report, 2021.

⁶³ Corrective Services Administrators' Council, *Guiding Principles for Corrections in Australia*, revised 2025, p. 18.

⁶⁴ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023; K Ellem, L Dowse, S Rowe, L Holland, J Cullin, M Parker, and C Henderson, *Final report: Insights from people with lived experience of disability and the justice system*, report to the Department of Justice and Attorney General, Queensland, 2023.

⁶⁵ Human Rights Watch, *'I needed help, instead I was punished': Abuse and neglect of prisoners with disabilities in Australia*, 2018.

⁶⁶ K Ellem, L Dowse, S Rowe, L Holland, J Cullin, M Parker, and C Henderson, *Final report: Insights from people with lived experience of disability and the justice system*, report to the Department of Justice and Attorney General, Queensland, 2023.

⁶⁷ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Transcript of Proceedings: Public hearing 27: Conditions in detention in the criminal justice system', Day 2, 20 September 2022, p. 117- 119.



within the centre as needed.⁶⁸

Prison carers are not permitted to assist with personal care such as showering or toileting.⁶⁹

Significant concerns have been raised about the use of prisoner carers. For example, Human Rights Watch found that, while prison staff report efforts to carefully select appropriate prisoner carers, there are instances in which prisoner carers have been convicted of sex-offences, have been accused of sexual violence during their time in prison, or have previously harassed or manipulated prisoners.⁷⁰

Other concerns raised about prisoner carer programs include the risk that carers may disclose personal information about the person they are supporting to others, the lack of training carers receive, and a lack of safeguards for those receiving support.⁷¹

There have also been reports of situations where prisoners with disability have been put at risk by these arrangements and/or abused by their carer.⁷²

People with disability may also receive informal assistance from other prisoners, however they may feel obligated to 'pay' for this assistance, for instance with food or belongings.⁷³

Concerns have also been raised that staff in prisons may lack the knowledge and skills to understand disability and how to interact with people with disability. The Human Rights Watch report noted that, as a result, staff may respond to disability-related issues or behaviours in a punitive manner or fail to provide appropriate supports or adjustments.⁷⁴

Previous reports have suggested that training of custodial staff relating to mental health and disability is inadequate.⁷⁵

QCS has advised that relevant training has been built into the Custodial Officers Entry Program, which is mandatory for people who are looking to become custodial correctional officers.

Some staff may also have negative attitudes towards people with cognitive disability, resulting in poor interactions and responses.⁷⁶

Access to disability-related supports, including through the NDIS, can also be challenging for adults with cognitive disability in prison. Issues relating to the interface between the NDIS and the criminal justice system are discussed further below.

⁶⁸ Queensland Corrective Services, *Custodial Operations Practice Directive, Health, Health needs*, ver. 20 (26/06/2025), p. 15.

⁶⁹ Queensland Corrective Services, *Custodial Operations Practice Directive, Health, Health needs*, ver. 20 (26/06/2025).

⁷⁰ Human Rights Watch, *'I needed help, instead I was punished': Abuse and neglect of prisoners with disabilities in Australia*, 2018.

⁷¹ K Ellem, L Dowse, S Rowe, L Holland, J Cullin, M Parker, and C Henderson, *Final report: Insights from people with lived experience of disability and the justice system*, report to the Department of Justice and Attorney General, Queensland, 2023, p. 68.

⁷² Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Transcript of Proceedings: Public hearing 27: Conditions in detention in the criminal justice system', Day 2, 20 September 2022; Human Rights Watch, *'I needed help, instead I was punished': Abuse and neglect of prisoners with disabilities in Australia*, 2018.

⁷³ Human Rights Watch, *'I needed help, instead I was punished': Abuse and neglect of prisoners with disabilities in Australia*, 2018.

⁷⁴ Human Rights Watch, *'I needed help, instead I was punished': Abuse and neglect of prisoners with disabilities in Australia*, 2018.

⁷⁵ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023; Human Rights Watch, *'I needed help, instead I was punished': Abuse and neglect of prisoners with disabilities in Australia*, 2018.

⁷⁶ Human Rights Watch, *'I needed help, instead I was punished': Abuse and neglect of prisoners with disabilities in Australia*, 2018.



Experiences of harassment, violence, and abuse

Numerous reports have detailed instances of abuse experienced by people with cognitive disability in prisons and identified that people with cognitive disability are at particular risk of exploitation, violence, and abuse.⁷⁷

In its final report, titled '*I Needed Help, Instead I Was Punished*': Abuse and Neglect of Prisoners with Disabilities in Australia, Human Rights Watch highlighted the abuse and violence experienced by people with disability in prisons.⁷⁸

It found that:

prisoners with disabilities are viewed as easy targets and as a result are at serious risk of violence and abuse, including bullying and harassment, and verbal, physical, and sexual violence.⁷⁹

This violence and abuse has reportedly been perpetrated by staff and other prisoners.⁸⁰

There are also reports of people with disability being harassed for their mental health medication or having necessary equipment, such as wheelchairs, taken away by other prisoners.⁸¹

Past reports have also indicated that 'inhuman and degrading treatment'⁸² has been used to respond to, and manage, disability, including the use of restrictive practices such as seclusion and isolation,⁸³ which is discussed further on page 21.

There are several factors that can increase the risk of abuse in these settings. For example, overcrowding in prisons can increase the risk that people with disability will be abused, as people may be forced to share cells that were originally designed for a single occupant.⁸⁴ Staff shortages can also increase this risk, as it can result in prisoners spending fewer hours outside of their cell.

Aboriginal and Torres Strait Islander people with disability in prison may be at particular risk of harassment, biased treatment and violence due to prejudice, discrimination and racism.⁸⁵

When abuse occurs, people with disability may be reluctant to make a report due to fear that they will not be believed, or the fear of reprisal.⁸⁶

A report published by Queensland Advocacy Incorporated (now known as Queensland Advocacy for Inclusion) in 2015 noted that people with cognitive disability may also be unaware that they are able to make a complaint or that the issue they have experienced is one that they are able to make a complaint about.⁸⁷

⁷⁷ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023; Queensland Advocacy Incorporated (QAI), *Disabled Justice: The barriers to justice for persons with disability in Queensland*, report prepared by P French, QAI, 2007; Human Rights Watch, '*I needed help, instead I was punished*': Abuse and neglect of prisoners with disabilities in Australia, 2018.

⁷⁸ Human Rights Watch, '*I needed help, instead I was punished*': Abuse and neglect of prisoners with disabilities in Australia, 2018.

⁷⁹ Human Rights Watch, '*I needed help, instead I was punished*': Abuse and neglect of prisoners with disabilities in Australia, 2018, p. 3.

⁸⁰ Human Rights Watch, '*I needed help, instead I was punished*': Abuse and neglect of prisoners with disabilities in Australia, 2018.

⁸¹ Human Rights Watch, '*I needed help, instead I was punished*': Abuse and neglect of prisoners with disabilities in Australia, 2018.

⁸² Australian Human Rights Commission, *Equal before the law: Towards disability justice strategies*, 2014, p. 28.

⁸³ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023.

⁸⁴ Human Rights Watch, '*I needed help, instead I was punished*': Abuse and neglect of prisoners with disabilities in Australia, 2018.

⁸⁵ Human Rights Watch, '*I needed help, instead I was punished*': Abuse and neglect of prisoners with disabilities in Australia, 2018.

⁸⁶ Human Rights Watch, '*I needed help, instead I was punished*': Abuse and neglect of prisoners with disabilities in Australia, 2018.

⁸⁷ Queensland Advocacy Incorporated (QAI), *dis-abled Justice: Reforms to justice for persons with disability in Queensland*, QAI, 2015.



This report also suggested that people with cognitive disability may not know how to make a complaint or may find the process difficult, particularly without appropriate support. As a result, harms can go unaddressed, and the abuse may continue.

Deaths in custody

Deaths in custody, under the National Deaths in Custody Program, is a term defined to include deaths in police custody and custody-related operations and deaths in prison custody.⁸⁸

Statistics published by the Australian Institute of Criminology indicate that in 2024-25 there were 90 deaths in prison custody in Australia, which is the highest number of deaths in prison custody since 1979-80.⁸⁹ The jurisdictions with the highest number of deaths in prison custody for that period were New South Wales (26 deaths), Western Australia (17 deaths) and Queensland (16 deaths).⁹⁰

Of the deaths in prison custody across Australia, 29% were Aboriginal and Torres Strait Islander people, which included three deaths in Queensland.⁹¹

In 1987, the Royal Commission into Aboriginal Deaths in Custody was established due to concerns about the number of deaths of Aboriginal people in custody.⁹² It published its final report in 1991. This report included 339 recommendations to prevent, and address factors contributing to, the deaths of Aboriginal people in custody. While not specific to people with cognitive disability, this report and its recommendations remain relevant to Aboriginal and Torres Strait Islander people with cognitive disability in custody.

In 2018, a commissioned review of the implementation of the recommendations reported that the 'Commonwealth, State and Territory governments have taken many significant steps to respond to the [Royal Commission into Aboriginal Deaths in Custody] recommendations'.⁹³ However, a report published in 2021 by researchers from the Centre for Aboriginal Economic Policy Research at the Australian National University criticised the scope of the review and suggested that significant work still needs to be undertaken to meet the recommendations in the Royal Commission's report.⁹⁴

Some of the strategies and programs that have been implemented to address deaths in custody, including those related to mental health, are discussed further below.

⁸⁸ M McAlister, M Miles & S Bricknell, *Deaths in custody in Australia 2024-25*, statistical report no. 57, Australian Institute of Criminology, Canberra, 2025.

⁸⁹ M McAlister, M Miles & S Bricknell, *Deaths in custody in Australia 2024-25*, statistical report no. 57, Australian Institute of Criminology, Canberra, 2025.

⁹⁰ M McAlister, M Miles & S Bricknell, *Deaths in custody in Australia 2024-25*, statistical report no. 57, Australian Institute of Criminology, Canberra, 2025.

⁹¹ M McAlister, M Miles & S Bricknell, *Deaths in custody in Australia 2024-25*, statistical report no. 57, Australian Institute of Criminology, Canberra, 2025.

⁹² Royal Commission into Aboriginal Deaths in Custody, *Royal Commission into Aboriginal Deaths in Custody, National Report Volume 1*, 1991.

⁹³ Australian Department of Prime Minister and Cabinet, *Review of the implementation of the recommendations of the Royal Commission into Aboriginal Deaths in Custody*, report prepared by Deloitte Access Economics, 2018, p. xxxi.

⁹⁴ T Anthony, K Jordan, T Walsh, F Markham, and M Williams, 30 years on: Royal Commission into Aboriginal Deaths in Custody recommendations remain unimplemented, CAEPR Working paper no. 140/2021, Centre for Aboriginal Economic Policy Research, Australian National University, 2021.



Separate confinement

Solitary confinement refers to 'the confinement of [a] prisoner for 22 hours or more a day without meaningful human contact'.⁹⁵

While the term 'solitary confinement' is not used by QCS, previous reports have noted that the use of 'separate confinement' and 'isolation' (or other similar terms that may be used) in prisons can, in practice, still meet the above definition.⁹⁶

In Queensland, the *Corrective Services Act 2006* defines separate confinement as 'the separation of the prisoner from other prisoners.'⁹⁷ A prisoner can be separated from other prisoners under a safety order, a maximum security order, or due to a breach of discipline.⁹⁸

A safety order can be made if:

- (a) an authorised practitioner advises the chief executive that the authorised practitioner reasonably believes there is a risk of the prisoner self harming or harming someone else; or
- (b) the chief executive reasonably believes—
 - (i) there is a risk of the prisoner harming, or being harmed by, someone else; or
 - (ii) the safety order is necessary for the security or good order of the corrective services facility.⁹⁹

A maximum security order can be made:

- ... only if the chief executive reasonably believes that 1 or more of the following apply—
 - (a) there is a high risk of the prisoner escaping or attempting to escape;
 - (b) there is a high risk of the prisoner killing or seriously injuring other prisoners or other persons with whom the prisoner may come into contact;
 - (c) generally, the prisoner is a substantial threat to the security or good order of the corrective services facility.¹⁰⁰

Further to this, the *Corrective Services Regulation 2017* (Qld) states that:

If the chief executive knows, or reasonably believes, that a prisoner has a mental health condition or intellectual disability, the chief executive must notify a health practitioner before making a maximum security order in relation to the prisoner.¹⁰¹

Further information about safety orders and maximum security orders, including the length for which they can be made, the making of consecutive safety orders or maximum security orders, and the review of these orders, can be found in the *Corrective Services Act 2006*, chapter 2, part 2, divisions 5 and 6.

Additional information about breaches of discipline and the relevant practice directive can be found on page 52.

The *Corrective Services Regulation 2017* (Qld) includes standards that must be upheld for prisoners in separate confinement, such as access to water, toilet and shower facilities, appropriate clothing, and 'the opportunity to exercise, in the fresh air, for at least 2 daylight hours a day, unless a health

⁹⁵ United Nations Standard Minimum Rules for the Treatment of Prisoners (The Nelson Mandela Rules), A/RES/70/175, January 8, 2016, Rule 44.

⁹⁶ Human Rights Watch, *'I needed help, instead I was punished': Abuse and neglect of prisoners with disabilities in Australia*, 2018; T Walsh, H Blaber, C Smith, L Cornwell and K Blake, *Legal perspectives on solitary confinement in Queensland*, The University of Queensland and Prisoners' Legal Service, 2020; Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023.

⁹⁷ *Corrective Services Act 2006* (Qld) sch 4

⁹⁸ T Walsh, H Blaber, C Smith, L Cornwell and K Blake, *Legal perspectives on solitary confinement in Queensland*, The University of Queensland and Prisoners' Legal Service, 2020.

⁹⁹ *Corrective Services Act 2006* (Qld) s 53.

¹⁰⁰ *Corrective Services Act 2006* (Qld) s 60.

¹⁰¹ *Corrective Services Regulation 2017* (Qld) s 16.



practitioner advises that it would not be in the interests of the prisoner's health to exercise for a stated period or indefinitely'.¹⁰²

A report by researchers from the University of Queensland and the Prisoners' Legal Service noted that, in practice, these standards may not always be upheld.¹⁰³

The United Nations Standard Minimum Rules for the Treatment of Prisoners (the Nelson Mandela Rules) indicate that solitary confinement should be used 'only in exceptional cases as a last resort, for as short a time as possible and subject to independent review'¹⁰⁴ and that it should be 'prohibited in the case of prisoners with mental or physical disabilities when their conditions would be exacerbated by such measures'.¹⁰⁵

However, the Human Rights Watch report found that people with psychosocial or cognitive disability are 'disproportionately represented in all solitary confinement regimes (maximum security units, detention or punishment units, and crisis, observation, or safe units) across the 14 prisons visited',¹⁰⁶ which included prisons in Queensland and Western Australia.

There is potential for adults with cognitive disability to be separated from the general prison population due to behaviours relating to their disability.¹⁰⁷ For example, they may not understand the instructions of custodial staff or may respond in a way that is perceived as being resistant. This can be met with a punitive response such as isolation.

People with disability may also be separated from others for lengthy periods of time as a measure intended to protect them from potential harm by other prisoners, but this too can result in psychological harm.¹⁰⁸

Isolation, even for a short period of time, can have significant consequences for a person's mental health. Prisoners may develop problematic behaviours, engage in self-harm, or develop symptoms of psychosis.¹⁰⁹

Placement in isolation or seclusion can also result in limited access to vocational and rehabilitation programs that support eligibility for parole and assist in preventing recidivism following release from prison.¹¹⁰

Access to health services

In Queensland, health services such as primary care, mental health, oral health, in-patient, and specialist outpatient services are provided to prisoners in correctional centres by Queensland Health.

Prisoner Health Services do not include disability or aged care services.¹¹¹

¹⁰² *Corrective Services Regulation 2017* (Qld) s 4.

¹⁰³ T Walsh, H Blaber, C Smith, L Cornwell and K Blake, *Legal perspectives on solitary confinement in Queensland*, The University of Queensland and Prisoners' Legal Service, 2020.

¹⁰⁴ United Nations Standard Minimum Rules for the Treatment of Prisoners (The Nelson Mandela Rules), A/RES/70/175, January 8, 2016, Rule 45.1.

¹⁰⁵ United Nations Standard Minimum Rules for the Treatment of Prisoners (The Nelson Mandela Rules), A/RES/70/175, January 8, 2016, Rule 45.2.

¹⁰⁶ Human Rights Watch, *'I needed help, instead I was punished': Abuse and neglect of prisoners with disabilities in Australia*, 2018, p. 42.

¹⁰⁷ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023.

¹⁰⁸ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023.

¹⁰⁹ T Walsh, H Blaber, C Smith, L Cornwell and K Blake, *Legal perspectives on solitary confinement in Queensland*, The University of Queensland and Prisoners' Legal Service, 2020.

¹¹⁰ Queensland Advocacy Incorporated (QAI), *dis-abled Justice: Reforms to justice for persons with disability in Queensland*, QAI, 2015.

¹¹¹ Clinical Excellence Queensland, Queensland Health, *Office for Prisoner Health and Wellbeing*, fact sheet, <https://www.health.qld.gov.au/__data/assets/pdf_file/0036/1438857/phs-factsheet.pdf>.



As correctional centres do not have 'hospital beds', prisoners with medical conditions that are unstable or who require ongoing monitoring or supervision are transferred to an acute or sub-acute hospital unit.¹¹²

Where required, prisoners can also be referred to health services external to the correctional centre and will be escorted by a QCS officer.

The Princess Alexandra Hospital operates a Secure Unit for people who require in-patient treatment. The Secure Unit has 12 beds.

Those who require in-patient mental health care, including involuntary treatment, are transferred to an Authorised Mental Health Service as classified patients (see page 71 for more information).

Access to healthcare for prisoners with disability, including mental health care and medication, was an issue commonly raised with the Disability Royal Commission.¹¹³

In a study conducted by researchers from the University of Queensland, people with disability and lived experience of the criminal justice system reported mixed views about access to healthcare.¹¹⁴

Some participants reported that while in prison they were able to receive appropriate medication and access programs to address drug addiction. Others reported concerns about the medications that they received and the responsiveness of prison staff when prisoners raised these concerns.

There have been reports of prisoners receiving the wrong medication or being punished for refusing to take medication, even in circumstances where a prisoner was allergic to, or was experiencing adverse side effects to, the medication.¹¹⁵

The Human Rights Watch report suggested that people with disability may be able to access urgent care, but can face long waiting times to see specialists, physiotherapists or psychiatrists.¹¹⁶

An independent review of offender health services in Queensland undertaken in 2018 highlighted a number of systemic issues relevant to the delivery of services, including:

- An increase in total prisoner numbers of 19.4 per cent on an average annual head count basis between 2015 and 2018 (including prisoners in public and private prisons).
- Overcrowding of the prisoner population, with most correctional centres operating above built capacity.
- The consequences of overcrowding, including the need for QCS to change their processes in order to maintain safety and security.
- The continued use of a historic funding model that may no longer reflect the costs of service delivery at correctional health centres.
- Complex health needs of prisoners.
- The nature of different correctional centres (eg reception centres versus placement centres) drives variation in workload and cost.
- The lack of suitable infrastructure within which to deliver health care services.
- Conflict between the corporate objectives of QCS and the delivery of health services.¹¹⁷

¹¹² Clinical Excellence Queensland, Queensland Health, *Office for Prisoner Health and Wellbeing*, fact sheet, <https://www.health.qld.gov.au/__data/assets/pdf_file/0036/1438857/phs-factsheet.pdf>.

¹¹³ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023.

¹¹⁴ K Ellem, L Dowse, S Rowe, L Holland, J Cullin, M Parker, and C Henderson, *Final report: Insights from people with lived experience of disability and the justice system*, report to the Department of Justice and Attorney General, Queensland, 2023.

¹¹⁵ Australian Human Rights Commission, *Equal before the law: Towards disability justice strategies*, 2014.

¹¹⁶ Human Rights Watch, '*I needed help, instead I was punished*': Abuse and neglect of prisoners with disabilities in Australia, 2018.

¹¹⁷ Department of Health, Clinical Excellence Division, *Offender Health Service Review: Final Report*, report prepared by PricewaterhouseCoopers, 2018, p. iii.



These challenges were found to have contributed to issues including:

- A workforce that at times feels unsupported and frustrated by their inability to deliver the level and standard of services that they strive to provide.
- A prison population whose health care needs have not been consistently met.
- Inefficiencies in care delivery due to the capacity to focus only on the day to day delivery of basic care and little capacity to address issues strategically.
- Fragmentation in the delivery of services.
- Significant variability in the nature and availability of services for prisoners.¹¹⁸

Queensland Health accepted, accepted in principle, or supported each of the recommendations from this review¹¹⁹ and has undertaken actions to improve the health services available to prisoners, which has included the establishment of the Office for Prisoner Health and Wellbeing¹²⁰ and the development of the Queensland Prisoner Health and Wellbeing Strategy 2020-2025.¹²¹

Access to rehabilitation, training and education programs

Rehabilitation is one of the goals of sentencing and is critical to preventing recidivism and supporting community safety when an offender returns to the community.

