



YOUTH JUSTICE REFORM SELECT COMMITTEE

Members present:

Ms SL Bolton MP—Chair
Ms JM Bush MP
Mrs LJ Gerber MP (videoconference)
Mr AD Harper MP
Mr JJ McDonald MP
Mr DG Purdie MP
Mr A Tantari MP
Mr MJ Hart MP (videoconference)

Staff present:

Dr A Beem—Committee Secretary
Dr S Dodsworth—Assistant Committee Secretary

PUBLIC BRIEFING—INQUIRY TO EXAMINE ONGOING REFORMS TO THE YOUTH JUSTICE SYSTEM AND SUPPORT FOR VICTIMS OF CRIME

TRANSCRIPT OF PROCEEDINGS

Wednesday, 6 December 2023

Brisbane

WEDNESDAY, 6 DECEMBER 2023

The committee met at 8.59 am.

CHAIR: Good morning, everyone. I declare open this public briefing for the committee's inquiry into youth justice reform in Queensland. The committee is examining ongoing reform to the youth justice system and support for victims of crime. My name is Sandy Bolton, the member for Noosa and chair of the committee. I would like to respectfully acknowledge the traditional custodians of the land on which we meet today and pay our respects to eldest past, present and emerging. We very fortunate to live in a country with two of the oldest continuing cultures in Aboriginal and Torres Strait Islander people, whose lands, winds and waters we all share. With me here today are: Jonty Bush, the member for Cooper and deputy chair; Aaron Harper, the member for Thuringowa; Jim McDonald, the member for Lockyer; Dan Purdie, the member for Ninderry; Adrian Tantari, the member for Hervey Bay; and via videoconference Michael Hart, the member for Burleigh, who is substituting for Laura Gerber, the member for Currumbin.

The purpose of today's proceedings is to assist the committee in its inquiry into youth justice reform in Queensland. This hearing is a proceeding of the Queensland parliament and is subject to the parliament's standing rules and orders. Only the committee and invited witnesses may participate in the proceedings. Witnesses are not required to give evidence under oath or affirmation, but I remind witnesses that intentionally misleading the committee is a serious offence. I also remind members of the public that they may be excluded from the hearing at the discretion of the committee.

I would like to re-state the bipartisan approach that each member has committed to in the undertaking of this important inquiry. As chair, I remind all members that questions put to witnesses must be relevant to the inquiry and that witnesses will be treated reasonably, fairly and respectfully.

These proceedings are being recorded and broadcast live on the parliament's website. Media may be present and are subject to the committee's media rules and the chair's direction at all times. You may be filmed or photographed during the proceedings; images may also appear on the parliament's website or social media pages. Can I ask everyone to please turn your mobiles off or to silent mode.

EYRE, Ms Sandra, Senior Director Mental Health Alcohol and Other Drugs Branch (Strategy and Planning), Clinical Planning and Service Strategy Division, Queensland Health

HARDEN, Associate Professor Scott, Medical Director, Child and Adolescent Forensic Psychiatrist, Forensic Child and Youth Mental Health Service, Children's Health Queensland Hospital and Health Service

HAYES, Ms Therese, Executive Director, Preventative and Prisoner Health, West Moreton Hospital and Health Service

ROBERTS, Ms Katrina, Nursing Director, Neonatal, Children and Adolescent Services, Townsville Hospital and Health Service (via videoconference)

STATHIS, Dr Stephen, Director of Psychiatry at Children's Health Queensland, Queensland Health

WALSH, Mr Michael, Acting Director-General, Queensland Health

CHAIR: I now welcome officers from Queensland Health, Children's Health Queensland Hospital and Health Service; West Moreton Hospital and Health Service; and Townsville Hospital and Health Service. Would you like to give an opening statement before the committee asks some questions?

Mr Walsh: Thank you very much, Chair, and thank you to the committee for the opportunity to present to the committee. I also acknowledge the traditional owners of the lands upon which we are meeting, the Yagara and Turrbal people. I recognise the ongoing cultures of the oldest civilisations in the world and acknowledge any First Nations people in our meeting today.

Madam Chair, clearly we are here, as you stated, to talk about a very important part of the work that government and Queensland Health do, because we are talking about the future of our communities in children and young people. We acknowledge the shared responsibility of the whole-of-government work that occurs for vulnerable children and families, particularly those exposed to child protection and the youth justice system.

Social determinants can influence health outcomes for young people, including: housing, education, exposure to domestic and family violence, and the availability of family supports. Young people in contact with the youth justice system are more likely to have a behavioural disorder, mental health issue, general health issues, be exposed to trauma, and have problematic substance abuse. However, it is often misconceived that these factors cause youth offending. They do not. However, these factors can increase the risk of offending. Similarly, stressful events in the early years of a child's life can lead to poorer physical and mental health outcomes.

Evidence suggests that early intervention and prevention initiatives lead to better long-term social and health outcomes for children, young people and their families. Early access to health assessments and services can act as a protective factor for at-risk young people to prevent and reduce offending behaviour. Queensland Health's response to the youth justice initiatives aims to ensure children and young people receive the health assessments and services they require as early in life as possible and help address health and wellbeing as a contributing factor to youth crime.

For young people, youth detention can often be their first point of access to health services and assessments. On admission to a youth detention centre young people undergo a health assessment to address immediate health needs. This is later followed up with comprehensive health assessments and treatments, including referrals to supports: mental health, problematic substance use, and trauma exposure. People here from Queensland Health will be able to answer any questions about those sorts of services. In youth detention centres nurses are available 24/7 to assist with any medical needs of young people. Multidisciplinary specialist teams consisting of general practitioners, psychologists, speech language pathologists and caseworkers are also available. Queensland Health also provides Forensic Child and Youth Mental Health Service and Scott, as the associate professor and director of that service, is able to respond to any questions around the Forensic Child and Youth Mental Health Service.

Our submission, which I will take as read, also covered some of the state funded mental health, alcohol and other drug services. These are delivered through Queensland Health's 16 hospital and health services, which are statutory bodies. They are also delivered through non-government organisations receiving funding from Queensland Health, Aboriginal and Torres Strait Islander community health organisations and the Queensland Ambulance Service.

In 2022-23, the government announced \$1.645 billion in new funding over five years as a result of the mental health levy. The program is known as Better Care Together: A plan for Queensland's state-funded mental health alcohol and other drug services. Better Care Together was informed by statewide evidence that identified additional service planning, comprehensive needs and widespread consultation required an additional investment in mental health, alcohol and other drug services. We are enhancing the initiatives for children and young people and their families and carers through the program. We can talk about that program as part of any questions you may have.

The Queensland Health system is multilayered. It is made up of primary, secondary and community systems. Primarily Queensland Health deals in the secondary and tertiary systems, but it certainly works in the primary area in relation to mental health services. Meeting the health needs of the community requires participation from all levels of government and all areas and sectors of the community. The health supports and services that are available across the spectrum depend on the location, workforce, need and interest. We try to respond to community needs, as they vary across the state. We are actively exploring opportunities to strengthen our early intervention responses as part of our Better Care Together program.

In the short term, our focus is to better integrate the existing programs and services that are working well for children to strengthen the continuum of care. We are committed to collaboration across government and all stakeholders, including other health professionals, educators, community leaders, policymakers, and social service agencies that engage with young people and their families. The long-term goal is to consider universal access to health services for all children between the ages of zero and five—the first 2,000 days.

In conclusion, I would like to acknowledge the significant reform agenda being led by the Department of Youth Justice, Employment, Small Business and Training and acknowledge that there is always more to be done to support vulnerable young people and their families. We look forward to seeing the outcomes of this committee's inquiry.

CHAIR: Thank you.

Ms BUSH: Thank you for being here. Can I first acknowledge the expertise we have in the room and thank you all for giving up what I imagine is a very busy day to be here with us. There are a few areas I am interested in. One is trauma and the impact of that on the brain and young people, the exacerbation of substance abuse, and then coupling that with detention. I am also interested in your work in community, particularly the work you are doing in detention. We will not be able to get to all of that, so can I perhaps home in on your footprint in detention and the work you are doing with young people. Tell me if you are not the right person to ask. I can hold that question and go with another one. I just thought I would home in on what you are doing with young people in detention and looking at trauma, disability, diagnosis, substance abuse and how that works.

Mr Walsh: I might get Therese and Katrina to start in response to that question because they actually work in the detention centres in West Moreton and Townsville, then move to Stephen to talk more broadly about how that is supported by the expertise sitting around that.

Ms Hayes: My role at West Moreton and where my responsibilities lie is when young people would come into detention. The second they come in they are met by a nurse. That nurse will take them and, as DG Walsh indicated, that is 24 hours a day. That young person will have an assessment of their health and wellbeing. At that point in time there is a determination as to how well that child or young person is and whether they can be accepted into youth detention. They are then referred into programs based on that young person's need. That may be acutely to a general practitioner, who sits under the remit of West Moreton Health, or to a specialist service based on the history that is taken at that point in time and based on the characteristics and any indications the young person may display as they come into the service. Noting they have come from a watch house environment, often they can be quite upset and elevated.