However, counselling, rehabilitation, employment and vocational education, and other education and skill development programs are often inaccessible or are not designed in a way that enables participation by people with cognitive disability.¹²² A lack of reasonable adjustments or access to supports to facilitate participation in these programs can create further barriers to access.¹²³

In response to the Human Rights Watch report noted previously, which highlighted a range of challenges experienced by people with disability in prison, the then Commissioner of QCS noted that 'QCS adapts some rehabilitation programs and services to allow prisoners with a cognitive disability to complete the program'.¹²⁴

However, stakeholders have raised concerns with the Public Advocate that greater consideration of accessibility is needed, particularly in relation to responding to different types of cognitive disability and the different skills that people may have. For example, a stakeholder noted that while providing information in an easy read format is beneficial for many people, this would not address the barriers faced by a person whose primary concern is memory difficulties.

Programs should be designed with consideration of the broad range of challenges and support needs of people with cognitive disability.

Intersection with the NDIS

The intersection between the criminal justice system and the NDIS has been the subject of much discussion and was considered by the Disability Royal Commission in detail in its final report.¹²⁵

¹¹⁸ Department of Health, Clinical Excellence Division, *Offender Health Service Review: Final Report*, report prepared by PricewaterhouseCoopers, 2018, p. iii.

¹¹⁹ Queensland Health and Queensland Corrective Services, *Reducing barriers to health and wellbeing: The Queensland Prisoner Health and Wellbeing Strategy 2020-2025*, 2020.

¹²⁰ Department of Health, *Annual report 2018-2019*

¹²¹ Queensland Health and Queensland Corrective Services, *Reducing barriers to health and wellbeing: The Queensland Prisoner Health and Wellbeing Strategy 2020-2025*, 2020.

¹²² K Ellem, L Dowse, S Rowe, L Holland, J Cullin, M Parker, and C Henderson, *Final report: Insights from people with lived experience of disability and the justice system*, report to the Department of Justice and Attorney General, Queensland, 2023, Queensland Advocacy Incorporated (QAI), *Disabled Justice: The barriers to justice for persons with disability in Queensland*, report prepared by P French, QAI, 2007.

¹²³ Australian Human Rights Commission, *Equal before the law: Towards disability justice strategies*, 2014.

¹²⁴ Correspondence from Peter Martin, Commissioner, Queensland Corrective Services to Elaine Pearson, Human Rights Watch, 15 January 2018, p. 5.

¹²⁵ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023.



The Disability Royal Commission found that, within the criminal justice system, the delineation of responsibilities between the NDIS and states and territories is unclear.¹²⁶ This issue was also identified in the final report of the Independent Review into the National Disability Insurance Scheme.¹²⁷

A particular challenge can be determining whether a support is required to address disability or criminogenic needs, which, in practice, can be very difficult to separate.¹²⁸

This lack of clarity can affect access to supports, which can inhibit other pathway goals, such as accessing parole.

People with cognitive disability in the criminal justice system can also experience barriers in accessing the NDIS.¹²⁹ This can include challenges in applying to the NDIS while in custody due to limited support being available to assist with the application process. People who are NDIS participants can also find it difficult to access NDIS-funded supports while in custody. In some cases, this can be due to difficulty in finding providers that are willing and able to provide supports to people while they are in custody.

People can experience challenges with timely planning and access to NDIS supports to assist with the transition from custody back into the community.¹³⁰ Difficulties have also been reported with re-engaging with existing NDIS plans during this transition.¹³¹

Justice Liaison Officers (JLOs) were introduced in 2020 to assist with the coordination of supports for NDIS participants who are in custody and approaching release.¹³² The Disability Royal Commission heard that JLOs have an important role in facilitating NDIS access and navigation for people with disability in the criminal justice system, however noted reports that there are insufficient JLOs to meet demand.¹³³

There are also concerns that JLOs and NDIS planners do not always have the expertise necessary, or sufficient time available, to understand the needs of people with disability in the criminal justice system and ensure that these needs are met.¹³⁴

In June 2024, the National Disability Insurance Agency (NDIA) announced the introduction of the Justice Advisory Panel.¹³⁵ This panel examines relevant policy and systemic issues and provides advice to the NDIA on 'how NDIS supports can work with supports from other systems to improve participant outcomes, manage community safety concerns and the risks of re-offending'.¹³⁶

The Disability Royal Commission made several recommendations relating to the interface between the NDIS and the criminal justice system, which are discussed further on page 41.

¹²⁶ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023, p. 207.

¹²⁷ Commonwealth of Australia, Department of the Prime Minister and Cabinet, *Working together to deliver the NDIS - Independent Review into the National Disability Insurance Scheme: Final Report*, 2023.

¹²⁸ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023.

¹²⁹ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023.

¹³⁰ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023.

¹³¹ Synapse and The Hopkins Centre, Griffith University, *Assessing the disability needs of Indigenous Prisoners (ADNIP)*, ADNIP final summary report, 2021.

¹³² Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023; National Disability Insurance Scheme, *Justice system*, (8 August 2025), <<https://www.ndis.gov.au/understanding/ndis-and-other-government-services/justice-system>>.

¹³³ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023.

¹³⁴ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023.

¹³⁵ National Disability Insurance Agency, *Decorated top cop to lead NDIS panel of justice experts*, (21 June 2024), <<https://www.ndis.gov.au/news/10184-decorated-top-cop-lead-ndis-panel-justice-experts>>.

¹³⁶ National Disability Insurance Agency, *Justice system*, (30 September 2025), <<https://www.ndis.gov.au/understanding/ndis-and-other-government-services/justice-system>>.



Since the release of the Disability Royal Commission's final report, and following the Independent Review of the NDIS, changes have been made, or are in progress, to improve the scheme. The effect of these changes on access to disability-related supports for people with cognitive disability in prison or exiting prison is not yet clear.

Parole

People with cognitive disability may experience a range of challenges in applying for, and meeting the eligibility criteria for, parole.

It has been reported that people with cognitive disability may have difficulty completing and submitting the forms required to apply for parole and may not have access to appropriate resources or support to do this.¹³⁷

People with cognitive disability can also be less likely to be granted parole due to negative stereotypes and assumptions about the likelihood that they will commit further offences, and due to challenges in securing appropriate accommodation and supports.¹³⁸

As noted above, they may also not have been able to access or participate in programs that would increase their likelihood of being granted parole.

Due to this difficulty in applying or meeting the eligibility criteria for parole, prisoners with cognitive disability are likely to serve longer periods of time in prison.¹³⁹

Further, the Queensland Parole System Review 2, completed in 2023, found that:

mental health and disability needs are not being adequately assessed and treated within custody, and prisoners are being released without adequate community supports.¹⁴⁰

In response, QCS has:

developed the End-to-End (E2E) system, the aim of which is to comprehensively and cohesively map out an offender's journey through incarceration and community supervision. Central to E2E is identifying the risks and needs of offenders and the targeting of services to address these risks and needs.¹⁴¹

While this program may alleviate some of the issues that can prevent a prisoner with cognitive disability from applying for parole, the program is, at present, limited to female prisoners (across Queensland) and male prisoners in the Northern and Far Northern regions of Queensland.¹⁴²

Those who have been released on parole can face additional problems as they can experience difficulty with understanding, remembering, and complying with parole conditions.¹⁴³ This can increase the risk of a person with cognitive disability having their parole revoked, and consequently having to return to prison to serve the remainder of their sentence.

¹³⁷ K Ellem, L Dowse, S Rowe, L Holland, J Cullin, M Parker, and C Henderson, *Final report: Insights from people with lived experience of disability and the justice system*, report to the Department of Justice and Attorney General, Queensland, 2023; W Sofronoff, *Queensland Parole System Review*, Final Report, 2016.

¹³⁸ Queensland Advocacy Incorporated (QAI), *dis-Abled Justice: Reforms to justice for persons with disability in Queensland*, QAI, 2015.

¹³⁹ Queensland Advocacy Incorporated (QAI), *dis-Abled Justice: Reforms to justice for persons with disability in Queensland*, QAI, 2015.

¹⁴⁰ Queensland Government, *Government response to Queensland Parole System Review 2, 2024*, <<https://www.publications.qld.gov.au/dataset/qcs-reviews-and-reports/resource/b7a26614-546c-482c-863e-fc1f9ef23ba4>>, p. 4.

¹⁴¹ Queensland Government, *Government response to Queensland Parole System Review 2, 2024*, <<https://www.publications.qld.gov.au/dataset/qcs-reviews-and-reports/resource/b7a26614-546c-482c-863e-fc1f9ef23ba4>>, p. 8.

¹⁴² Queensland Corrective Service, *Annual report 2024-2025*.

¹⁴³ K Ellem, L Dowse, S Rowe, L Holland, J Cullin, M Parker, and C Henderson, *Final report: Insights from people with lived experience of disability and the justice system*, report to the Department of Justice and Attorney General, Queensland, 2023; Queensland Advocacy Incorporated (QAI), *dis-Abled Justice: Reforms to justice for persons with disability in Queensland*, QAI, 2015.



A study by researchers from the University of Queensland also highlighted a need for staff working in community corrections services to obtain additional knowledge and training about disability and trauma to enable them to work effectively with people with disability.¹⁴⁴ This includes practice in communicating and working with people with disability, as well as understanding how the physical environment in which meetings take place can affect these interactions.

Several reviews of the parole system have been undertaken over the last decade. The Queensland Parole System Review final report was published in 2016,¹⁴⁵ and a follow-up 'health check' review, noted above, was conducted in 2023.¹⁴⁶

In 2021, KPMG Australia was engaged by the previous Queensland Government to conduct a review of Parole Board Queensland to provide 'insights and advice on future efficiencies and modernisation considerations'.¹⁴⁷

In June 2025, the current Queensland Government announced an independent review into Parole Board Queensland, which will make 'targeted recommendations to improve the rights, participation and treatment of victims within the parole process'.¹⁴⁸

While these reviews, and the changes implemented as a result, are not focused specifically on people with cognitive disability or the issues that they face, it is likely that the reforms will affect this cohort.

Further information about the Parole Board Guidelines are provided on page 48.

Transition to the community

The transition from a correctional centre back into the community is a critical time, including for people with cognitive disability. Research suggests that access to appropriate post-release supports, particularly a combination of disability and community mental health supports, can reduce the risk of reincarceration for people with intellectual disability.¹⁴⁹

For those whose offence was related to their disability, or where a lack of appropriate supports was a contributing factor, ensuring that the necessary supports and services are in place is important for reducing the likelihood of future offending. Where a person needs to engage with multiple services or agencies to receive these supports, coordination of these services can be a challenge.¹⁵⁰

Numerous reports have discussed the challenges associated with transition to the community for this cohort.

These include:

- poor resourcing and planning for the transition;¹⁵¹

¹⁴⁴ K Ellem, L Dowse, S Rowe, L Holland, J Cullin, M Parker, and C Henderson, *Final report: Insights from people with lived experience of disability and the justice system*, report to the Department of Justice and Attorney General, Queensland, 2023.

¹⁴⁵ W Sofronoff, *Queensland Parole System Review*, Final Report, 2016.

¹⁴⁶ Queensland Government, *Government response to Queensland Parole System Review 2*, 2024, <<https://www.publications.qld.gov.au/dataset/qcs-reviews-and-reports/resource/b7a26614-546c-482c-863e-fc1f9ef23ba4>>.

¹⁴⁷ Queensland Government, *Statement of Government's reforms to design a sustainable Parole Board Queensland operating model*, Queensland Government, p. 2.

¹⁴⁸ L Gerber (Minister for Youth Justice and Victim Support and Minister for Corrective Services), *A fresh start for Queensland: Crisafulli Government launches review into Parole Board Queensland*, media report, The State of Queensland, 20 June 2025.

¹⁴⁹ J Trofimovs, L Dowse, P Srasuebkul and J Trollor, 'Impact of post-release community mental health and disability support on reincarceration for prisoners with intellectual disability and serious mental illness in NSW, Australia', *BJPsych Open*, 2023, vol. 9, no 2, e44, 1-6.

¹⁵⁰ Synapse and The Hopkins Centre, Griffith University, *Assessing the disability needs of Indigenous Prisoners (ADNIP)*, ADNIP final summary report, 2021.

¹⁵¹ K Ellem, L Dowse, S Rowe, L Holland, J Cullin, M Parker, and C Henderson, *Final report: Insights from people with lived experience of disability and the justice system*, report to the Department of Justice and Attorney General, Queensland, 2023.



- challenges accessing affordable, safe and appropriate housing,¹⁵² including 'robust' specialist disability accommodation (SDA) for people with complex needs;¹⁵³
- difficulty meeting daily living costs;¹⁵⁴
- a lack of support, including culturally appropriate supports, to facilitate reintegration into the community;¹⁵⁵ and
- issues with timely access to NDIS supports and services.¹⁵⁶

Additionally, the Public Advocate has been advised that it can be particularly challenging for people who are released late in the day, particularly on a Friday, as it can be difficult to access support services that only operate within standard business hours.

These challenges can contribute to delays in release from custody and recidivism.¹⁵⁷

QCS does provide some re-entry support, including through the Men's Reintegration Service and the Women's Reintegration Service, and prisoners may be able to apply for assistance with travel fares if they have insufficient funds when they are discharged from a correctional centre.¹⁵⁸ Some after-hours support is also available for those who are discharged outside of standard business hours. Further information about the programs and supports that may be available to adults with cognitive disability exiting correctional centres is provided on page 34.

OPCAT

In 2017 the Australian Government ratified the Optional Protocol to the Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT), which is an international agreement aiming to strengthen protections for people who are in places where they are deprived of their liberty.¹⁵⁹

Under OPCAT, Australia has agreed to establish independent 'National Preventative Mechanisms' (NPMs) in each jurisdiction to conduct visits to monitor places of detention. OPCAT also requires that the United Nations Subcommittee on Prevention of Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (the United Nations Subcommittee) be allowed to conduct visits to these settings.

The implementation of OPCAT is particularly relevant for people with cognitive disability as they are disproportionately represented in prisons, watchhouses, and other places of detention.¹⁶⁰

While some progress has been made towards the implementation of OPCAT in Australia, it is yet to be fully implemented.

¹⁵² K Ellem, L Dowse, S Rowe, L Holland, J Cullin, M Parker, and C Henderson, *Final report: Insights from people with lived experience of disability and the justice system*, report to the Department of Justice and Attorney General, Queensland, 2023; Synapse and The Hopkins Centre, Griffith University, *Assessing the disability needs of Indigenous Prisoners (ADNIP)*, ADNIP final summary report, 2021.

¹⁵³ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023, p. 226.

¹⁵⁴ K Ellem, L Dowse, S Rowe, L Holland, J Cullin, M Parker, and C Henderson, *Final report: Insights from people with lived experience of disability and the justice system*, report to the Department of Justice and Attorney General, Queensland, 2023.

¹⁵⁵ Australian Human Rights Commission, *Equal before the law: Towards disability justice strategies*, 2014.

¹⁵⁶ K Ellem, L Dowse, S Rowe, L Holland, J Cullin, M Parker, and C Henderson, *Final report: Insights from people with lived experience of disability and the justice system*, report to the Department of Justice and Attorney General, Queensland, 2023.

¹⁵⁷ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023.

¹⁵⁸ Queensland Corrective Services, *Custodial Operations Practice Directive, Reception processes, Custodial discharge*, ver. 14 (24/07/2025).

¹⁵⁹ United Nations, *Optional Protocol to the Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment*, 57th session of the General Assembly of the United Nations, A/RES/57/199, (adopted 18 December 2002).

¹⁶⁰ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Independent oversight and complain mechanisms', *Final report*, volume 11, 2023.



In Queensland, the *Monitoring of Places of Detention (Optional Protocol to the Convention Against Torture) Act 2022* allows the United Nations Subcommittee to visit places of detention across the state.

The Inspector of Detention Services was also established in Queensland in 2022 to 'promote the improvement of detention services and places of detention'¹⁶¹ through the conduct of reviews and inspections and independent reports to the Queensland Parliament.¹⁶² (See pages 33 and 65 for further information about the Inspector of Detention Services.)

However, Queensland, along with New South Wales and Victoria, has not yet nominated an NPM to undertake these important safeguarding functions.¹⁶³

Current members of the Australian NPM include:

- Commonwealth NPM: the Office of the Commonwealth Ombudsman.
- Australian Capital Territory: ACT NPM, which consists of the ACT Office of the Inspector of Custodial Services, the ACT Human Rights Commission and the ACT Ombudsman.
- Northern Territory: the Office of the Ombudsman NT is the interim coordinating NPM, with the NT Office of the Children's Commissioner and the NT Community Visitor program as the anticipated NPM.
- South Australia: the Official Visitors (for adult prisons and police cells) and the Training Centre Visitor (for youth training centres).
- Tasmania: the Tasmanian NPM (which is also the Tasmanian Ombudsman and Custodial Inspector).
- Western Australia: the office of the Inspector of Custodial Service (for justice-related facilities) and the Ombudsman WA (for mental health and other secure facilities).¹⁶⁴

It should be noted that, while a number of jurisdictions have nominated NPMs, work is still required to ensure that appropriate legislation is enacted and funding secured to enable the NPMs to undertake functions as required under OPCAT.¹⁶⁵

Australia was given the extended deadline of January 2023 to implement OPCAT.¹⁶⁶ This deadline was not met.

Watch-houses

In Queensland, watch-houses are operated by the Queensland Police Service (QPS) and are intended to serve as 'a short-term, temporary holding facility for people who have been arrested and are being processed, are awaiting transfer to a youth detention centre or corrective services facility, or for their first court appearance.'¹⁶⁷

In recent years, significant concerns have been raised about the conditions experienced by those in watch-houses, the risk of harm, and the length of time that people, particularly children, spend in these environments.¹⁶⁸

¹⁶¹ *Inspector of Detention Services Act 2022* (Qld) s 3(1).

¹⁶² *Inspector of Detention Services Act 2022* (Qld) s 3.

¹⁶³ Australian National Preventative Mechanism, *Monitoring places of detention under the Optional Protocol to the Convention Against Torture, Annual report of the Australian National Preventative Mechanism*, 1 July 2023 - 30 June 2024.

¹⁶⁴ Commonwealth Ombudsman, *Australian National Preventative Mechanism (NPM)*, 2025, <<https://www.ombudsman.gov.au/industry-and-agency-oversight/monitoring-places-of-detention-opcat/australian-national-preventative-mechanism-npm>>.

¹⁶⁵ Australian National Preventative Mechanism, *Monitoring places of detention under the Optional Protocol to the Convention Against Torture, Annual report of the Australian National Preventative Mechanism*, 1 July 2023 - 30 June 2024.

¹⁶⁶ Commonwealth Ombudsman, *Monitoring places of detention, The Optional Protocol to the Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT)*, (2025). <<https://www.ombudsman.gov.au/industry-and-agency-oversight/monitoring-places-of-detention-opcat>>.

¹⁶⁷ Queensland Police Service, *Watch-house Review*, 2025, p. 6.

¹⁶⁸ See for example: Inspector of Detention Services, Queensland Ombudsman, *Cairns and Murgon watch-houses inspection report: Focus on detention of children*, 2024; Queensland Family & Child Commission, *Queensland Police Service Watch-house Review*, Queensland Family & Child Commission, Brisbane City East, Queensland, 2024; Queensland Police Service, *Watch-house Review*, 2025.



For example, the QPS Watch-house Review, which was published in 2025, highlighted issues with the design and maintenance of watch-houses, including issues with the accessibility of shower facilities for prisoners with disability.¹⁶⁹ The review also identified challenges with the delivery of health services in these settings, particularly for vulnerable groups.

The report made 34 recommendations relating to watch-house infrastructure, prisoner transport, workforce, support services, policies and procedures, and digital modernisation.

Following the completion of the review, QPS committed to 'work through actions to implement all 34 recommendations and enact sweeping custody management changes'.¹⁷⁰

Legislation and policies

Legislation and policies that pertain to prisoners with cognitive disability and correctional facilities include the *Corrective Services Act 2006* and a suite of directives included under the broader Custodial Operations Practice Directive.

Further details regarding the legislation and directives are included in the appendix to this paper (page 46).

During the development of this discussion paper, several issues related to the effect of the Act and directives on adults with cognitive disability were identified, which are detailed below.

The Act acknowledges the needs of people with disability, however there appear to be some inconsistencies throughout the legislation. For example, the Act does reference some particular needs that a prisoner may have, including being illiterate, and that such prisoners need to be informed of their entitlements and duties in a way that they can understand.¹⁷¹ Despite this acknowledgement, the Act includes a large number of processes and procedures that require a prisoner to make applications or receive information in writing.

While disability is acknowledged as a key consideration, a prisoner's disability is only explicitly considered in a limited number of situations when certain decisions are made under the legislation.

The Custodial Operations Practice Directive addresses some of the inconsistencies in the legislation in relation to references to disability. The Act requires this and other directives to consider the 'special needs' of a prisoner.¹⁷²

For example, the Prisoners of Concern Directive includes measures in relation to prisoners with 'significant vulnerabilities'.¹⁷³ This Practice Directive acknowledges that certain prisoners may require further care, support or protection, and outlines the management strategies that may be required.

However, the Practice Directive is subordinate to the legislation, and the limitations of the legislation to fully account for the needs of prisoners with disability remain evident.

For example, the Breaches of Discipline Practice Directive reiterates that a prisoner, including those for instance with disability, can only be assisted by someone within the corrective services facility,¹⁷⁴ rather than by an independent specialist disability services provider.

¹⁶⁹ Queensland Police Service, *Watch-house Review*, 2025.

¹⁷⁰ Queensland Police Service, *QPS accepts Watch-house Review recommendations, as work begins to drive meaningful change*, media release, Queensland, 10 July 2025.

¹⁷¹ *Corrective Services Act 2006* (Qld) s 11(2).

¹⁷² *Corrective Services Act 2006* (Qld) s 265(4).

¹⁷³ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoners of concern*, ver. 08 (06/06/2024).

¹⁷⁴ Queensland Corrective Services, *Custodial Operations Practice Directive, Breaches of Discipline*, ver. 06 (19/12/2024), p. 10.



The Practice Directive also does not fully address legislative provisions associated with substitute decision-making. The Office of the Public Guardian Practice Directive acknowledges the role of the Office of the Public Guardian and the Public Trustee of Queensland when appointed as formal substitute decision-makers for members of the Queensland community who do not have decision-making capacity for certain matters.¹⁷⁵

However, the Directive does not acknowledge enduring powers of attorney, which would have similar functions if a prisoner were to have such an instrument and not have capacity to make decisions. Further, in the same Practice Directive, there is some confusion as to the role of private guardians and administrators.

For example, the Practice Directive notes that the Public Guardian and Public Trustee are entitled to information regarding the roles for which they are appointed but does not mention that private guardians and administrators would have the same entitlements under the law.¹⁷⁶

Current strategies and programs

Queensland Corrective Services (QCS)

QCS is responsible for 'the humane containment, supervision and rehabilitation of offenders in correctional centres and the community'.¹⁷⁷ This includes the operation of correctional centres (13 high security and 7 low security), community corrections district offices and reporting locations across Queensland.

Strategic Plans

QCS has a number of strategies and plans, many of which are relevant to, or focused on, addressing issues for people in custody with disability or mental health concerns.

For example, these include:

- the QCS 2025-29 Strategic Plan;
- the QCS Disability Service Plan 2022-2025;
- the QCS Mental Health Strategy 2022-2027;
- the Drug and Alcohol Strategy 2020-2025;
- the Interim Women's Strategy 2023-2025; and
- the Queensland Prisoner Health and Wellbeing Strategy 2020-2025 (a joint commitment with Queensland Health).

The previous strategic plan, *Corrections 2030 Update*, identified key principles and future directions for QCS, including a future direction to:

Collaborate with stakeholders to address system-wide barriers experienced by people with disability to improve the supports they need to reduce recidivism and improve community safety.¹⁷⁸

¹⁷⁵ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoner Entitlements*, Office of the Public Guardian, ver. 06 (04/07/2024).

¹⁷⁶ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoner Entitlements*, Office of the Public Guardian, ver. 06 (04/07/2024), p. 7.

¹⁷⁷ Queensland Corrective Services, *About Queensland Corrective Services*, (3 October 2024), <<https://corrections.qld.gov.au/about-queensland-corrective-services/>>.

¹⁷⁸ Queensland Corrective Services, *Corrections 2030 Update*, p 2.



While the current Strategic Plan 2025-2029 does not specifically mention disability, it does contain a number of relevant strategies including:

- 'Make communities safer through stakeholder relationships that deliver wraparound support and promote safer transition into the community.'¹⁷⁹
- 'Deliver perpetrator programs and targeted interventions for prisoners and offenders to reduce reoffending.'¹⁸⁰
- 'Improve outcomes for First Nations peoples in the correctional system through First Nations-led interventions that contribute to Closing the Gap priority reforms.'¹⁸¹

Disability Service Plan

The *Disability Services Act 2006* (Qld) requires Queensland government departments to develop and implement disability service plans.

The QCS Disability Service Plan 2022-2025 identifies a number of actions to support its commitment 'to driving action and change to achieve the best possible outcomes for prisoners, offenders and corrective services staff with a disability'.¹⁸²

Some examples of the actions included in this plan include:

- 'Increase opportunities for prisoners with disability to engage in rehabilitation programs, and education, training and employment.'¹⁸³
- 'Continue to collaborate with key stakeholders, including the NDIA, to improve the coordination of supports for NDIS participants exiting custody.'¹⁸⁴
- 'Assess the Prisoner Support Carer Program (in consultation with Queensland Health) to ensure ... that prisoners with disability are receiving adequate care.'¹⁸⁵
- 'Explore approaches for safer admissions to custody, including early identification of individual prisoner needs, and collaborate with key stakeholders to improve coordination of supports for NDIS participants exiting custody.'¹⁸⁶
- 'Review and update Custodial and Community Corrections training packages to enhance staff awareness of the complex needs and vulnerabilities of prisoners and offenders with disability.'¹⁸⁷

Other initiatives

In addition to the above strategies and initiatives, QCS has also implemented, or is currently implementing, reforms in response to previous reviews and reports, including several that focus on people with disability who are in custody.

QCS has recently established a permanent Disability Services Team that provides disability support across Queensland correctional centres.¹⁸⁸ People can be referred, or self-refer, to receive assistance from the Disability Services Team. Services provided by the team can include assistance with screening and assessment to identify disability, and support to access the NDIS.

In 2024-2025, QCS also 'strengthened frontline awareness and inclusive practice through training collaboration, embedding disability responsiveness into daily operations'.¹⁸⁹

Recommendations from the Disability Royal Commission in this area remain subject to further consideration by government.

¹⁷⁹ Queensland Corrective Services, *Strategic Plan 2025-2029*, 2025.

¹⁸⁰ Queensland Corrective Services, *Strategic Plan 2025-2029*, 2025.

¹⁸¹ Queensland Corrective Services, *Strategic Plan 2025-2029*, 2025.

¹⁸² Queensland Corrective Services, *Disability Service Plan 2022-2025*, p. 7.

¹⁸³ Queensland Corrective Services, *Disability Service Plan 2022-2025*, p. 10.

¹⁸⁴ Queensland Corrective Services, *Disability Service Plan 2022-2025*, p. 10.

¹⁸⁵ Queensland Corrective Services, *Disability Service Plan 2022-2025*, p. 11.

¹⁸⁶ Queensland Corrective Services, *Disability Service Plan 2022-2025*, p. 12.

¹⁸⁷ Queensland Corrective Services, *Disability Service Plan 2022-2025*, pp. 12-13.

¹⁸⁸ Queensland Corrective Service, *Annual report 2023-2024*, p. 21.

¹⁸⁹ Queensland Corrective Services, *Annual report 2024-2025*, p. 22.



Official Visitors

Official Visitors are assigned to corrective services facilities to investigate, and provide advice about, complaints made by prisoners.¹⁹⁰ They also perform other tasks as required under the *Corrective Services Act 2006*, including the review of safety orders and maximum security orders.¹⁹¹

Official Visitors are independent of prison staff and are not QCS or public sector employees. They are not advocates for prisoners or QCS, but instead are expected to act impartially.¹⁹²

Following an investigation of a complaint, an Official Visitor may make a recommendation to the chief executive, however the chief executive is not bound by this recommendation.¹⁹³

Inspector of Detention Services

The functions of the Inspector of Detention Services include:

- publishing standards for inspections of places of detention;
- conducting inspections;
- reporting on those visits; and
- making recommendations for improvements.¹⁹⁴

The inspection standards for Queensland prisons include standards relevant for all prisoners, as well as categories of standards for specific cohorts including older prisoners and prisoners with disability.¹⁹⁵

The role of the Inspector of Detention Services is performed by the Queensland Ombudsman and forms part of the Queensland Ombudsman's office.¹⁹⁶

The *Inspector of Detention Services Act 2022* fully commenced in July 2023, so it is still early in its operation, however the Inspector of Detention Services has published five reports on places of detention to date.

This includes inspection reports on:

- the Cleveland Youth Detention Centre;
- the Cairns and Murgon watch-houses;
- the Southern Queensland Correctional Centre;
- the Palen Creek Correctional Centre; and
- a combined inspection report on the West Moreton, Brisbane and Cleveland youth detention centres.¹⁹⁷

Further information about the Inspector of Detention Services and the inspection standards is provided on page 65.

¹⁹⁰ *Corrective Services Act 2006* (Qld) s 290.

¹⁹¹ *Corrective Services Act 2006* (Qld) ss 56, 63.

¹⁹² *Corrective Services Act 2006* (Qld) s 290(3).

¹⁹³ *Corrective Services Act 2006* (Qld) s 290.

¹⁹⁴ *Inspector of Detention Services Act 2022* (Qld) s 8.

¹⁹⁵ Queensland Ombudsman, Inspector of Detention Services, *Inspection standards for Queensland prisons*, 2023.

¹⁹⁶ *Inspector of Detention Services Act 2022* (Qld) pt 5.

¹⁹⁷ Queensland Ombudsman, Detention inspection reports, (9 January 2026), <<https://www.ombudsman.qld.gov.au/publications/detention-inspection-reports>>.



Legal advice and assistance for prisoners

Prisoners may be able to access free legal advice and assistance through organisations such as Legal Aid Queensland and the Prisoners' Legal Service.

Legal Aid Queensland provides a Prison Legal Advice Service, where people can seek advice or information from a lawyer via the telephone, videoconference, or face-to-face.¹⁹⁸

The Prisoners' Legal Service can provide information and advice to people in prison relating to issues arising from imprisonment such as:

- human rights violations,
- the use of solitary confinement,
- satisfying parole eligibility requirements to achieve safe release, and
- obtaining access to rehabilitation.¹⁹⁹

Due to limited resources and high demand for their services, the Prisoners' Legal Service uses eligibility criteria to determine access to their services, which consider merit, client capability, and service capacity.²⁰⁰

Programs supporting transition back to the community

There are several programs that provide support to people who are returning to the community from a correctional centre. These programs are often focused on a specific cohort or deliver services in a particular location, and while they are not focused on people with cognitive disability, they likely support a number of people with cognitive disability and complex needs.

Women's Reintegration Service

The Women's Reintegration Service is a statewide program delivered by SERO4 that provides individualised supports to help women reintegrate into the community following imprisonment.²⁰¹

The program is available to all women, regardless of their legal status.

The support provided is based on a women's assessed needs and may include assistance with:

- housing pathways
- health and disability support
- education, training and employment
- basic practical and life skills including access to banking and phone services
- connection to family, community and culture
- ongoing rehabilitation support.²⁰²

Women may receive post-release support for up to 12 months.

Women may also access the After Hours Release Service, which provides support to women who are 'subject to an unscheduled discharge or release outside standard business hours'.²⁰³

¹⁹⁸ Legal Aid Queensland, *Are you in prison and need legal help?*, (16 December 2024), <<https://www.legalaid.qld.gov.au/Find-legal-information/Publications-and-resources/Are-you-in-prison-and-need-legal-help>>.

¹⁹⁹ Prisoners' Legal Service, *About us, How we can help*, (2025), <<https://pls.qld.com/about-us/>>.

²⁰⁰ Prisoners' Legal Service, *Eligibility criteria*, <<https://pls.qld.com/wp-content/uploads/2021/08/PLS-Eligibility-Criteria-1.pdf>>.

²⁰¹ Queensland Corrective Services, *Corrections News, September 2024*, [p. 20], <<https://corrections.qld.gov.au/wp-content/uploads/2024/10/September-Edition-2024-Website.pdf>>.

²⁰² Queensland Corrective Services, *Corrections News, September 2024*, [p. 20], <<https://corrections.qld.gov.au/wp-content/uploads/2024/10/September-Edition-2024-Website.pdf>>.

²⁰³ Queensland Corrective Services, *Custodial Operations Practice Directive, Reception processes, Custodial discharge*, ver. 14 (24/07/2025), p. 8.



Supports may include:

- a) arranging immediate and/or transit accommodation;
- b) arranging and booking transport (flights, bus, taxi etc) to return to the nominated place of residence (including regional, rural and remote locations);
- c) assistance to obtain necessities such as a mobile phone, clothing, groceries, medication; and
- d) brief after care follow up the following day.²⁰⁴

Men's Reintegration Service

The Men's Reintegration Service, delivered by external service provider Australian Community Support Organisation (ACSO), provides re-entry services to men in corrective service facilities across the state.²⁰⁵

Men may access pre-release support offered through group sessions focused on life skills, wellbeing, and capacity building.

Eligible men may also be able to access the Throughcare Post-Release Service, which enables them to access support for three months while they are in custody and up to six months post-release.²⁰⁶

Men who are released after hours may also be able to access support to assist with urgent needs such as access to secure crisis accommodation or medical practitioners.

Post Release Supported Accommodation Program

The Post Release Supported Accommodation (PRSA) program assists men over 18 years of age who are leaving a Queensland correctional centre and for whom accommodation is a barrier to release on parole.²⁰⁷

The types of assistance provided can include (but is not limited to):

- Helping to obtain housing following release from custody,
- Helping to improve skills in finding suitable housing and keeping housing longer-term,
- Helping to build capacity to be independent, self-reliant, and connected to a social and community support network.²⁰⁸

The PRSA program was independently evaluated, and while the evaluation report does not appear to be publicly available, QCS has reported positive results, including that:

The evaluation found universal support across all stakeholders for the PRSA approach of providing accommodation and support for men exiting custody to parole. Additionally, the program generated a small cost saving compared to a man remaining in custody.²⁰⁹

The program is provided by St Vincent de Paul Society Queensland in Cairns, Townsville, Moreton Bay and Toowoomba.²¹⁰

²⁰⁴ Queensland Corrective Services, *Custodial Operations Practice Directive, Reception processes, Custodial discharge*, ver. 14 (24/07/2025), p. 8.

²⁰⁵ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoner development, External service providers*, ver. 09 (01/07/2025).

²⁰⁶ Australian Community Support Organisation, *Forensic case work, How we can help*, (2025), <<https://www.acso.org.au/program-referral-type/forensic-case-work/>>.

²⁰⁷ Queensland Corrective Services, *Annual report 2023-2024*; St Vincent de Paul Society, *Prisoner re-integration, Supporting people through Post-Release Supported Accommodation*, (2025), <<https://www.vinnies.org.au/qld/homelessness/prisoner-re-integration>>.

²⁰⁸ St Vincent de Paul Society, *Prisoner re-integration, Supporting people through Post-Release Supported Accommodation*, (2025), <<https://www.vinnies.org.au/qld/homelessness/prisoner-re-integration>>.

²⁰⁹ Queensland Corrective Services, *Annual report 2023-2024*, p. 24.

²¹⁰ St Vincent de Paul Society, *Prisoner re-integration, Supporting people through Post-Release Supported Accommodation*, (2025), <<https://www.vinnies.org.au/qld/homelessness/prisoner-re-integration>>.



The Next Step Home program

The Next Step Home program, which operates in South East Queensland and Townsville, provides housing support to women exiting custody. Women may access support for up to three months prior to their release and up to 12 months while in the community through supported accommodation in a head-leased property. Women can also receive support to exit this program and obtain longer-term, stable housing by taking over the lease in the head-leased property, or by moving into social housing, the private housing market, or by moving in with friends or family.

Individual Recovery Support-Transition from Correctional Facilities Program

The Individual Recovery Support-Transition from Correctional Facilities Program (IRS-TCFP) provides a range of non-clinical psychosocial wrap-around supports for people over 18 years of age who are experiencing a severe mental illness, are about to be released from a Queensland adult correctional centre, and have been referred by the Prisoner Mental Health Service.²¹¹ Program access is prioritised for people who are not eligible for the NDIS.

The program offers support for people at least two weeks prior to their release, and for up to 12 months post-release.

Examples of the types of supports that can be provided include:

- facilitating access to:
 - ongoing mental health treatment and general health services including assessment and services such as specialist rehabilitation
 - alcohol and other drug services
 - accommodation
 - domestic violence support services and other social and community services
 - education, vocational training and employment where appropriate
 - liaison with [community corrections] if relevant.
- supporting the individual to:
 - improve daily living independence such as self-care, personal hygiene, cleaning, shopping, financial management, cooking, catching transport
 - establish and maintain housing arrangements and deal with tenancy matters
 - build and maintain family and community connections
 - connect with relevant community based services and resources according to their Transition Plan.²¹²

Community-based orders

This paper focuses on the imprisonment of people with cognitive disability.

Community-based orders (such as Community Service, Probation and some Court ordered Parole orders) also play a critical role in the sentencing of offenders. They offer a way for offenders to remain in the community, to identify and address any particular needs or reasons leading to or associated with criminal behavior, and to more readily access rehabilitation programs.

Community-based orders are also imposed by courts, often as a means for a person to rehabilitate, instead of more serious sentences, including detention, being imposed.

QCS's policy on community-based orders (the Operational Practice Guideline which is a set of policies and guidelines) is currently not publicly available.

²¹¹ Queensland Health, Clinical Excellence Queensland, *Individual Recovery Support- Transition from Correctional Facilities Program, Mental Health Community Support Services Program Guidelines*, <https://www.health.qld.gov.au/__data/assets/pdf_file/0027/934335/mh-css-irs-tcfp.pdf>.

²¹² Queensland Health, Clinical Excellence Queensland, *Individual Recovery Support- Transition from Correctional Facilities Program, Mental Health Community Support Services Program Guidelines*, <https://www.health.qld.gov.au/__data/assets/pdf_file/0027/934335/mh-css-irs-tcfp.pdf>, pp. 4-5.



QCS is working to provide the Public Advocate with relevant redacted policies (excluding information confidential to QCS) as early as possible.

It is anticipated that the full content of the Guideline, as it applies to adults with cognitive disability, will be considered by the Public Advocate in the preparation of the final report and reform recommendations associated with this project.

For the purposes of this paper, QCS has released two of the operational guidelines which have particular relevance to people with cognitive disability.

The guidelines released to the Public Advocate include:

- Admission and Induction; and
- Case Management.

The guidelines have been accompanied by two appendix documents, the 'Meaningful Contact Guide' and 'Referral of Supervised Individuals to the National Disability Insurance Scheme'.

Further details regarding these documents are included in the appendix of this paper (beginning on page 61).



Previous recommendations

A number of previous reports and reviews have made recommendations relevant to people with cognitive disability who are in detention. While some of the reforms may have been implemented, the extent to which they were implemented, their effectiveness, and whether the changes remain in place today, are not always clear.

Some of the reform areas are summarised below, along with examples of the kind of recommendations that have been made previously. This is not intended to be a comprehensive list, but instead aims to provide information to facilitate further discussion.

Screening and assessment

Many previous reports in this area have identified opportunities to reduce the reliance on self-reporting of disability, and to improve the effectiveness and availability of screening and assessment processes, including for people with cognitive disability.

For example, recommendations have included:

- Screening people for all types of disability when they enter prison.²¹³
- The development of a tool and/or implementation of a screening and assessment process that assists in determining:
 - a person's need for supports;²¹⁴ and
 - the supports and services needed to support health, social and welfare outcomes,²¹⁵ and how these supports should be tailored to meet participation needs.²¹⁶
- The development and implementation of culturally safe, and appropriate screening and approaches for Aboriginal and Torres Strait Islander peoples and people from culturally and linguistically diverse backgrounds.²¹⁷
- The involvement of Aboriginal and Torres Strait Islander staff in screening and assessment to increase the cultural safety of these processes.²¹⁸
- The development of national practice guidelines and policies on screening and identification of disability and support needs of people in custody.²¹⁹

Under its Disability Service Plan 2022-2025, QCS committed to 'Conduct a literature review to identify appropriate screening and assessment tools for prisoner and offender disability and mental illness, including consultation with First Nations people to ensure tools are culturally sensitive'.²²⁰

²¹³ Human Rights Watch, *'I needed help, instead I was punished': Abuse and neglect of prisoners with disabilities in Australia*, 2018; Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Executive summary: Our vision for an inclusive Australia and recommendations', *Final report*, 2023.

²¹⁴ K Ellem, L Dowse, S Rowe, L Holland, J Cullin, M Parker, and C Henderson, *Final report: Insights from people with lived experience of disability and the justice system*, report to the Department of Justice and Attorney General, Queensland, 2023.

²¹⁵ Australian Human Rights Commission, *Equal before the law: Towards disability justice strategies*, 2014;

²¹⁶ Queensland Advocacy Incorporated (QAI), *Disabled Justice: The barriers to justice for persons with disability in Queensland*, report prepared by P French, QAI, 2007.

²¹⁷ Synapse and The Hopkins Centre, Griffith University, *Assessing the disability needs of Indigenous Prisoners (ADNIP)*, ADNIP final summary report, 2021.

²¹⁸ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023.

²¹⁹ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023

²²⁰ Queensland Corrective Services, *Disability Service Plan 2022-2025*, p. 25.



Access to adjustments and disability-related supports

Several reports have recommended that people with disability who are in prison, including people with cognitive disability, be given access to appropriate adjustments, aids, and supports.²²¹

For example, the Disability Royal Commission recommended that:

State and territory governments should uphold the rights of people with disability who are in custody. Consistent with article 14 of the Convention on the Rights of Persons with Disabilities, all corrective service and youth justice agencies should provide people with disability with the disability supports they require to place them in the same position, so far as feasible, as other people in custody.²²²

The former Queensland Government (2015-2024) accepted this recommendation in principle and noted that:

The Queensland Government understands the importance of upholding the rights of people with disability in custody and will investigate opportunities in all corrective services and youth justice settings for program adjustments and support identification processes to ensure people with disability can access the disability supports they require.

The Queensland Government will investigate implementation of additional programs targeting specific needs, for example, general violence, domestic and family violence and alcohol and other drug use, which are also adapted to be delivered for people with disability. It is noted that Youth Detention Centres have a range of services and supports in place to support young people with a disability and staff training continues to be refined.

The Queensland Government will work to remove barriers for people with disability in custody to gain access to the NDIS. Specialist psychological services teams in custody assess new receptions, and respond to, and manage, prisoners who are at-risk or have complex support needs.²²³

In 2016, the Queensland Parole System Review made a number of recommendations, including that 'Queensland Corrective Services should alter the application process for parole to limit the written material required to be produced unassisted by a prisoner.'²²⁴ This recommendation was supported by the then Queensland Government.²²⁵

A recent report by the Queensland Inspector of Detention Services recommended the development of easy-read versions of complaint documents.²²⁶

Previous reports have also identified the need to ensure people with disability have access to appropriate advocacy and legal services.²²⁷

²²¹ Australian Human Rights Commission, *Equal before the law: Towards disability justice strategies*, 2014; Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023; Human Rights Watch, '*I needed help, instead I was punished*': Abuse and neglect of prisoners with disabilities in Australia, 2018.

²²² Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023, p. 17.

²²³ Queensland Government, *Queensland Government response to the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability*, 2024, p. 91

²²⁴ W Sofronoff, *Queensland Parole System Review*, Final Report, 2016, p. 24.

²²⁵ Queensland Government, *Response to Queensland Parole System Review recommendations*, <<https://parolereview.premiers.qld.gov.au/assets/government-response-to-qpsr-recommendations.pdf>>.

²²⁶ Inspector of Detention Services, Office of the Queensland Ombudsman, *Palen Creek Correctional Centre inspection report*, 2025, p. 8.

²²⁷ Australian Human Rights Commission, *Equal before the law: Towards disability justice strategies*, 2014; Synapse and The Hopkins Centre, Griffith University, *Assessing the disability needs of Indigenous Prisoners (ADNIP)*, ADNIP final summary report, 2021; K Ellem, L Dowse, S Rowe, L Holland, J Cullin, M Parker, and C Henderson, *Final report: Insights from people with lived experience of disability and the justice system*, report to the Department of Justice and Attorney General, Queensland, 2023.



Access to health services, including mental health services

Previous reports have discussed the need to ensure that people with disability, including cognitive disability, are able to access adequate health services.

This includes through:

- improving access to health services, including oral health, allied health and mental health services;²²⁸
- ensuring there are sufficient staff to provide mental health services;²²⁹ and
- providing staff with training to enable them to engage effectively with, and provide appropriate mental health services to, people with disability.²³⁰

Rehabilitation, education, and programs for offenders

Several reports have recommended the development of specialised programs, or the adjustment of programs, to ensure that people with disability can fully participate in a range of rehabilitation, education and training programs.²³¹ This includes 'culturally relevant training programs', and opportunities to participate in cultural activities.²³²

The Public Advocate was advised that there are examples of tailored rehabilitation programs in South Australia, including the 'Sexual Behaviour Clinic-me' and the 'Violence Prevention Program-me'.²³³

The Sexual Behaviour Clinic-me is a 15-month program for offenders with a cognitive impairment or acquired brain injury who have been assessed as having a moderate-to-low, moderate-to-high and a high risk of sexual reoffending.²³⁴

The Violence Prevention Program-me is a 12-month, high intensity program for offenders who have been assessed as having an intellectual disability or acquired brain injury and who have a moderate to high risk of violent reoffending.²³⁵

²²⁸ Department of Health, Clinical Excellence Division, *Offender Health Service Review: Final Report*, report prepared by PricewaterhouseCoopers, 2018; Inspector of Detention Services, Office of the Queensland Ombudsman, *Palen Creek Correctional Centre inspection report*, 2025.

²²⁹ Human Rights Watch, *'I needed help, instead I was punished': Abuse and neglect of prisoners with disabilities in Australia*, 2018.

²³⁰ Human Rights Watch, *'I needed help, instead I was punished': Abuse and neglect of prisoners with disabilities in Australia*, 2018.

²³¹ K Ellem, L Dowse, S Rowe, L Holland, J Cullin, M Parker, and C Henderson, *Final report: Insights from people with lived experience of disability and the justice system*, report to the Department of Justice and Attorney General, Queensland, 2023, p. 81; Queensland Advocacy Incorporated (QAI), *dis-abled Justice: Reforms to justice for persons with disability in Queensland*, QAI, 2015; Queensland Advocacy Incorporated (QAI), *Disabled Justice: The barriers to justice for persons with disability in Queensland*, report prepared by P French, QAI, 2007.

²³² Synapse and The Hopkins Centre, Griffith University, *Assessing the disability needs of Indigenous Prisoners (ADNIP)*, ADNIP final summary report, 2021.

²³³ Government of South Australia, *Prisoner and offender rehabilitation*, (3 February 2021), <<https://www.sa.gov.au/topics/rights-and-law/sa-prisons/support-for-prisoners/rehabilitation>>.

²³⁴ Government of South Australia, *Prisoner and offender rehabilitation*, (3 February 2021), <<https://www.sa.gov.au/topics/rights-and-law/sa-prisons/support-for-prisoners/rehabilitation>>.

²³⁵ Government of South Australia, *Prisoner and offender rehabilitation*, (3 February 2021), <<https://www.sa.gov.au/topics/rights-and-law/sa-prisons/support-for-prisoners/rehabilitation>>.



The interface between the NDIS and criminal justice system

In its final report, the Disability Royal Commission made the following recommendations relating to the interface between the NDIS and the criminal justice system:

Recommendation 8.17 NDIS Applied Principles and Tables of Support concerning the justice system

Through the Disability Reform Ministerial Council, the Australian Government and state and territory governments should:

- review the National Disability Insurance Scheme (Supports for Participants) Rules 2013 (Cth) and the Applied Principles and Tables of Support (APTOS) and operational guidelines to align and provide clear parameters in determining which supports will be funded by the National Disability Insurance Scheme (NDIS) for participants involved in the criminal justice system
- resolve issues related to the interface between the NDIS and the criminal justice system, particularly the distinction between 'criminogenic-related supports' and 'disability-related supports'
- where such issues cannot be resolved, agree on a mechanism for joint-funding of individual supports.

Proposed amendments to the National Disability Insurance Scheme (Supports for Participants) Rules 2013 (Cth) and the APTOS should be agreed by National Cabinet.²³⁶

Recommendation 8.18 Timing of NDIA-funded transition supports

The National Disability Insurance Agency (NDIA) should issue guidelines stating expressly that a release date is not a precondition for approving funding for transitional supports for participants in custody. The NDIA's Justice Operational Guidelines and internal practice guides should be amended to make this clear.²³⁷

Recommendation 8.17 will be subject to further consideration by the Australian, state and territory governments²³⁸ and recommendation 8.18 has been accepted by the Australian Government, which has committed to:

establish a publicly available framework that clearly articulates how the NDIS and other service systems will work together, supporting people entering custody and transitioning back to the community.²³⁹

Data, research, and evaluation

Previous reports have recommended improving data collection, monitoring and reporting to support ongoing improvements to policies and programs, and the delivery of evidence-based services.

This includes recommendations to collect information on and monitor:

- The number of people with disability, including cognitive disability, in detention as well as the criminal justice system more broadly.²⁴⁰ This could include desegregated data on the type of disability, support needs, gender, age, and whether people identify as Aboriginal and Torres Strait Islander or are from a culturally and linguistically diverse background.²⁴¹

²³⁶ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023, p. 25.

²³⁷ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023, p. 26.

²³⁸ Australian Government, *Australian Government response to the Disability Royal Commission*, 2024, p. 174.

²³⁹ Australian Government, *Australian Government response to the Disability Royal Commission*, 2024, p. 175.

²⁴⁰ Australian Human Rights Commission, *Equal before the law: Towards disability justice strategies*, 2014.

²⁴¹ Human Rights Watch, *'I needed help, instead I was punished': Abuse and neglect of prisoners with disabilities in Australia*, 2018.



- The provision of adjustments and supports.²⁴²
- The use of restrictive practices for people with disability in justice settings, including seclusion.²⁴³
- Access to mental health care in prisons, including for people with disability and for Aboriginal and Torres Strait Islander peoples.²⁴⁴

Staff recruitment and training

Previous recommendations have also identified opportunities to better support staff and improve their skills in engaging with people with disability.

This has included recommendations relating to the development of training or resources focusing on topics including:

- disability and intersectional experiences of disability, gender and violence,²⁴⁵ and complex trauma;²⁴⁶
- attitudes towards people with disability;²⁴⁷
- the rights of people with cognitive disability to make their own decisions, including through supported decision making where needed;²⁴⁸
- how to engage effectively with people with cognitive disability;²⁴⁹
- the types of adjustments that can be made for prisoners with disability;²⁵⁰ and
- cultural competency.²⁵¹

It was noted that staff should receive training regarding disability both as part of their induction training, as well as on an ongoing basis.²⁵²

It has also been recommended that the information and resources being developed should be created by, or in consultation with, people with disability and representative organisations, including Aboriginal and Torres Strait Islander people with disability and relevant peak bodies.²⁵³

In addition to training, it has also been suggested that the ability to work with a range of people, including people with cognitive disability, should be considered as a component of the recruitment process for QCS officers, and that the ratio of prisoners to staff should be reduced.²⁵⁴

²⁴² Australian Human Rights Commission, *Equal before the law: Towards disability justice strategies*, 2014.

²⁴³ Human Rights Watch, *'I needed help, instead I was punished': Abuse and neglect of prisoners with disabilities in Australia*, 2018; Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, *'Enabling autonomy and access'*, *Final report*, volume 6, 2023.

²⁴⁴ Human Rights Watch, *'I needed help, instead I was punished': Abuse and neglect of prisoners with disabilities in Australia*, 2018.

²⁴⁵ Australian Human Rights Commission, *Equal before the law: Towards disability justice strategies*, 2014.

²⁴⁶ K Ellem, L Dowse, S Rowe, L Holland, J Cullin, M Parker, and C Henderson, *Final report: Insights from people with lived experience of disability and the justice system*, report to the Department of Justice and Attorney General, Queensland, 2023.

²⁴⁷ Australian Human Rights Commission, *Equal before the law: Towards disability justice strategies*, 2014; Human Rights Watch, *'I needed help, instead I was punished': Abuse and neglect of prisoners with disabilities in Australia*, 2018.

²⁴⁸ Australian Human Rights Commission, *Equal before the law: Towards disability justice strategies*, 2014.

²⁴⁹ Human Rights Watch, *'I needed help, instead I was punished': Abuse and neglect of prisoners with disabilities in Australia*, 2018; Queensland Advocacy Incorporated (QAI), *dis-abled Justice: Reforms to justice for persons with disability in Queensland*, QAI, 2015; Synapse and The Hopkins Centre, Griffith University, *Assessing the disability needs of Indigenous Prisoners (ADNIP)*, ADNIP final summary report, 2021.

²⁵⁰ Anti-Discrimination Commission Queensland, *Women in prison 2019, A human rights consultation report*, 2019.

²⁵¹ Synapse and The Hopkins Centre, Griffith University, *Assessing the disability needs of Indigenous Prisoners (ADNIP)*, ADNIP final summary report, 2021.

²⁵² Human Rights Watch, *'I needed help, instead I was punished': Abuse and neglect of prisoners with disabilities in Australia*, 2018.

²⁵³ Human Rights Watch, *'I needed help, instead I was punished': Abuse and neglect of prisoners with disabilities in Australia*, 2018.

²⁵⁴ Human Rights Watch, *'I needed help, instead I was punished': Abuse and neglect of prisoners with disabilities in Australia*, 2018



OPCAT

A number of reports have made recommendations relating to OPCAT, including that the Australian Government and State and Territory governments should ensure that it is fully implemented.²⁵⁵

It has also been recommended that governments should engage with people with disability and their representative organisations to guide this implementation.²⁵⁶

In its final report, the Disability Royal Commission recommended a 'disability inclusive approach to implementing OPCAT',²⁵⁷ including that:

National Preventive Mechanism (NPM) bodies in all Australian jurisdictions should implement their functions in a disability-inclusive way by:

- enabling people with disability in places of detention to share information and experiences with the NPM using a variety of communication forms
- ensuring staff participate in ongoing education and training about the Optional Protocol to the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, human rights and issues affecting people with disability in places of detention
- ensuring staff conducting NPM inspections have the skills and experience to provide reasonable adjustments, communication supports and supported decision-making to people with disability when required
- involving people with disability in the inspection of places of detention
- collecting and publishing data about people with disability in places of detention, aligned with disability inspection standards.²⁵⁸

This recommendation, which is a joint recommendation for the Australian Government as well as state and territory governments, was accepted in principle by the Australian Government, Australian Capital Territory, Northern Territory, and Tasmanian Governments.²⁵⁹ The Queensland, New South Wales, South Australian, Victorian and Western Australian Governments indicated that this recommendation would be subject to further consideration.²⁶⁰

The provision of culturally appropriate services

Previous reports have highlighted ways in which supports and services provided to people in custody could be made more culturally appropriate, particularly for Aboriginal and Torres Strait Islander peoples.

These recommendations have included:

- Ensuring access to culturally appropriate assessment and support services,²⁶¹ and engaging Aboriginal and Torres Strait Islander organisations to undertake these assessments.²⁶²
- Engaging Aboriginal and Torres Strait Islander-led organisations to provide culturally appropriate support to Aboriginal and Torres Strait Islander peoples with disability in prison.²⁶³

²⁵⁵ See for example Australian Human Rights Commission, *Road map to OPCAT compliance*, 2022; Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Independent oversight and complain mechanisms', *Final report*, volume 11, 2023; Human Rights Watch, *'I needed help, instead I was punished': Abuse and neglect of prisoners with disabilities in Australia*, 2018.

²⁵⁶ Human Rights Watch, *'I needed help, instead I was punished': Abuse and neglect of prisoners with disabilities in Australia*, 2018

²⁵⁷ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Independent oversight and complain mechanisms', *Final report*, volume 11, 2023, p. 15.

²⁵⁸ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Independent oversight and complain mechanisms', *Final report*, volume 11, 2023, p. 15.

²⁵⁹ Australian Government, *Australian Government response to the Disability Royal Commission*, 2024.

²⁶⁰ Australian Government, *Australian Government response to the Disability Royal Commission*, 2024.

²⁶¹ Australian Human Rights Commission, *Equal before the law: Towards disability justice strategies*, 2014.

²⁶² Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'Criminal justice and people with disability', *Final report*, volume 8, 2023.

²⁶³ Human Rights Watch, *'I needed help, instead I was punished': Abuse and neglect of prisoners with disabilities in Australia*, 2018.



- Recruiting more Aboriginal and Torres Strait Islander staff, including in prisons and community corrections, who can provide culturally appropriate services.²⁶⁴
- Engaging with local Aboriginal and Torres Strait Islander communities to 'inform the development of training materials and processes to capture the nuances of local cultures.'²⁶⁵
- Reviewing the effectiveness of current strategies aiming to ensure the cultural safety of Aboriginal and Torres Strait Islander peoples in prisons, and other criminal justice settings, with the review to be made publicly available.²⁶⁶

Critically, it is widely agreed that any reform to improve the cultural appropriateness of services and the corrective services system must be developed in partnership with Aboriginal and Torres Strait Islander peoples.

The use of isolation and seclusion

The authors of a number of previous reports have discussed procedures used in corrective services that they believe should be discontinued.

For example, several reports have called for the elimination of the use of isolation and solitary confinement, including for people with cognitive disability.²⁶⁷

A report by researchers from the University of Queensland and the Prisoners' Legal Service further recommended:

2. That the *Corrective Services Act 2006* (Qld) be amended to:
 - a. require that prisoners receive a comprehensive mental health evaluation by an external mental health professional within 24 hours of a decision to separate them from the general prison population;
 - b. mandate that no prisoner be held in solitary confinement within 60 days of their release date;
 - c. require that correctional authorities apply to a court for authority to separate a prisoner from the general prison population for more than 48 hours.
3. That Queensland Corrective Services immediately commence a process for undertaking meaningful engagement with relevant non-government organisations about solitary confinement reform.²⁶⁸

Infrastructure

The Human Rights Watch report that has been referenced throughout this paper highlighted the role of the built environment in providing equal access to people with disability. It recommended that the design of any new prisons, and the renovation of existing prisons, consider accessibility and be based on the principles of universal design.²⁶⁹ It also recommended that any new prisons be situated in locations that are easily accessible to prisoners' visitors and medical professionals.

²⁶⁴ Queensland Advocacy Incorporated (QAI), *dis-abled Justice: Reforms to justice for persons with disability in Queensland*, QAI, 2015; Synapse and The Hopkins Centre, Griffith University, *Assessing the disability needs of Indigenous Prisoners (ADNIP)*, ADNIP final summary report, 2021.

²⁶⁵ Synapse and The Hopkins Centre, Griffith University, *Assessing the disability needs of Indigenous Prisoners (ADNIP)*, ADNIP final summary report, 2021, p. 29.

²⁶⁶ Commonwealth Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 'First Nations people with disability', *Final report*, volume 9, 2023.

²⁶⁷ Human Rights Watch, *'I needed help, instead I was punished': Abuse and neglect of prisoners with disabilities in Australia*, 2018; K Ellem, L Dowse, S Rowe, L Holland, J Cullin, M Parker, and C Henderson, *Final report: Insights from people with lived experience of disability and the justice system*, report to the Department of Justice and Attorney General, Queensland, 2023; T Walsh, H Blaber, C Smith, L Cornwell and K Blake, *Legal perspectives on solitary confinement in Queensland*, The University of Queensland and Prisoners' Legal Service, 2020.

²⁶⁸ T Walsh, H Blaber, C Smith, L Cornwell and K Blake, *Legal perspectives on solitary confinement in Queensland*, The University of Queensland and Prisoners' Legal Service, 2020, p. 90.

²⁶⁹ Human Rights Watch, *'I needed help, instead I was punished': Abuse and neglect of prisoners with disabilities in Australia*, 2018.



Support for people returning to the community

A number of previous reports have made recommendations about the types of support that could assist people to return safely to the community, including:

- The development of a model for a specialised wrap-around service for prisoners with cognitive disability who are returning to the community.²⁷⁰
- The development of a community-based service available across all of Queensland for people with disability who have experienced violence, or are perpetrators of domestic violence.²⁷¹
- Increasing the availability of step-down accommodation and supported independent living.²⁷²
- Improving the referral system, both for those who are pre-release and post-release.²⁷³
- Providing accessible information about available community services to assist with pre-release planning for people with disability.²⁷⁴
- The expansion of re-entry services to 'ensure that all prisoners have access to the services, including specialty services to assist remandees and short sentenced prisoners.'²⁷⁵
- Earlier engagement of key stakeholders during the process of transition planning.²⁷⁶

Key questions:

1. Are current cognitive disability screening processes adequate for adults entering detention?
2. Do adults with cognitive disability in detention have appropriate access to disability, mental health and general health services and support?
3. How might current rehabilitation, education and training offerings be improved for adults with cognitive disability who are in detention?
4. Is the treatment of adults with cognitive disability who are in detention adequately monitored?
5. Are specific initiatives required to address the treatment and rehabilitation prospects of First Nations adults with cognitive disability who are in detention?
6. Are current community-based correction order requirements (e.g., Probation, Community Service, Court/Board Ordered Parole) and services suitably adapted for adults with cognitive disability?

²⁷⁰ K Ellem, L Dowse, S Rowe, L Holland, J Cullin, M Parker, and C Henderson, *Final report: Insights from people with lived experience of disability and the justice system*, report to the Department of Justice and Attorney General, Queensland, 2023.

²⁷¹ K Ellem, L Dowse, S Rowe, L Holland, J Cullin, M Parker, and C Henderson, *Final report: Insights from people with lived experience of disability and the justice system*, report to the Department of Justice and Attorney General, Queensland, 2023.

²⁷² K Ellem, L Dowse, S Rowe, L Holland, J Cullin, M Parker, and C Henderson, *Final report: Insights from people with lived experience of disability and the justice system*, report to the Department of Justice and Attorney General, Queensland, 2023.

²⁷³ K Ellem, L Dowse, S Rowe, L Holland, J Cullin, M Parker, and C Henderson, *Final report: Insights from people with lived experience of disability and the justice system*, report to the Department of Justice and Attorney General, Queensland, 2023.

²⁷⁴ K Ellem, L Dowse, S Rowe, L Holland, J Cullin, M Parker, and C Henderson, *Final report: Insights from people with lived experience of disability and the justice system*, report to the Department of Justice and Attorney General, Queensland, 2023.

²⁷⁵ W Sofronoff, *Queensland Parole System Review*, Final Report, 2016, p. 27.

²⁷⁶ Synapse and The Hopkins Centre, Griffith University, *Assessing the disability needs of Indigenous Prisoners (ADNIP)*, ADNIP final summary report, 2021.



Appendix - Key legislation and policies

Queensland Corrective Services

Queensland Corrective Services (QCS) is the agency responsible for the management of prisoners in custodial facilities and the supervision and rehabilitation of offenders in the community.²⁷⁷ The agency manages corrective services facilities, and the programs delivered within them, as well as community-based services such as parole, probation and community service.

The purpose of QCS is to contribute to 'community safety and crime prevention through humane containment, supervision and rehabilitation of offenders.'²⁷⁸

An overview of the relevant legislation and policies of the QCS as they relate to people with disability is detailed below.

Corrective Services Act 2006 (Qld)

The *Corrective Services Act 2006*²⁷⁹ includes provisions that set out how QCS is to conduct its functions. The Act incorporates how prisoners are managed, including their security classifications, placement, discipline, care and rehabilitation, and rules around parole.

The Act includes an acknowledgement of the needs of people with disability, however this acknowledgement, and measures to support these needs, do not appear to be addressed consistently throughout the legislation.

Included in the Act's purpose is the recognition of the 'special needs' of an offender, taking into account 'any disability' they have.²⁸⁰ The concept of 'special needs' is not restricted to disability, and includes needs related to age, sex or cultural background.²⁸¹ The Act also includes other references to particular needs that a prisoner with disability may have, such as being illiterate, and outlines that such prisoners need to be informed of their entitlements and duties under the legislation in a way that the prisoner can understand.²⁸² The Act requires that offenders' special needs be taken into account in administrative procedures,²⁸³ such as the Operational Practice Directive (discussed further below).

Although the above provisions appear to acknowledge disability and certain issues that a prisoner may experience, the legislation itself does not provide guidance as to how a disability is to be accommodated.

For example, the Act allows for a QCS officer to give directions to prisoners, as the officer reasonably believes is necessary, for purposes such as the welfare or safe custody of the prisoner or other prisoners, in order to ensure security and the good order of the corrective services facility.²⁸⁴ Such directions can be given in writing or orally.²⁸⁵ However, there is no requirement in the provision that the officer must ensure that the directions are understood or acknowledged by the prisoner. If a prisoner has a cognitive disability and the direction is not provided in a way that can be understood, or if a direction is given in writing and/or orally and a prisoner cannot read and/or has

²⁷⁷ Queensland Corrective Services, *About Queensland Corrective Services*, <<https://corrections.qld.gov.au/about-queensland-corrective-services/>>.

²⁷⁸ *Corrective Services Act 2006* (Qld) s 3(1).

²⁷⁹ *Corrective Services Act 2006* (Qld).

²⁸⁰ *Corrective Services Act 2006* (Qld) s 3(3).

²⁸¹ *Corrective Services Act 2006* (Qld) sch 4.

²⁸² *Corrective Services Act 2006* (Qld) s 11(2).

²⁸³ *Corrective Services Act 2006* (Qld) s 265(4).

²⁸⁴ *Corrective Services Act 2006* (Qld) s 20(1).

²⁸⁵ *Corrective Services Act 2006* (Qld) s 20(2).



a hearing impairment, then this could result in a breach of discipline and the prisoner could be considered to be 'contravening' a direction that they never understood.²⁸⁶

However, when deciding whether to start breach of discipline proceedings against a prisoner, a corrective services officer may have regard to such factors as the trivial nature of the breach, the circumstances surrounding the breach, or the prisoners' previous conduct.²⁸⁷ If the corrective services officer decides to start proceedings, the officer must decide whether the breach was major or minor, taking into consideration the above factors.²⁸⁸ The Breaches of Discipline Custodial Operations Practice Directive provides further information regarding discipline proceedings, and is discussed in further detail below.

Further, although, as noted, disability and illiteracy are specifically acknowledged in the legislation, many provisions contradict this acknowledgement. Many processes and procedures require a prisoner to either make applications or receive information 'in writing' with no other form of communication being permitted under the Act.

Actions that prisoners can only take if they do so 'in writing' (with no other form of communication permitted) include:

- Requesting reconsideration of a decision made to increase the prisoner's security classification (which can involve measures taken to protect the prisoner);²⁸⁹
- Requesting to be examined or treated by a health practitioner of the prisoner's choice;²⁹⁰
- Beginning the process of getting married or entering into a civil partnership;²⁹¹
- Asking for a review of a safety order (which can authorise a prisoner to be held in seclusion);²⁹²
- Asking for a review of a maximum security order (which results in a prisoner being held in seclusion in maximum security);²⁹³
- Asking for a review of a decision to transfer a prisoner to a work camp, another corrective services facility, a health facility or a personal care facility;²⁹⁴
- Applying to remain in the corrective services facility after the prisoner's discharge or release day;²⁹⁵ and
- Making submissions regarding when a restricted prisoner declaration (where a prisoner convicted of certain serious offences cannot apply for parole) is being considered.²⁹⁶

Before making a maximum security order, a health practitioner must be notified if the prisoner has a mental health condition or intellectual disability.²⁹⁷ Regardless of mental health or disability status, a maximum security prisoner is to be examined by a health practitioner when the order takes effect, at least every 28 days during the order, and after the order ends.²⁹⁸

While 'special needs' are acknowledged in the purpose of the Act, they are only rarely explicitly considered in other sections of the Act.

Under the legislation, a prisoner's 'special needs' are explicitly considered in the following situations:

- The terms and conditions associated with personal calls by prisoners in facilities;²⁹⁹
- When considering what conditions apply to a prisoner's safety order;³⁰⁰

²⁸⁶ *Corrective Services Regulation 2017* (Qld) s 5(a).

²⁸⁷ *Corrective Services Act 2006* (Qld) s 113(2).

²⁸⁸ *Corrective Services Act 2006* (Qld) s 113(4).

²⁸⁹ *Corrective Services Act 2006* (Qld) s 16(2).

²⁹⁰ *Corrective Services Act 2006* (Qld) s 22(1).

²⁹¹ *Corrective Services Act 2006* (Qld) ss 26(1), 26A(1).

²⁹² *Corrective Services Act 2006* (Qld) s 56.

²⁹³ *Corrective Services Act 2006* (Qld) s 63.

²⁹⁴ *Corrective Services Act 2006* (Qld) s 71.

²⁹⁵ *Corrective Services Act 2006* (Qld) s 111.

²⁹⁶ *Corrective Services Act 2006* (Qld) s 175G.

²⁹⁷ *Corrective Services Regulation 2017* (Qld) s 16.

²⁹⁸ *Corrective Services Act 2006* (Qld) s 64.

²⁹⁹ *Corrective Services Act 2006* (Qld) s 51(2)(b).

³⁰⁰ *Corrective Services Act 2006* (Qld) s 53(3); *Corrective Services Regulation 2017* (Qld) s 7(b).



- When considering an order for a prisoner to undergo separate confinement;³⁰¹
- During an appearance before the parole board, where a prisoner may be able to appear personally instead of by phone or videoconference;³⁰²
- When administrative procedures for the management of corrective services are being made;³⁰³ and
- When establishing or facilitating programs for prisoners.³⁰⁴

There also appear to be no provisions requiring consideration of the support needs of prisoners with cognitive disability during other critical points of a person's imprisonment, such as assisting with their discharge from prison,³⁰⁵ when being transferred to another prison, health or personal care facility,³⁰⁶ or when considering whether a breach of discipline occurred.³⁰⁷

Separate to the concept of 'special needs' in the legislation, the Act also includes two mentions of the concept of a prisoner with 'impaired mental capacity' (which is not defined in the Act). This arises in the context of a breach of discipline proceedings, where, during the initial proceedings for a breach or a review of a decision regarding a breach, a prisoner who is 'disadvantaged by language barriers or impaired mental capacity' can be 'helped by someone from the corrective services facility'.³⁰⁸ During these proceedings, the prisoner is not permitted to have any legal or other representation.³⁰⁹

There is a further mention of 'disability' in the legislation, where among other factors, appropriate provision for the 'accommodation and access requirements of older prisoners and prisoners with disabilities' is to be made when establishing new prisons.³¹⁰ This section also requires new prisons to provide facilities for prisoners 'experiencing psychological crises', spaces that promote communication and the cultural heritage of Aboriginal and Torres Strait Islander prisoners, suitable areas for children and their parents, and videoconferencing technology.³¹¹

Another term that may relate to a person's disability is found in relation to the conduct of a search of a prisoner, including of their person.³¹² A prisoner's 'special or diverse needs' must be taken into account if the prisoner requests a modification to the usual search process or the taking of a urine test sample.³¹³ This phrase is not otherwise defined in the legislation, however an example is provided in the section outlining that 'needs' in this context includes 'disability'.³¹⁴

Parole

A prisoner can access approved parole when they reach their parole eligibility date,³¹⁵ and can apply up to 180 days before this date to the Parole Board (on the appropriate form) for it to be granted.³¹⁶ There are circumstances where a prisoner cannot apply for a parole order, such as if they have been declared a restricted prisoner or if they are subject to the 'no body-no parole' rule.³¹⁷

A person released on parole is still considered to be serving their sentence of imprisonment although they are residing in the community rather than in a correctional facility.³¹⁸

³⁰¹ *Corrective Services Act 2006* (Qld) s 121(1)(b).

³⁰² *Corrective Services Act 2006* (Qld) s 189.

³⁰³ *Corrective Services Act 2006* (Qld) s 265(4).

³⁰⁴ *Corrective Services Act 2006* (Qld) s 266(2).

³⁰⁵ *Corrective Services Act 2006* (Qld) s 108.

³⁰⁶ *Corrective Services Act 2006* (Qld) s 68.

³⁰⁷ *Corrective Services Act 2006* (Qld) s 116.

³⁰⁸ *Corrective Services Act 2006* (Qld) s 116(6), 119(5).

³⁰⁹ *Corrective Services Act 2006* (Qld) s 116(5), 119(4).

³¹⁰ *Corrective Services Act 2006* (Qld) s 150.

³¹¹ *Corrective Services Act 2006* (Qld) s 150.

³¹² *Corrective Services Act 2006* (Qld) s 39A(2).

³¹³ *Corrective Services Regulations 2017* (Qld) s 8B(1).

³¹⁴ *Corrective Services Regulations 2017* (Qld) s 8B(1).

³¹⁵ *Corrective Services Act 2006* (Qld) s 180(1).

³¹⁶ *Corrective Services Act 2006* (Qld) s 180.

³¹⁷ *Corrective Services Act 2006* (Qld) s 180(2).

³¹⁸ *Corrective Services Act 2006* (Qld) s 214.



The Parole Board makes decisions regarding parole orders,³¹⁹ including whether to grant parole to those eligible, and to suspend or cancel parole in certain circumstances.

The Board utilises a Decision-Making Manual to assist with this process. The most recent version of this manual (2021) is currently under review.

A set of Ministerial guiding principles, which provide 'guidelines about policies to assist the Parole Board Queensland',³²⁰ have recently been updated and were published by the Minister for Youth Justice and Victim Support, Minister for Corrective Services (The Hon. Laura Gerber MP) on 21 December 2024.

The guiding principles provide, to the Queensland Parole Board, 'guidance on a range of topics including suitability for parole, disclosure of material to prisoners, factors that may be considered, and the contravention of parole orders, suspension and cancellation of parole orders.'³²¹

The guiding principles note that the highest priority for the Board 'should always be the safety of the community'³²² and advise that the Board 'should consider whether there is an unacceptable risk to the community if the prisoner is released to parole; and whether the risk to the community would be greater if the prisoner does not spend a period of time on parole under supervision prior to fulltime completion of their prison sentence'.³²³

When assessing a prisoner's suitability for parole, the Board is advised to consider a range of factors including:

- a) the prisoner's prior criminal history and any patterns of offending;
- b) the likelihood of the prisoner committing further offences;
- c) whether there are any other circumstances that are likely to increase the risk the prisoner presents to the community;
- d) whether the prisoner has been convicted of a sexual offence or serious violent offence or any of the offences listed in section 234 (3) of the Act;
- e) the recommendation for parole, parole eligibility date, or any recommendation or comments of the sentencing court;
- f) the prisoner's cooperation with the authorities both in securing the conviction of others and preservation of good order within prison;
- g) any medical, psychological, behavioural or risk assessment report relating to the prisoner's application for parole;
- h) any submissions made under section 188 of the Act by an eligible person;
- i) the prisoner's compliance with any other previous grant of parole or leave of absence;
- j) whether the prisoner has access to supports or services that may reduce the risk the prisoner presents to the community;
- k) and recommended rehabilitation programs or interventions and the prisoner's progress in addressing the recommendations.³²⁴

³¹⁹ *Corrective Services Act 2006* (Qld) s 217.

³²⁰ Queensland Government, *Ministerial guidelines to the Parole Board Queensland*, (2024), issued by the Hon. Laura Gerber MP, Minister for Corrective Services, Minister for Youth Justice and Victim Support, <<https://pbq.qld.gov.au/parole-in-queensland/ministerial-guidelines/>>, p. 2.

³²¹ Parole Board Queensland, *Purpose and Types of Parole Orders*, <<https://pbq.qld.gov.au/parole-in-queensland/purpose-types-of-parole-orders/>>, 24 June 2020.

³²² Queensland Government, *Ministerial guidelines to the Parole Board Queensland*, (2024), issued by the Hon. Laura Gerber MP, Minister for Corrective Services, Minister for Youth Justice and Victim Support, <<https://pbq.qld.gov.au/parole-in-queensland/ministerial-guidelines/>>, p. 1

³²³ Queensland Government, *Ministerial guidelines to the Parole Board Queensland*, (2024), issued by the Hon. Laura Gerber MP, Minister for Corrective Services, Minister for Youth Justice and Victim Support, <<https://pbq.qld.gov.au/parole-in-queensland/ministerial-guidelines/>>, p. 1.

³²⁴ Queensland Government, *Ministerial guidelines to the Parole Board Queensland*, (2024), issued by the Hon. Laura Gerber MP, Minister for Corrective Services, Minister for Youth Justice and Victim Support, <<https://pbq.qld.gov.au/parole-in-queensland/ministerial-guidelines/>>, pp. 2-3.



A decision to release a prisoner to parole must also take into account:

- a) length of time spent in custody during the current period of imprisonment;
- b) length of time spent in a low security environment or residential accommodation;
- c) any negative institutional behaviour such as assaults and altercations committed against correctional centre staff, and any other behaviour that may pose a risk to the security and good order of a correctional centre or community safety;
- d) intelligence information received from State and Commonwealth agencies;
- e) length of time spent undertaking a work order or performing community service;
- f) any conditions of the parole order intended to enhance supervision of the prisoner and compliance with the order;
- g) appropriate transitional, residential and release plans; and
- h) genuine efforts to undertake available rehabilitation opportunities.³²⁵

The Board is also advised to consider the inclusion of an 'electronic monitoring condition in the parole order for any prisoner granted parole'.³²⁶

Parole is granted subject to certain conditions, some of which are mandatory.

Mandatory conditions include:³²⁷

- being supervised by Corrective Services until the end of the imprisonment term;
- following the instructions of Corrective Services;
- providing test samples if required to do so;
- reporting to, and receiving visits from, Corrective Services;
- notifying Corrective Services within 48 hours of any change of address or work; and
- not committing any further offences.

Other conditions include things that the Parole Board consider necessary to ensure the prisoner's good conduct or to prevent the prisoner from committing another offence.³²⁸

Exceptional circumstances parole

Most prisoners can apply for 'exceptional circumstances parole' at any time.

To be released from a facility on exceptional circumstances parole, the Parole Board must be satisfied that:

- (a) the prisoner, as a result of a diagnosed disease, illness or medical condition—
 - (i) is in imminent danger of dying and is not physically able to cause harm to another person;
 - or
 - (ii) is incapacitated to the extent the prisoner is not physically able to cause harm to another person; and
- (b) the prisoner has demonstrated that the prisoner does not pose an unacceptable risk to the public; and
- (c) that the making of the parole order is justified in the circumstances.³²⁹

³²⁵ Queensland Government, *Ministerial guidelines to the Parole Board Queensland*, (2024), issued by the Hon. Laura Gerber MP, Minister for Corrective Services, Minister for Youth Justice and Victim Support, <<https://pbq.qld.gov.au/parole-in-queensland/ministerial-guidelines/>>, p. 6.

³²⁶ Queensland Government, *Ministerial guidelines to the Parole Board Queensland*, (2024), issued by the Hon. Laura Gerber MP, Minister for Corrective Services, Minister for Youth Justice and Victim Support, <<https://pbq.qld.gov.au/parole-in-queensland/ministerial-guidelines/>>, p. 6.

³²⁷ *Corrective Services Act 2006* (Qld) s 200(1).

³²⁸ *Corrective Services Act 2006* (Qld) s 200(3).

³²⁹ *Corrective Services Act 2006* (Qld) s 176A.



Official visitors

Official visitors are assigned to correctional facilities. Their role includes the investigation of complaints made by prisoners at these facilities, as well as the provision of assistance in reviewing safety and maximum security orders.³³⁰ Prisoners can request to see an official visitor, and the prison must advise the official visitor of this request.³³¹

Custodial Operations Practice Directive

Under the Custodial Operations Practice Directive are a set of policies and guidelines (also called directives) that aim to provide a consistent framework for Corrective Services staff to follow during a prisoner's time in prison. The Practice Directives included under this broader directive cover a wide range of issues and topics from intake through to discharge, security, entitlements and property.³³²

Practice Directives that have specific application to prisoners with disability are detailed below.

At-risk management - At-risk

This directive outlines procedures and guidelines pertaining to the management of prisoners who are at risk of self-harm or suicide.³³³ The directive notes the commitment of Corrective Services to minimising the risk of prisoners self-harming and committing suicide.³³⁴

The directive states that comprehensive suicide prevention activities are employed, including:

- a) staff trained in identifying and responding to suicide and self-harm risk factors, triggers and warning signs;
- b) robust procedures to manage acute risk;
- c) working knowledge of vulnerable prisoner groups;
- d) screening prisoners upon admission for suicide and self-harm and elevated baseline risk or suicide and/or self-harm;
- e) reduction of access to lethal means via infrastructure and environmental controls, such as safer cells;
- f) engagement of specialised mental health supports or services where prisoner needs are complex;
- g) resilience and wellbeing programs that strengthen protective factors and support prisoners in crisis; and
- h) targeted monitoring of vulnerable prisoners who demonstrate a chronic risk or elevated baseline risk of suicide and/or self-harm.³³⁵

Staff involved in the management of prisoners have responsibility in minimising harm and preventing the loss of life by:

- a) completing relevant training about suicide prevention (including cultural awareness training);
 - i. For example, staff must have an understanding of Aboriginal and Torres Strait Islander culture and history and how these factors influence the risk of self-harm or suicide for Aboriginal and Torres Strait Islander prisoners in custody;
- b) being thoroughly familiar with the process of identification and management of "at-risk" prisoners within the corrections environment;
- c) being alert to behaviours that may indicate that a prisoner is at-risk ...;

³³⁰ *Corrective Services Act 2006* (Qld) ss 56, 63, 290.

³³¹ *Corrective Services Act 2006* (Qld) s 289.

³³² Queensland Corrective Services, *Custodial operations Practice Directives* <<https://corrections.qld.gov.au/documents/procedures/custodial-operations-practice-directives/>>.

³³³ Queensland Corrective Services, *Custodial Operations Practice Directive, At-Risk Management, At-Risk*, ver. 09 (12/06/2024).

³³⁴ Queensland Corrective Services, *Custodial Operations Practice Directive, At-Risk Management, At-Risk*, ver. 09 (12/06/2024), p. 4.

³³⁵ Queensland Corrective Services, *Custodial Operations Practice Directive, At-Risk Management, At-Risk*, ver. 09 (12/06/2024), p. 4.



- d) being aware that particular events in a prisoner's life may elicit self-harm, suicide and attempted suicide and [staff] should address any perceived anxiety a prisoner may have in relation to the at-risk management ...;
- e) being aware of individuals and groups who are more vulnerable to at-risk behaviour ...;
- f) having a knowledge and understanding of the responsibilities of officers responding to emergency incidents;
- g) utilising the least intrusive measures possible without compromising the prisoner's wellbeing so as to make it more likely that they will self-report feelings of self-harm and/or suicide;
- h) addressing any perception by the relevant prisoner that the measures taken are punitive rather than therapeutic; and
- i) being aware of prisoners that are considered to be [at] an elevated baseline risk of self-harm and/or suicide and taking prompt action if imminent risk factors are present ...³³⁶

The directive also details various procedures to achieve the above, including:

- Identifying risk, screening and assessment.
- How to manage at-risk prisoners.
- Observations.
- Placement in padded cells.
- Ongoing management.
- Discharging of at-risk prisoners.

Disability (in the form of an intellectual disability/cognitive impairment as well as a psychological/psychiatric disability) is identified in this directive as having specific at-risk management implications.³³⁷

Intellectual disability and psychological/psychosocial factors are also noted in the provisions around screening in the Immediate Risk Needs Assessment (IRNA). This assessment is undertaken with each prisoner at admission by a counsellor, psychologist or allied health clinician, and is designed to identify any immediate risks or needs.³³⁸

Other relevant directives regarding self-harm include the 'Safety Unit'³³⁹ and 'Elevated Baseline Risk'³⁴⁰ directives. There is some discussion of mental health risks and observations included in the Elevated Baseline Risk directive, but not a particular focus on specific issues that may be associated with prisoners with disability.

Breaches of discipline directive

This Practice Directive outlines the procedures and principles that apply to breaches of discipline within corrective services facilities.

If a Corrective Services officer decides to commence a breach process, they are to provide an approved form (Part A of Form 23) concerning the breach of discipline to the prisoner.³⁴¹ At this stage of the process, the directive notes that if a prisoner 'is known to have learning or comprehension difficulties', then the officer must either explain the contents of the form to the prisoner or arrange another 'suitable person' to explain the contents.

The approved form contains information advising prisoners of:

- the right to make submissions in their defence at a hearing;

³³⁶ Queensland Corrective Services, *Custodial Operations Practice Directive, At-Risk Management, At-Risk*, ver. 09 (12/06/2024), pp. 4-5.

³³⁷ Queensland Corrective Services, *Custodial Operations Practice Directive, At-Risk Management, At-Risk*, ver. 09 (12/06/2024), p. 6.

³³⁸ Queensland Corrective Services, *Custodial Operations Practice Directive, At-Risk Management, At-Risk*, ver. 09 (12/06/2024), p. 7.

³³⁹ Queensland Corrective Services, *Custodial Operations Practice Directive, At-Risk Management, Safety Unit*, ver. 06 (23/05/2024).

³⁴⁰ Queensland Corrective Services, *Custodial Operations Practice Directive, At-Risk Management, Elevated Baseline Risk*, ver. 07 (15/02/2024).

³⁴¹ Queensland Corrective Services, *Custodial Operations Practice Directive, Breaches of Discipline*, ver. 06 (19/12/2024), p. 8.



- how they can rely on evidence from other persons within the facility;
- how to obtain the relevant sections of the legislation before the hearing; and
- the particulars of the alleged breach of discipline.

A breach proceeding is adjudicated by a 'deciding officer'.³⁴² As noted previously, a prisoner is not permitted to have any legal representation at a breach proceeding, however they can be assisted by someone from the facility if they are 'disadvantaged by language barriers or impaired capacity'.³⁴³

The deciding officer must also consider 'the capacity of the prisoner to effectively participate and understand what is occurring during the hearing, including any language or comprehension difficulties that may exist', and they must ensure that a strategy for effective participation for such prisoners includes inviting a suitable person to support the prisoner during the hearing.³⁴⁴

A prisoner can request a review of a decision made during a breach proceeding.³⁴⁵ This is conducted by a 'reviewing officer' who is more senior than the initial deciding officer.³⁴⁶ The same procedures and rules for breach proceedings apply in these circumstances, including that a prisoner can be assisted by another person, and that the capacity of the prisoner applying for a review must be considered.³⁴⁷

'Special needs' and 'cognitive considerations' are also to be taken into account when considering whether to impose a penalty when a breach is proven.³⁴⁸

Prisoners of Concern directive

This Practice Directive provides direction for the management of prisoners with 'significant vulnerabilities', considering their individual risks and needs.³⁴⁹

A Prisoner of Concern (PoC) is identified as a prisoner with 'prominent and/or profound factors that significantly impair their functioning, and therefore require greater oversight and monitoring than that of the general prisoner population.'³⁵⁰ Such vulnerable prisoners may require special care, support or protection.

The Directive applies to prisoners who are elderly or have:

- A cognitive impairment or intellectual disability.
- A mental health condition/impairment.
- A medical condition/physical impairment.
- An Elevated Baseline Level Risk (EBLR) of suicide and/or self-harm.³⁵¹

This list is not considered to be exhaustive, and prisoners with these conditions are not necessarily considered a PoC unless it is thought that the factors significantly impact on their everyday activities.³⁵²

³⁴² *Corrective Services Act 2006 (Qld) s 116*; Queensland Corrective Services, *Custodial Operations Practice Directive, Breaches of Discipline*, ver. 06 (19/12/2024), p. 9.

³⁴³ Queensland Corrective Services, *Custodial Operations Practice Directive, Breaches of Discipline*, ver. 06 (19/12/2024), p. 10.

³⁴⁴ Queensland Corrective Services, *Custodial Operations Practice Directive, Breaches of Discipline*, ver. 06 (19/12/2024), p. 10.

³⁴⁵ *Corrective Services Act 2006 (Qld) s 119*; Queensland Corrective Services, *Custodial Operations Practice Directive, Breaches of Discipline*, ver. 06 (19/12/2024), p. 12.

³⁴⁶ *Corrective Services Act 2006 (Qld) s 119*; Queensland Corrective Services, *Custodial Operations Practice Directive, Breaches of Discipline*, ver. 06 (19/12/2024), p. 13.

³⁴⁷ Queensland Corrective Services, *Custodial Operations Practice Directive, Breaches of Discipline*, ver. 06 (19/12/2024), p. 13, 14.

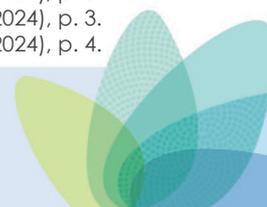
³⁴⁸ Queensland Corrective Services, *Custodial Operations Practice Directive, Breaches of Discipline*, ver. 06 (19/12/2024), p. 11.

³⁴⁹ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoners of Concern*, ver. 08 (06/06/2024), p. 3.

³⁵⁰ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoners of Concern*, ver. 08 (06/06/2024), p. 3.

³⁵¹ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoners of Concern*, ver. 08 (06/06/2024), p. 3.

³⁵² Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoners of Concern*, ver. 08 (06/06/2024), p. 4.



When a staff member of a correctional facility identifies vulnerability factors that may make a prisoner a PoC, they are to notify the Senior Psychologist/Team Leader of Allied Health Services and the correctional supervisor, who will determine if the prisoner is to be placed on the PoC register.³⁵³

The identification of a PoC can occur at any point of a prisoner's sentence, from when they enter the particular facility and receive an Immediate Risk Needs Assessment (IRNA) conducted by a psychologist or correctional counsellor, to any time relevant information becomes known which indicates that the prisoner presents with the relevant vulnerability factors.³⁵⁴

The Senior Psychologist/Team Leader and correctional supervisor make the decision to place a prisoner under PoC procedures and must complete a case note in the prisoner management system, which documents the reasons for the decision. The prisoner then receives the PoC warning flag, and staff must ensure the prisoner is managed in accordance with their individual conditions and vulnerability.³⁵⁵

PoC management strategies note that a PoC may require an enhanced level of care compared to the general prison population, the exact details of which are to be considered on a case by case basis. What care is required can be determined through a review from a multi-disciplinary team or case conference process.³⁵⁶

Additional management strategies for a PoC include:

- regular contact with specialised staff members (such as psychologists, clinicians, counsellors, Cultural Liaison Officers, education officers, health services) depending upon their needs;
- changing the frequency of contact and level of engagement with other services or areas (such as education and mental health services);
- considering the individual circumstances of the prisoner and reviewing their needs in such areas as accommodation, employment, rehabilitation, NDIS linkages, and re-entry services;
- consideration of the development of an Intensive Management Plan (IMP) for the prisoner — this is a multipurpose plan that provides functional supports for prisoners who require a greater level of case management and/or supervision; and
- consideration of specialised accommodation needs.³⁵⁷

Case notes are to be entered into the prison management system with a focus on the prisoner's conduct and behaviour, changes in behaviour or presentation, any signs or concerns regarding health or mental health changes, engagement in activities, and interactions with others.³⁵⁸

Any decisions relating to a PoC and their management strategies must be discussed with the Senior Psychologist/Team Leader and documented in the PoC register with a case note in the prison management system.³⁵⁹

A PoC can be removed from the PoC process if it is determined that they no longer present with the significant vulnerability factors or no longer require management through the PoC process. This is to be reviewed by the Senior Psychologist/Team Leader, correctional supervisor, and/or relevant stakeholders.³⁶⁰

When a PoC is being discharged into the community, the prisoner's vulnerabilities must be considered during transitional and pre-release planning, to ensure referral to re-entry services. If the prisoner is to be subject to a community order, then the relevant information regarding the prisoner is required to be made available to Community Corrections.³⁶¹

³⁵³ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoners of Concern*, ver. 08 (06/06/2024), p. 4.

³⁵⁴ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoners of Concern*, ver. 08 (06/06/2024), p. 5.

³⁵⁵ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoners of Concern*, ver. 08 (06/06/2024), p. 5.

³⁵⁶ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoners of Concern*, ver. 08 (06/06/2024), p. 5.

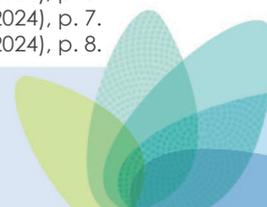
³⁵⁷ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoners of Concern*, ver. 08 (06/06/2024), p. 5.

³⁵⁸ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoners of Concern*, ver. 08 (06/06/2024), p. 5.

³⁵⁹ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoners of Concern*, ver. 08 (06/06/2024), p. 5.

³⁶⁰ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoners of Concern*, ver. 08 (06/06/2024), p. 7.

³⁶¹ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoners of Concern*, ver. 08 (06/06/2024), p. 8.



Records are to be kept regarding each PoC in all correctional centres, which includes relevant personal and case details, any contact with the prisoner, and communications regarding the prisoner with other Corrective Services areas.³⁶²

The Practice Directive also explores the concept of a person's capacity to make decisions, noting that communication with prisoners who may have a 'special need' should occur in a way that is fair and does not create disadvantage.³⁶³

Corrective Services officers are to identify whether a special need exists when they engage with prisoners.

This is to be identified by establishing if the prisoner is:

- capable of understanding what is being asked of them;
- able to communicate an answer or respond to directions;
- capable of understanding what is happening; and
- aware of consequences that can follow from communications.³⁶⁴

The Corrective Services officer should also consider the:

- nature of the condition that gives rise to the prisoner's special need;
- reason the prisoner is being spoken to;
- complexity of information sought from the prisoner;
- nature of the direction or instructions to the prisoner;
- impacts of the consequences for the prisoner; and
- the prisoner's background, including their age, education, language barriers and cultural heritage.³⁶⁵

Various options are suggested in terms of how to improve communication with prisoners in this situation, including the use of:

- interpreters and translators;
- Cultural Liaison Officers or multilingual staff members or persons; and
- AUSLAN interpreters.

Offender pathways directive

This Practice Directive outlines what screening is conducted when a prisoner enters a correctional facility, and discusses the purpose, and intended outcomes, of each screening process.

Immediate Risk Needs Assessment (IRNA)

The IRNA interview is conducted during a prisoner's admission to the facility and identifies any risks, as well as needs resulting from these risks. This is used to inform decisions regarding where a prisoner is placed in a facility, and to develop approaches to mitigate any risks associated with the prisoner's incarceration, including the prisoner's risk of harm to themselves or others. The assessment is conducted by a psychologist, clinician, or correctional counsellor and is recorded in the prisoner management system.³⁶⁶

The IRNA process assists with identifying prisoners with vulnerabilities who may require additional levels of assistance, as well as identifying risks and needs that are not immediate but may require a referral or assistance at a later date.³⁶⁷

³⁶² Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoners of Concern*, ver. 08 (06/06/2024), p. 8.

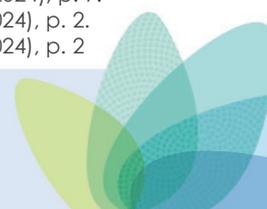
³⁶³ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoners of Concern*, ver. 08 (06/06/2024), p. 9.

³⁶⁴ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoners of Concern*, ver. 08 (06/06/2024), p. 9.

³⁶⁵ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoners of Concern*, ver. 08 (06/06/2024), p. 9.

³⁶⁶ Queensland Corrective Services, *Custodial Operations Practice Directive, Offender Pathways*, ver. 08 (22/04/2024), p. 2.

³⁶⁷ Queensland Corrective Services, *Custodial Operations Practice Directive, Offender Pathways*, ver. 08 (22/04/2024), p. 2.



Information relevant to the immediate management of a prisoner, such as where the prisoner is placed, is to be communicated to the correctional manager, accommodation correctional supervisor and other staff involved in the management of the prisoner. This communication is then recorded on the IRNA.³⁶⁸

Hayes Ability Screening Index (HASI)

The HASI is designed to identify prisoners who may have intellectual difficulties, and is completed by a psychologist, clinician, correctional counsellor, or other suitable staff member. A component of the HASI is incorporated into the IRNA (described above), which indicates whether further assessment using the HASI tool should be administered.³⁶⁹

Prisoners with a lower score on HASI are identified as potentially being vulnerable due to possible intellectual difficulties, with further assessment required to confirm actual cognitive functioning. In these circumstances, a flag of cognitive impairment is placed on the prisoner management system, and consideration is given as to their appropriate placement.³⁷⁰

Risk of Reoffending Screening Tool

Under this Practice Directive, the Risk of Reoffending Screening Tool is administered to determine a general risk of reoffending and to inform eligibility for certain intervention programs. It is completed upon commencement of each 'correctional episode',³⁷¹ meaning each time a prisoner enters the correctional services system.

Warning flag indicators

Any current or historical factors are highlighted on the prisoner management system through warning flag indicators. Relevant warning flag indicators are activated or deactivated by authorised officers. They include:

- high profile – prisoners who are likely to generate significant media interest while under the supervision of Corrective Services; and
- identified risk – prisoners who have a history of escaping or attempting to escape custody, or a history of assaulting officers.³⁷²

Literacy and numeracy assessments

Prisoners sentenced to six months imprisonment or more are assessed to identify any literacy and numeracy needs using the 'ACER Vocational Indicator' assessment. Prisoners serving fewer than six months imprisonment and prisoners on remand can be assessed if it is considered beneficial for certain reasons, such as to support their enrolment in a course. Assessment at this stage is, however, subject to resource availability.³⁷³

Rehabilitation needs assessment

Prisoners serving more than 12 months imprisonment are to be assessed for general rehabilitation needs and have this assessment recorded in the prisoner management system.³⁷⁴

Specialised assessment – Static-99R

The 'Static-99R' assessment is used as a specialised assessment for all male prisoners convicted and currently serving a custodial sentence for sexual offences and with sufficient time in custody to complete a sexual offending program. The assessment assists in determining the prisoner's level of

³⁶⁸ Queensland Corrective Services, *Custodial Operations Practice Directive, Offender Pathways*, ver. 08 (22/04/2024), p. 3.

³⁶⁹ Queensland Corrective Services, *Custodial Operations Practice Directive, Offender Pathways*, ver. 08 (22/04/2024), p. 3.

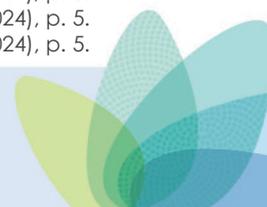
³⁷⁰ Queensland Corrective Services, *Custodial Operations Practice Directive, Offender Pathways*, ver. 08 (22/04/2024), p. 3.

³⁷¹ Queensland Corrective Services, *Custodial Operations Practice Directive, Offender Pathways*, ver. 08 (22/04/2024), p. 3.

³⁷² Queensland Corrective Services, *Custodial Operations Practice Directive, Offender Pathways*, ver. 08 (22/04/2024), p. 5.

³⁷³ Queensland Corrective Services, *Custodial Operations Practice Directive, Offender Pathways*, ver. 08 (22/04/2024), p. 5.

³⁷⁴ Queensland Corrective Services, *Custodial Operations Practice Directive, Offender Pathways*, ver. 08 (22/04/2024), p. 5.



sexual reoffending risk, ensures that they are informed of program requirements, and that the Progression Plan developed (discussed further below) reflects the prisoner's requirements.³⁷⁵

Staff who administer this assessment are required to be accredited through Corrective Services endorsed training.

The Practice Directive also states that the assessment outcomes may have certain limitations depending upon a prisoner's background, and states that the 'Comments' field should be used to record instances where such factors may affect the overall assessment. Assessors are expected to use their 'professional judgement' to determine if the assessment accurately reflects the risk the prisoner presents.

The Practice Directive notes the following potential considerations that may affect assessment:

- First Nations people – that accuracy of the Static-99R is lower for people from a First Nations background.
- Non-Caucasian ethnicities – there may be lower predictive accuracy for certain non-Caucasian groups 'inclusive of Hispanic and Indigenous individuals'.
- Official documentation – The availability of 'official documentation' should be considered to determine 'any known limitations' related to the person.
- Outstanding sexual offending charges – If there are outstanding sexual offences, the assessment may not provide a true representation of risk.
- Stated intention to commit further offences and/or harm – If the prisoner expresses an intent to commit further offences and/or harm, the assessment outcome may not provide a true representation of risk; and
- Other significant considerations – other presenting factors (including 'psychopathy' and 'deviancy') may also mean that the assessment outcome does not provide a true representation of risk.³⁷⁶

Progression plans

Progression plans must be developed and included in the prisoner management system after relevant assessments (such as the IRNA) are completed, and for all prisoners serving more than 12 months in custody.³⁷⁷

The manager of Sentence Management Services is responsible for the development of progression plans, with input from relevant Corrective Services facility staff using appropriate assessment tools.

A draft copy of the progression plan needs to be provided to a prisoner at the commencement of all discussions relating to the development of the plan. Important dates, such as those relating to parole and release, are to be highlighted and discussed. The plan should also include information regarding the prisoner's risks/needs, educational needs, and clearly specified learning objectives.³⁷⁸

Progression plans are reviewed depending on the prisoner's security classification, and after any significant event that may affect the plan. Reviews are to capture relevant factors in relation to the prisoner's circumstances.

The Practice Directive notes that, for a prisoner with an 'active Guardianship and/or Administration Order' flag, the guardian is to be contacted during the review, to participate if required.³⁷⁹

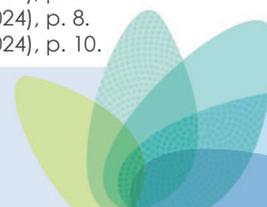
³⁷⁵ Queensland Corrective Services, *Custodial Operations Practice Directive, Offender Pathways*, ver. 08 (22/04/2024), p. 6.

³⁷⁶ Queensland Corrective Services, *Custodial Operations Practice Directive, Offender Pathways*, ver. 08 (22/04/2024), p. 6.

³⁷⁷ Queensland Corrective Services, *Custodial Operations Practice Directive, Offender Pathways*, ver. 08 (22/04/2024), p. 6.

³⁷⁸ Queensland Corrective Services, *Custodial Operations Practice Directive, Offender Pathways*, ver. 08 (22/04/2024), p. 8.

³⁷⁹ Queensland Corrective Services, *Custodial Operations Practice Directive, Offender Pathways*, ver. 08 (22/04/2024), p. 10.



Prisoner behaviour management – Intensive management plans

Intensive management plans (IMP) are developed and implemented for prisoners who have been identified as requiring a higher level of supervision, case management and/or intervention strategies than others.

Correctional officers are responsible for providing referrals to supervisors for prisoners identified as requiring an IMP. Correctional supervisors are then responsible for assessing referrals and forwarding them to the IMP panel, as well as for the implementation of the IMP and for communicating with the prisoner. The IMP panel is responsible for developing the IMP conditions.³⁸⁰

Examples of when an IMP is required include the following:

- cognitive impairment or intellectual disability – if the prisoner's impairment or disability impacts on their interactions with staff or peers, and/or on daily living activities;
- physical impairment – if the prisoner's impairment or significant medical issues impact on their interactions with staff or peers, and/or on daily living activities;
- reintegration purposes – when being reintegrated into the general prisoner population from maximum-security orders;
- behaviour management – having a pattern of problematic behaviour such as bullying/intimidating others or substance abuse; and
- staff assaults – being involved in staff assaults.³⁸¹

When staff consider that a prisoner is vulnerable due to mental health conditions, cognitive impairment/intellectual disability or physical impairment, a case conference is to be organised with the prisoner as soon as possible.

Case conference members include:

- correctional managers;
- correctional supervisors;
- psychology/allied health clinicians and/or counsellors;
- cultural liaison officers (where appropriate); and
- disability support officers (where available and appropriate).

The case conference process assesses an individual's risks and needs, and determines if an IMP is required, including what types of strategies are required to address specific needs.

Following a case conference, any staff member who believes a prisoner requires an IMP can request, through their supervisor, an assessment by an IMP panel.³⁸²

An IMP panel should be representative of all staff relevant to the supervision, case management and interventions associated with the prisoner, and its constitution is determined by the Chief Superintendent (or their nominee) of the facility.

Members can include:

- correctional managers;
- correctional supervisors;
- nurse unit managers;
- intelligence analysts;
- safety and compliance advisers;
- occupational health, safety and environment coordinators;
- psychologists/clinicians; and

³⁸⁰ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoner Behaviour Management, Intensive Management Plans*, ver. 06 (16/05/2024), p. 3.

³⁸¹ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoner Behaviour Management, Intensive Management Plans*, ver. 06 (16/05/2024), p. 4.

³⁸² Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoner Behaviour Management, Intensive Management Plans*, ver. 06 (16/05/2024), p. 5.



- cultural liaison officers (if applicable).³⁸³

The IMP panel employed for prisoners involved in staff assaults must include a safety and compliance adviser and/or occupational health, safety and environment coordinator, while staff directly involved in the incident should be excluded from panel membership.

The prisoner must be provided with an opportunity to participate in the process of IMP development and must acknowledge the purpose and contents of the IMP before it is implemented, with a case note entered into the prisoner management system recording this participation.³⁸⁴

Queensland Health can also be involved in the process of IMP development. Involvement includes activities like obtaining health information from Queensland Health or, if consent is provided, a Queensland Health representative participating in the development and implementation of the IMP.³⁸⁵

Appropriate internal or external service providers should also be engaged if specific needs have been identified that may impact on the prisoner's ability to participate in the IMP process, including:

- cultural or language barriers;
- cognitive impairments;
- intellectual disability; or
- low literacy levels.³⁸⁶

Some examples of service providers include interpreters, guardians, cultural liaison officers, chaplains or transitional service providers. Records of specific needs and the engagement of service providers must be recorded into the prisoner management system.³⁸⁷

The resultant IMP must contain:

- a) purpose of the IMP;
- b) identified target behaviours;
- c) behavioural objectives;
- d) prisoner goals;
- e) supervision, case management and intervention risk mitigation strategies;
- f) summary of a prisoner's progress, if applicable;
- g) review date/s;
- h) panel members' recommendations;
- i) where relevant – any out of cell time restrictions;
- j) Chief Superintendent of a corrective services facility or nominee's comments and approval; and
- k) the prisoner's acknowledgement.³⁸⁸

Once complete, the IMP is approved by the Chief Superintendent of the facility or their nominee.

The prisoner must also be interviewed by a correctional supervisor prior to the implementation of the IMP, where the prisoner is to have explained to them the purpose and content of the IMP. The prisoner then signs the IMP to acknowledge that they understand its content and purpose. If a

³⁸³ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoner Behaviour Management, Intensive Management Plans*, ver. 06 (16/05/2024), p. 6.

³⁸⁴ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoner Behaviour Management, Intensive Management Plans*, ver. 06 (16/05/2024), p. 6.

³⁸⁵ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoner Behaviour Management, Intensive Management Plans*, ver. 06 (16/05/2024), p. 6.

³⁸⁶ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoner Behaviour Management, Intensive Management Plans*, ver. 06 (16/05/2024), p. 6.

³⁸⁷ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoner Behaviour Management, Intensive Management Plans*, ver. 06 (16/05/2024), p. 6.

³⁸⁸ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoner Behaviour Management, Intensive Management Plans*, ver. 06 (16/05/2024), p. 7.



prisoner refuses to sign the IMP, the date and time of the interview is recorded. A copy of the IMP is to be provided to the prisoner, and then recorded in the prisoner's case note.³⁸⁹

Staff responsible for the prisoner are to be briefed regarding the IMP. The IMP does not replace the need for further assessment and planning, and any progression plan recommendations are to be considered in the development of the IMP.

IMPs are reviewed by an IMP panel at least every three months.³⁹⁰

Prisoner entitlements directive – Office of the Public Guardian

The stated purpose of this Practice Directive is to support Corrective Services to collaborate with the Queensland Civil and Administrative Tribunal (QCAT), the Office of the Public Guardian (OPG) and the Public Trustee of Queensland (PTQ) to meet the needs of prisoners under guardianship and/or administration orders.³⁹¹

The Practice Directive provides a brief explanation of the role of QCAT, guardians (including those provided by OPG), and administrators, as well as the concept of decision-making capacity under the guardianship system.³⁹²

If it has already been identified that a prisoner has a guardianship and/or administration order, the prisoner's lack of decision-making capacity for certain matters is to be considered when determining where the prisoner is placed in the facility. If the prisoner has a guardianship/administration history flag, or it is suspected during the admission process that the prisoner may have an appointed guardian or administrator, the senior psychologist or Allied Health team leader is to contact QCAT to determine whether an order is in place.³⁹³

For individuals supervised in the community by Corrective Services, the individual's case manager is responsible for contacting QCAT to obtain this information.³⁹⁴

When a guardianship and/or administration order is confirmed, the 'Guardianship and/or Administration Order' flag is recorded in the prisoner management system.

The following information is to be recorded:

- type of order;
- length of order;
- name and contact details of the guardian;
- date of appointment; and
- what matters the guardian is appointed for.³⁹⁵

If a prisoner has a guardian, the senior psychologist or Allied Health team leader is required to discuss with the guardian:

- their respective obligations;
- how the guardian wishes to undertake their decision-making role;
- how Corrective Services and the guardian are to communicate;

³⁸⁹ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoner Behaviour Management, Intensive Management Plans*, ver. 06 (16/05/2024), p. 7.

³⁹⁰ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoner Behaviour Management, Intensive Management Plans*, ver. 06 (16/05/2024), p. 8.

³⁹¹ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoner Entitlements, Office of the Public Guardian*, ver. 06 (04/07/2024), p. 3.

³⁹² Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoner Entitlements, Office of the Public Guardian*, ver. 06 (04/07/2024), p. 3.

³⁹³ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoner Entitlements, Office of the Public Guardian*, ver. 06 (04/07/2024), p. 4.

³⁹⁴ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoner Entitlements, Office of the Public Guardian*, ver. 06 (04/07/2024), p. 4.

³⁹⁵ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoner Entitlements, Office of the Public Guardian*, ver. 06 (04/07/2024), p. 5.



- any issues that could impact on the guardian's role; and
- any other relevant information the guardian knows regarding the prisoner.³⁹⁶

The Practice Directive notes that if there is an active guardianship/administration flag, and a prisoner is transferred between correctional facilities, OPG is to be notified by email (the Public Guardian is the only guardian mentioned in this regard, not any other person who could be a guardian appointed for the prisoner).³⁹⁷

In instances where the prisoner has the right to take certain actions or appeal decisions, the guardian may need to be involved if they are appointed for relevant matters. The guardian must be advised of relevant developments and be able to act for the prisoner where appropriate.³⁹⁸

This could include arranging for the transition of a prisoner back into the community, including the organisation of the prisoner's proposed housing, and the completion of parole application processes.³⁹⁹

The Practice Directive further notes that under the *Guardianship and Administration Act 2000*, the OPG and PTQ are entitled to information regarding the person for whom they are appointed, and can request Corrective Services to provide that information. Corrective Services is to only provide information that is relevant to the guardianship or administration appointment and information to which the prisoner would have been normally entitled.⁴⁰⁰

Operational Practice Guideline

The Operational Practice Guideline is like the Custodial Operations Practice Directive but is used by Community Corrections as a set of policies and guidelines for the effective supervision of an individual by Corrective Services when in the community rather than in a correctional facility.

Included below are some key points from the guidelines that have been provided by QCS for the purposes of this paper.

Admission and Induction

This guideline sets out the process of admission and induction by Community Corrections for individuals under their supervision. The guideline notes that the admission and induction phase enables the effective supervision of an individual throughout the period of their order, with a quality process ensuring that an individual is aware of their order conditions, the expectations on the individual, and the opportunities available to address offending behaviour.⁴⁰¹

The stated outcomes at the completion of the admission and induction phase are:

- The individual is aware of the conditions of their order, their rights whilst on supervision and the expectations of Community Corrections.
- Any immediate risks and/or needs are identified and addressed.
- The individual's personal details and order details are accurately recorded on the Integrated Offender Management System (IOMS) and the hard copy file.⁴⁰²

³⁹⁶ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoner Entitlements*, Office of the Public Guardian, ver. 06 (04/07/2024), p. 5.

³⁹⁷ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoner Entitlements*, Office of the Public Guardian, ver. 06 (04/07/2024), p. 5.

³⁹⁸ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoner Entitlements*, Office of the Public Guardian, ver. 06 (04/07/2024), p. 6.

³⁹⁹ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoner Entitlements*, Office of the Public Guardian, ver. 06 (04/07/2024), p. 6.

⁴⁰⁰ Queensland Corrective Services, *Custodial Operations Practice Directive, Prisoner Entitlements*, Office of the Public Guardian, ver. 06 (04/07/2024), p. 7.

⁴⁰¹ Queensland Corrective Services, *Operational Practice Guideline, Community Based Orders and Parole Orders, Admission and Induction*, ver. 23 (07/08/2025), p. 2.

⁴⁰² Queensland Corrective Services, *Operational Practice Guideline, Community Based Orders and Parole Orders, Admission and Induction*, ver. 23 (07/08/2025), p. 4.



The guideline then sets out the procedures for admission, induction and interview.

The admission process includes timeframes, IOMS records, entering personal details, checking order details, having a photograph and physical description of the individual on the system, and having a hard copy file of the individual.⁴⁰³

The induction process includes the collection of information from the individual and third parties, and then conducting an immediate risk assessment.⁴⁰⁴

Following this, the procedure for an induction interview is explained, and is stated to be a 'key opportunity to engage the individual and motivate them to comply with their order conditions and address their offending behaviour.'⁴⁰⁵

Adequate time is to be given for the individual to understand their supervision, and consideration is to be given to their personal circumstances including their:

- a) cultural background;
- b) understanding of English;
- c) learning style and level of literacy;
- d) cognitive or intellectual capacity;
- e) physical and/or psychosocial disability;
- f) educational background; and
- g) emotional and physical presentation (e.g. intoxication or distress).⁴⁰⁶

The details of the order are to be explained, such as any conditions that are part of the order. During this process, the Community Corrections officer must ensure the individual's understanding of:

- a) each order condition including additional conditions (where applicable);
- b) action that may be taken in the event an order condition has not been met;
- c) their rights whilst subject to supervision including privacy implications and limits of confidentiality;
- d) the process for making an application for amendment of the order;
- e) the grievance procedure;
- f) the process of supervision including differences across levels of service; and
- g) the role of the officer and the individual in the supervision process.⁴⁰⁷

Further information regarding how an individual can be informed as to when they report next, how court documents are to be obtained by an officer, and how files are allocated to officers complete the guideline.⁴⁰⁸

Case Management

The Case Management guideline sets out the processes by which individuals are managed by Community Corrections while they are being supervised. The guideline states that a key objective is to 'break the cycle of reoffending through humane management and collaborative community partnerships', achieved through 'maintaining quality case management practices that support incremental change.'⁴⁰⁹

⁴⁰³ Queensland Corrective Services, *Operational Practice Guideline, Community Based Orders and Parole Orders, Admission and Induction*, ver. 23 (07/08/2025), pp. 5-16.

⁴⁰⁴ Queensland Corrective Services, *Operational Practice Guideline, Community Based Orders and Parole Orders, Admission and Induction*, ver. 23 (07/08/2025), pp. 17-20.

⁴⁰⁵ Queensland Corrective Services, *Operational Practice Guideline, Community Based Orders and Parole Orders, Admission and Induction*, ver. 23 (07/08/2025), p. 22.

⁴⁰⁶ Queensland Corrective Services, *Operational Practice Guideline, Community Based Orders and Parole Orders, Admission and Induction*, ver. 23 (07/08/2025), p. 22.

⁴⁰⁷ Queensland Corrective Services, *Operational Practice Guideline, Community Based Orders and Parole Orders, Admission and Induction*, ver. 23 (07/08/2025), p. 23.

⁴⁰⁸ Queensland Corrective Services, *Operational Practice Guideline, Community Based Orders and Parole Orders, Admission and Induction*, ver. 23 (07/08/2025), pp. 26-29.

⁴⁰⁹ Queensland Corrective Services, *Operational Practice Guideline, Community Based Orders and Parole Orders, Case Management*, ver. 28 (08/05/2025), p. 2.



The importance of 'tailored assessment' and 'individualised planning' is noted, and that quality case management is to be achieved by applying the principles of this guideline.⁴¹⁰

The stated outcomes of case management are:

- Management of individuals is in accordance with the RNR⁴¹¹ model and upholds continuity of service delivery.
- Management of individuals is person-centred and tailored to their circumstances (e.g. assessed risk/s, responsivity issues, cultural background, gender and ethnicity).
- Case management of individuals is holistic and structured. Case planning considers risks and needs in accordance with an individual's level of service and utilises a multidisciplinary approach that encourages positive behaviour change and promotes accountability.
- An individual's needs, goals and objectives are met through appropriate interventions/ treatment/ activities in accordance with their level of risk and adapted as needed during the individual's case management journey.
- Dynamic risk is considered at each case management contact and management of the individual is adapted to changes in dynamic risk.
- Work effectively with cross-disciplinary teams to reduce recidivism through effective communication, identification of service resources and facilitation of service linkages.
- Decision making regarding the approaches taken with an individual are clear, transparent and documented.
- Information is accurately recorded in a timely manner in IOMS.⁴¹²

The guideline emphasises the importance of reducing recidivism and protecting the community, with case management being the key in achieving this goal, underpinned by the 'Risk, Needs and Responsivity (RNR) model'.⁴¹³ The guideline is designed to provide case managers with information needed for:

- a) case management that is consistent with the RNR model;
- b) a person-centred approach to case management;
- c) structured case management processes;
- d) case management as an intervention;
- e) collaborative case management;
- f) making informed and defensible decisions where practice requires the use of professional discretion/judgement; and
- g) effective recording practices.⁴¹⁴

There are also mandatory requirements that case officers must follow, which are:

1. Apply evidence based, person-centric case management practices that align with RNR.
2. Implement culturally sensitive and trauma informed case management practices.
3. Interventions must primarily target criminogenic needs.
4. Support collaborative case management by engaging in regular and ongoing case discussions with intervention/treatment providers and other relevant stakeholders.
5. Apply professional discretion/judgement responsibly and impartially.
6. Respond to emerging and dynamic risk/s and needs proportionately having due regard to the principles of RNR.
7. Complete the Authority to Collect Information from a Third Party and for Third Party to Release Information to Queensland Corrective Services.
8. Appropriately and accurately record information related to an individual's case management in IOMS.⁴¹⁵

⁴¹⁰ Queensland Corrective Services, *Operational Practice Guideline, Community Based Orders and Parole Orders, Case Management*, ver. 28 (08/05/2025), p. 2.

⁴¹¹ Risk, Needs and Responsivity.

⁴¹² Queensland Corrective Services, *Operational Practice Guideline, Community Based Orders and Parole Orders, Case Management*, ver. 28 (08/05/2025), p. 3.

⁴¹³ Queensland Corrective Services, *Operational Practice Guideline, Community Based Orders and Parole Orders, Case Management*, ver. 28 (08/05/2025), p. 5.

⁴¹⁴ Queensland Corrective Services, *Operational Practice Guideline, Community Based Orders and Parole Orders, Case Management*, ver. 28 (08/05/2025), p. 5.

⁴¹⁵ Queensland Corrective Services, *Operational Practice Guideline, Community Based Orders and Parole Orders, Case Management*, ver. 28 (08/05/2025), p. 6.



Much of the rest of the 64 page guideline is redacted, but some of the headings for the remainder of the guideline include (these are not all of the headings as some headings are also redacted):⁴¹⁶

- Defining Case Management
- Effective Case Management
- Professional Practice
- Risk, Need, Responsivity Model (RNR)
- Being Agents of Change
- Trauma Informed Practice
- Working with Domestic and Family Violence
- Decision Making and Professional Discretion
- Collaborative Case Management
- Case Management Contacts
- Failure to Report
- Recording Case Contacts
- Supervision Phases and Contact
- Diversified Contact Options
- Engagement Plan
- Dynamic Supervision Instrument (DSI)
- Offender Dashboard
- ACUTE-2007
- Lawful Instructions/Reasonable Directions
- Substance Testing
- Curfews.

Regarding disability, information is included under Case Management Contacts, Responsive Case Management, where it is noted that additional provisions of services and/or support may be required for people under case management, and that it is important to consider for people with disability:

- This may include sensory, physical, intellectual, cognitive, psychiatric or neurological impairment.
- Employing case management strategies that are sensitive to the individuals responsivity needs (refer to RNR section of this guideline).
- Seeking advice regarding access to the National Disability Insurance Scheme (NDIS) to support early identification and referral.
- Is there an appointed Adult Guardian?
- Refer to Appendix Meaningful Contact Guide.⁴¹⁷

Meaningful Contact Guide

The Meaningful Contact Guide is an appendix document to the guidelines that is designed to provide guidance to case managers on how to engage in meaningful contact with individuals.

Specific practice tips are provided for:

- First Nations Peoples
- People from Diverse Cultures
- Individuals with Cognitive Impairment
- Individuals with a disability.⁴¹⁸

The guide explains the importance of meaningful contact and the positive impact it has in achieving a successful outcome in the working relationship between a case manager and the individual.⁴¹⁹

⁴¹⁶ Queensland Corrective Services, *Operational Practice Guideline, Community Based Orders and Parole Orders, Case Management*, ver. 28 (08/05/2025), p. 1.

⁴¹⁷ Queensland Corrective Services, *Operational Practice Guideline, Community Based Orders and Parole Orders, Case Management*, ver. 28 (08/05/2025), p. 26.

⁴¹⁸ Queensland Corrective Services, *Operational Practice Guidelines, E2E Case Management, Meaningful Contact Guide*, ver. 01 (05/12/2022), p. 1.

⁴¹⁹ Queensland Corrective Services, *Operational Practice Guidelines, E2E Case Management, Meaningful Contact Guide*, ver. 01 (05/12/2022), p. 1.



While much of the document is redacted, there is a 'Case Management Practice Tip' on 'Communicating Effectively with [an] Individual with a Cognitive Impairment'.⁴²⁰

This includes being aware of:

- cognitive impairment flags in IOMS;
- people with cognitive impairments being more likely to be acquiescent, suggestible and passive;
- various ways in how limitations in cognitive and language development may manifest, including examples such as slower processing and reaction times, limitations in attention, concentration, memory, vocabulary, understanding language and other information;
- various strategies to communicate more effectively, with examples including distraction-free environments, ensuring the person is paying attention, keeping questions short and direct, and other techniques when speaking to an individual that may improve their understanding of the information being communicated.⁴²¹

Referral of Supervised Individuals to the National Disability Insurance Scheme

The Referral of Supervised Individuals to the National Disability Insurance Scheme document is an appendix document that provides general information regarding the NDIS, identifying individuals who may be eligible for NDIS support, and referrals to NDIS Local Area Coordinators.⁴²²

The document first defines what the NDIS is and does, and the general eligibility requirements for the NDIS.⁴²³ Community Corrections staff can refer individuals who may be eligible for NDIS supports to community-based organisations to assist them in making an NDIS application. Community Corrections staff can also link the individual to an appropriate Local Area Coordinator (LAC) who can assist the individual or refer them to the NDIS website.⁴²⁴

Several suggestions are made as to how Community Corrections staff can identify potential NDIS referrals, such as:

- relevant flags on the individuals in the Corrective Services system, such as the NDIS, Cognitive Impairment or Guardianship and/or Administration Order flags;
- pre-sentence reports and psychological reports;
- whether they are on disability support payments;
- engagement plans from their case management;
- sentencing transcripts; and
- contact with family, supports, employers, health care providers or other government agencies.⁴²⁵

Inspector of Detention Services

The *Inspector of Detention Services Act 2022* established the new Inspector of Detention Services in Queensland.⁴²⁶ The Inspector of Detention Services is currently the Queensland Ombudsman and is part of the Queensland Ombudsman's office.⁴²⁷

⁴²⁰ Queensland Corrective Services, *Operational Practice Guidelines, E2E Case Management, Meaningful Contact Guide*, ver. 01 (05/12/2022), p. 4.

⁴²¹ Queensland Corrective Services, *Operational Practice Guidelines, E2E Case Management, Meaningful Contact Guide*, ver. 01 (05/12/2022), p. 5.

⁴²² Queensland Corrective Services, *Operational Practice Guidelines, Referral of Supervised Individuals to the National Disability Insurance Scheme*, ver. 01 (07/08/2025).

⁴²³ Queensland Corrective Services, *Operational Practice Guidelines, Referral of Supervised Individuals to the National Disability Insurance Scheme*, ver. 01 (07/08/2025), p. 1.

⁴²⁴ Queensland Corrective Services, *Operational Practice Guidelines, Referral of Supervised Individuals to the National Disability Insurance Scheme*, ver. 01 (07/08/2025), p. 2.

⁴²⁵ Queensland Corrective Services, *Operational Practice Guidelines, Referral of Supervised Individuals to the National Disability Insurance Scheme*, ver. 01 (07/08/2025), pp. 2-3.

⁴²⁶ *Inspector of Detention Services Act 2022* (Qld).

⁴²⁷ *Inspector of Detention Services Act 2022* (Qld) pt 5.



The Inspector of Detention Services' functions include:

- reviewing and monitoring detention services;
- inspecting places of detention;
- preparing and publishing standards for carrying out inspections; and
- reporting to parliament on any matter relating to the functions of the Inspector.⁴²⁸

The Inspector of Detention Services, in reviewing or inspecting facilities, must have regard to 'the cultural background or vulnerability' of detainees.⁴²⁹

Inspection standards for Queensland prisons

The Inspection Standards for Queensland prisons,⁴³⁰ seek to ensure transparency in what is assessed during inspections, with each standard having a number of indicators that contribute to the Inspector's assessment on how well a standard is achieved.⁴³¹

The standards acknowledge that people in prison are not representative of the broader community in that there is an over-representation of certain vulnerable segments, such as Aboriginal and Torres Strait Islander peoples, people with mental health issues and people with cognitive disability. The standards are designed to recognise the vulnerability and needs of such prisoners, including the need for trauma informed management given the background of many of those in correctional facilities.⁴³²

There are 203 standards in total, and they are based on other inspection standards in Australia such as those that exist in Western Australia, the Australian Capital Territory, New South Wales and Tasmania.⁴³³ The standards are also informed by legislation in Queensland including the *Human Rights Act 2019*, and other relevant international rules and sources.⁴³⁴

Most of the standards are applicable to all prisoners, however some do recognise issues associated with disability.

These include the following standards that are described below:

- **Standard 4** – Prisoners are to receive an appropriate initial health and psychological assessment to identify immediate health problems, needs or risks. Prisoners are to be screened for previously identified or diagnosed disability. Staff are to determine whether further assessment or diagnosis is required, with assessments by appropriate professionals arranged. If disability is identified, reasonable adjustments are to be made and information incorporated into management plans. A prisoner is to have access to all supports and treatment required.
- **Standard 10** – Staff at prisons are to assist prisoners to prepare for their court appearance, and if a prisoner has poor literacy or presents with intellectual or cognitive disabilities, they are to be provided with additional support to access legal representation.
- **Standard 17** – When prisoners are to be placed in solitary confinement, this is only to be undertaken in accordance with the grounds set out by law, as a last resort where there is a demonstrated need. Solitary confinement must be undertaken in the least restrictive way and for the shortest possible time. Staff must consider relevant factors, including disability, with

⁴²⁸ *Inspector of Detention Services Act 2022* (Qld) s 8(1).

⁴²⁹ *Inspector of Detention Services Act 2022* (Qld) s 8(2).

⁴³⁰ Queensland Ombudsman, Inspector of Detention Services, *Inspection standards for Queensland prisons* (August 2023).

⁴³¹ Queensland Ombudsman, Inspector of Detention Services, *Inspection standards for Queensland prisons* (August 2023), p. iii.

⁴³² Queensland Ombudsman, Inspector of Detention Services, *Inspection standards for Queensland prisons* (August 2023), p. iv.

⁴³³ Queensland Ombudsman, Inspector of Detention Services, *Inspection standards for Queensland prisons* (August 2023) p. v.

⁴³⁴ Queensland Ombudsman, Inspector of Detention Services, *Inspection standards for Queensland prisons* (August 2023) p. v.



consultation with health care professionals to occur before prisoners with disability are separated from other prisoners.

- **Standard 18** – When a prisoner is placed in solitary confinement, they are to be treated with respect and dignity, with meaningful opportunities to leave the unit, associate with other prisoners and earn privileges. The prisoner's individual needs, including mental health and disability related needs, sentence management and programs need to continue. Staff who monitor the prisoner are to be appropriately trained and supported to recognise mental health and disability related issues. Strategies must be in place to mitigate the effect of isolation on prisoners and escalate issues where appropriate. Such confinement is not to be used as a management solution for prisoners with mental health issues or disability, with multidisciplinary case reviews to be conducted by qualified staff if there is a solitary confinement order in place for more than 14 days.
- **Standard 26** – Staff and prisoner relationships are to be positive and respectful. Staff are to be trained to appreciate the effect of cultural and life experiences on a prisoner's behaviour, such as trauma, abuse, disability and mental illness, and respond accordingly.
- **Standard 32** – Force is to be used as a last resort for the shortest time and not as punishment. Force must be lawful, necessary and proportionate, safely and humanely applied and subject to rigorous governance. Prisoners with disability and mental health concerns are to have plans that highlight risk factors and include alternative management protocols that reduce the likelihood of restraint techniques being used, along with the use of force.
- **Standard 35** – Prisoners are not to be held in special accommodation or placed in restraints except as a last resort and only when properly authorised. Prisoners with severe mental illness and those at risk of suicide/self-harm should not be held in special accommodation except in clearly documented and authorised exceptional circumstances, and only after consultation with the mental health team.
- **Standard 66** – Prisoners are to provide informed consent for health care and information sharing. If the prisoner does not have decision-making capacity, health staff are to comply with relevant laws and policies in relation to consent, such as consulting with the prisoner's substitute decision-maker.
- **Standard 75** – Prisoners are to have access to mental health services equivalent to those in the community to meet their needs adequately and appropriately, in line with their individual preferences. Effective psychological counselling services are to be available. Prisoners with mental illness are not to be punished for behaviour that is a consequence of their illness. Care plans are to be regularly reviewed with mental health practitioners and include suitable discharge planning for continuity of care. Prisoners under medical or psychiatric treatment can continue this treatment when entering prison. Prisoners can access any required secure forensic mental health care. All prisoners are to receive a summary of their health and referral to a community health care provider of their choice on release.
- **Standard 77** – Staff are to have suitable and culturally appropriate mental health training.
- **Standard 80** – Prisoners with a history of substance misuse are to receive specialised and individualised treatments equivalent to that in the community. Prisoners with complex mental health, substance use and behaviour management challenges are to be supported by a multidisciplinary team who will, in consultation with the prisoner, develop a program of support and treatment.
- **Standard 115** – Prisons are to prepare all prisoners for their release. Prisoners who have continuing health and social care needs, such as disability support and people at risk, are to be assisted to access post-release services.



There are also groups of standards that focus upon certain cohorts of prisoners, including those with disability, in recognition of their overrepresentation in the system and the fact that they are at greater risk in the detention environment.⁴³⁵

Standards 183 to 196 are specific to prisoners with disability and are described below.⁴³⁶

- **Standard 183** – ‘The needs of prisoners with a disability are assessed on admission and specific assistance is provided to support their needs.’
 - The prison is to provide a safe and supportive environment to facilitate the disclosure of any impairments. Screening is to be prompt and occur within 72 hours of reception. Community equivalent assessment tools are to be used to reduce reliance on self-reporting. Care is to be taken to communicate any diagnoses in a way the prisoner can understand. Appropriate information is to be provided to staff and accounted for in the prisoner’s management plans.
- **Standard 184** – ‘Prisoners under legal guardianship are appropriately represented while in prison.’
 - Prisoners under guardianship orders can access their guardian, and staff are trained to identify whether a prisoner is under guardianship, and to contact the substitute decision-maker for relevant decisions. The prison is to have procedures in place to identify when a prisoner has a substitute decision-maker, or when they may need one.
- **Standard 185** – ‘Prisoners with disability feel safe from bullying and victimisation and are supported to integrate within the prison.’
 - Staff and other prisoners are not to mistreat prisoners with disability, with education and training provided to facilitate this environment. Prisoners with disability are to be encouraged and be able to easily report issues regarding mistreatment.
- **Standard 186** – ‘Prisoners with disability can access disability advocacy support.’
 - Access to advocacy is to be the equivalent of what is available in the community. Other forms of complaints beyond written forms must be provided.
- **Standard 187** – ‘Prisoners with disability are integrated within the prison and accommodated safely to support their needs and to positively address risks.’
 - Prisoners who require psychiatric treatment are promptly referred to appropriate mental health services. A prisoner’s disability needs are assessed before they are placed within the prison environment. Prisoners with mobility aids are assessed as to whether they can continue using such aids, and prisoners with mobility limitations are to be placed on ground levels. Conditions in units and cells are to reflect standards for people with disability, with any necessary modifications and adjustments made. There is not to be routine segregation or separation of prisoners with disability.
- **Standard 188** – ‘Disciplinary processes and punishment adequately and respectfully account for a prisoner’s specific impairment.’
 - Prisoners who lack capacity to obey rules due to mental illness or disability are not to be unfairly disciplined. This is to be confirmed before disciplinary processes and procedures are implemented to ensure that outcomes account for the prisoner’s impairments. Advice from appropriately trained health staff is to be sought regarding the prisoner’s participation in disciplinary processes.
 - Behaviour management procedures and practices are to be consistent with positive behaviour support practices for people with disability.

⁴³⁵ Queensland Ombudsman, Inspector of Detention Services, *Inspection standards for Queensland prisons* (August 2023), p. 105.

⁴³⁶ The standards 183 to 196 are sources from pages 105 to 112 of the Inspection Standards for Queensland. The use of quotation marks indicates a direct quote from the standards. All other information is summarised.



- Interpreters are to be permitted, Aboriginal and Torres Strait Islander prisoners are to be permitted to present a defence with a cultural dimension, and prisoners with intellectual disability are to have the option of a support person in any procedure.
- Alternative management options to prevent the need for punishment should be used, along with avoiding any punishment that negatively impacts on a prisoner's disability.
- **Standard 189** – 'Use of force and restraint practices ensure the inherent dignity of prisoners with disability.'
- Use of force or restraint are not to be used when they exacerbate a prisoner's disability. Verbal de-escalation and other instructions are to be delivered to prisoners in a way they can understand. Care plans are to highlight risk factors and alternative management procedures that reduce the likelihood of restraint being used. Only approved restraints for prisoners with disability are to be used, by staff who are trained, and there are to be policies for the use of force and restraints that account for the needs of prisoners with disability. The prisoner's guardian (if any) is to be notified if restraints are used.
- **Standard 190** – 'Prisoners with disability are meaningfully and purposefully involved in a regime that accounts for their individual needs and positively addresses risks.'
- There is to be access to necessary adjustments, aids and technology that facilitate involvement in daily prison activities. Prisoners with disability are not to be routinely excluded from activities.
- Staff are to respectfully and sensitively engage with prisoners with disability, and communication and procedures are to account for the prisoner's impairment.
- Prisoners with disability are to be included in decisions affecting them.
- **Standard 191** – 'The specific health care needs of prisoners with disability are appropriately met.'
- There is to be reasonable access to all necessary treatment and support. Ongoing assessments are to be conducted where impairments are exacerbated through imprisonment. Community equivalent health assessments are to be conducted for prisoners with intellectual disability. Health staff are to be qualified to work with prisoners with disabilities.
- Prisoners with disability have the same rights regarding medical consent as other prisoners, with guardians involved when necessary.
- **Standard 192** – 'Prisoners with disability receive comprehensive and individualised support to meet their needs.'
- Effective policies are in place for prisoners with disability to be treated with dignity and respect, with adequate supports in custody.
- Individual support plans for prisoners with disability are to be developed, implemented and regularly reviewed, with all information relevant to the prisoner's daily management and support needs. Cultural supports are also to be made available.
- Staff are to be trained to effectively and sensitively manage prisoners with disability.
- **Standard 193** – 'The needs of prisoners with disability are understood and they are treated with dignity and respect during all searches.'
- Before any search, prisoners with disability are to be provided with information in a way they can understand, and they are not to be searched more often than any other prisoner.
- Risk assessments are to be conducted, considering the prisoner's disability and whether further supports or aids could assist. Alternative search methods are to be used if undue pain or discomfort is caused.



- **Standard 194** – ‘Prisoners with disability can attend court, medical appointments and other leave of absence activities in person. The transportation used is safe, secure and has regard for the dignity of the prisoner.’
 - Prisoners with disability are not unduly prevented from accessing leaves of absence, with risk assessments conducted individually, and any appropriate resources, aids and vehicles provided.
 - Staff are to be trained to respond to emergencies when in transit.

- **Standard 195** – ‘Prisoners with disability have equitable access to tailored rehabilitative and reparative services and activities to meet their needs.’
 - There is to be consultation regarding rehabilitation and reparation requirements and prisoners are not to be excluded from opportunities due to their disability.
 - The same access to educational, employment and programs as is available to other prisoners is to be offered to prisoners with disability, along with specific opportunities for prisoners with disability, with staff trained to deliver courses and programs to prisoners with disability.

- **Standard 196** – ‘Prisoners with disability are adequately prepared for release, with reasonable and necessary supports in place prior to their release.’
 - Advice and support is to be available, provided in an accessible way, in preparation for release.
 - Equal access should be provided for low security prisons and work camps, with adequate and appropriate supports made available.
 - Adequate transition supports are to be provided, including connections to organisations and services to manage release planning. Support services are also to be assisted to engage with the prisoner regularly to support the transition process.
 - Every effort is to be made to ensure that suitable accommodation that meets the needs of a prisoner with disability is arranged. The prisoner is also to be provided with support on the day of release, such as access to their guardian or other relevant supports as necessary.

Standards 175 to 182 have been specifically developed for older prisoners, with the standards acknowledging the growing cohort of older people in prison.⁴³⁷

These standards require the following:

- Older prisoners’ age-specific needs and risks are identified early so they can be appropriately managed in prison.⁴³⁸
- Older prisoners’ age-related needs are a prioritised consideration in their placement.⁴³⁹
- Older prisoners with age-related health issues are managed respectfully and fairly.⁴⁴⁰
- The regime for older prisoners is purposeful, respectful and allows variation from the primary design aimed at younger prisoners.⁴⁴¹
- Older prisoners receive proactive, compassionate and respectful health care for their age-related needs.⁴⁴²
- Adequate support is provided to older prisoners.⁴⁴³

⁴³⁷ Queensland Ombudsman, Inspector of Detention Services, *Inspection standards for Queensland prisons* (August 2023), p. 100.

⁴³⁸ Queensland Ombudsman, Inspector of Detention Services, *Inspection standards for Queensland prisons* (August 2023) Standard 175.

⁴³⁹ Queensland Ombudsman, Inspector of Detention Services, *Inspection standards for Queensland prisons* (August 2023) Standard 176.

⁴⁴⁰ Queensland Ombudsman, Inspector of Detention Services, *Inspection standards for Queensland prisons* (August 2023) Standard 177.

⁴⁴¹ Queensland Ombudsman, Inspector of Detention Services, *Inspection standards for Queensland prisons* (August 2023) Standard 178.

⁴⁴² Queensland Ombudsman, Inspector of Detention Services, *Inspection standards for Queensland prisons* (August 2023) Standard 179.

⁴⁴³ Queensland Ombudsman, Inspector of Detention Services, *Inspection standards for Queensland prisons* (August 2023) Standard 180.



- Older prisoners have access to appropriate and meaningful education, employment and program opportunities that meet their needs.⁴⁴⁴
- Older prisoners are adequately prepared for their release.⁴⁴⁵

Classified patients

Classified patients are defined under the *Mental Health Act 2016* to be persons in custody (such as a watchhouse, remand or imprisonment)⁴⁴⁶ who require treatment and care at an authorised mental health service (AMHS).⁴⁴⁷

Classified patients can be voluntary or involuntary. Involuntary classified patients are people already under a type of involuntary treatment order under the *Mental Health Act* (such as a treatment authority, forensic order or treatment support order) or a recommendation for assessment (made by a doctor or AMHS practitioner)⁴⁴⁸ to determine whether a treatment authority should be made, and are admitted to the inpatient unit of an AMHS.⁴⁴⁹ A voluntary patient is a person who has consented to treatment and care as an inpatient at an AMHS.⁴⁵⁰

Involuntary classified patients require the consent of the administrator of the AMHS and the custodian (the person in charge of the prison) prior to admission.⁴⁵¹ For patients already under an involuntary treatment order under the *Mental Health Act*, a transfer recommendation is also required.⁴⁵²

Voluntary classified patients also require the consent of an AMHS administrator, the custodian and a transfer recommendation prior to admission.⁴⁵³

Transfer recommendations are made by a doctor or AMHS practitioner, where a recommendation is made for the prisoner to be transported to an inpatient unit of an AMHS to receive treatment and care for their mental illness.⁴⁵⁴ The doctor or AMHS practitioner must be satisfied that it is clinically appropriate for the person to receive treatment and care in an AMHS.⁴⁵⁵ The doctor or AMHS practitioner must tell the person that a transfer recommendation is being made, explain what it is, and then give the person a copy of the recommendation if requested.⁴⁵⁶

An administrator of an AMHS can consent to a classified patient being admitted if the AMHS has the capacity to take the patient and, for an AMHS that is not a high security unit, if admitting the patient will not pose an unreasonable risk to the safety of the person or others.⁴⁵⁷

Custodian consent must be provided unless it is believed that there would be an unreasonable risk to the safety of the prisoner or others, having regard to the security requirements associated with the prisoner.⁴⁵⁸

When a prisoner becomes a classified patient, an authorised doctor under the *Mental Health Act* must explain how the Act applies to the prisoner.⁴⁵⁹

Classified patients can be returned to custody if:

⁴⁴⁴ Queensland Ombudsman, Inspector of Detention Services, *Inspection standards for Queensland prisons* (August 2023) Standard 181.

⁴⁴⁵ Queensland Ombudsman, Inspector of Detention Services, *Inspection standards for Queensland prisons* (August 2023) Standard 182.

⁴⁴⁶ *Mental Health Act 2016* (Qld) s 63.

⁴⁴⁷ *Mental Health Act 2016* (Qld) s 64.

⁴⁴⁸ *Mental Health Act 2016* (Qld) s 36.

⁴⁴⁹ *Mental Health Act 2016* (Qld) s 64(2).

⁴⁵⁰ *Mental Health Act 2016* (Qld) s 64(3).

⁴⁵¹ *Mental Health Act 2016* (Qld) ss 65, 66.

⁴⁵² *Mental Health Act 2016* (Qld) s 66(3)(a).

⁴⁵³ *Mental Health Act 2016* (Qld) s 67.

⁴⁵⁴ *Mental Health Act 2016* (Qld) s 68(2).

⁴⁵⁵ *Mental Health Act 2016* (Qld) s 68(3)(b).

⁴⁵⁶ *Mental Health Act 2016* (Qld) s 68(4).

⁴⁵⁷ *Mental Health Act 2016* (Qld) s 69(3).

⁴⁵⁸ *Mental Health Act 2016* (Qld) s 71.

⁴⁵⁹ *Mental Health Act 2016* (Qld) s 75.



- The person is no longer an involuntary patient and does not provide consent to become a voluntary patient;⁴⁶⁰ or
- It is not clinically appropriate for the person to receive treatment and care for their illness as an inpatient of an AMHS.⁴⁶¹

⁴⁶⁰ *Mental Health Act 2016* (Qld) ss 81, 82.

⁴⁶¹ *Mental Health Act 2016* (Qld) ss 81, 82.