There will be secondary assessments undertaken in the primary healthcare space. We will also manage acute injuries and illness. That will range from a sore throat, cough and cold, COVID type outbreak, through to injuries sustained whereby nurses and general practitioners—we have two general practitioners who work in the Brisbane youth detention space, one male and one female—will undertake assessments and treat and manage where we can in the centre but will also absolutely expedite a referral off to a tertiary environment or secondary level in-care environment as indicated by the director-general. From a primary health care perspective, young people are managed through the system. They are assessed and referred where the indications arise.

Mr Walsh: I might ask Katrina just to confirm that those arrangements also happen in Cleveland and Townsville, and then we might pass to Stephen in terms of tertiary referral and trauma services.

Ms Roberts: Our model of care and service delivery at Cleveland Youth Detention Centre from the medical centre is as Therese described. There is a slight difference: we only have one GP who visits and provides three clinics per week. Children are triaged and categorised based on urgency and need. However, based on the assessment on admission that a nurse may take, either at admission or during the course of the stay of the young person the young person may also then be referred to the North Queensland Adolescent Forensic Mental Health Service for ongoing care and treatment. For ongoing needs we will refer to a specialist outpatient clinic if required. However, if there is an urgent need, arrangements are made and the child or young person is taken to the emergency department depending on what the healthcare need is. If it is around a mental health, behavioural type need, mental health after-hours services will be engaged at that time.

Dr Stathis: At a very high level the Australian Child Maltreatment Study reported back in April this year that 62 per cent of Australians reported a history of childhood abuse: sexual abuse, physical abuse, exposure to domestic violence and neglect—62 per cent of all Australians, the majority. I would encourage the committee to read that. It was published in the *Medical Journal of Australia* in April this year. About a third of Australians report at least two of those types of abuse.

Within the youth justice system the majority of young people report a history of trauma. In fact, we expect young people to be traumatised, so we have a trauma informed model of care. That is how we structure all of our services. That is at that high level. In terms of specific services we offer, particularly here in Brisbane in the Brisbane Youth Detention Centre, the West Moreton Youth Detention Centre and in the community through the youth justice system, I would like to pass over to Scott to answer those questions.

Prof. Harden: As Stephen said, our population are largely all trauma victims, particularly people who make it to youth detention, which is obviously the pointy end of that group. We know that young people in contact with the youth justice system who do not go to detention still have much higher rates of trauma and mental health problems than the general population, and we have some reasonable data from here and Western Australia about that.

I have been involved in services to the Brisbane Youth Detention Centre for more than 20 years. What we found is that lots of our traditional approaches to psychological therapies do not work. Stephen ran a very elegant study many years ago which showed that, in fact, we can make people worse. Traditional approaches to trauma therapies, for example, caused people to decompensate and be unable to function. We ran very well-credentialed treatment programs and we had to stop them because people were not coping.

We have developed a suite of non-verbal approaches to treatment because you have people who are so traumatised that their nervous systems are so attuned to threat that they do not use words to internally represent ideas. They see you move and they think you might be going to hit them, for example. That is the classic thing. We have gone to things like yoga, Rock and Water, which is a somatosensory integration program, and various kinds of music and art therapy—all things that when I was younger I regarded with some disdain as not sort of hard medicine, but I am a convert. We have an art therapist and a music therapist on staff now. It is challenging because those people are not often used to a detention environment, so it is a bit hard to retain them. The young people have gone from not wanting to see us to basically wanting to see us.

The idea is that we use these approaches, which we would call a neurosequential approach, which is the idea that you are working with more primitive parts of the brain first to try to settle things so that you can then do some of the emotion regulation therapies, because one of the big issues is people cannot control their emotional response to things and that gets them into a great deal of trouble. That has been relatively successful. We do not have lots of scientific data on it yet, but at the experiential level it is working reasonably well.

Ms BUSH: I could ask a thousand questions, but I will not. I just want to know why are you a convert if you do not have the data?

Prof. Harden: Because clinically it works. You go in the room with these kids and they are bouncing off the walls and, if you can do something to settle them, you can see that happen.

Mr PURDIE: Mr Walsh, did you say in your opening address that it is often the case that the first time the health department gets to do an assessment on a young offender is when they are in detention? Is that what you said—that more often than not that is their first interaction?

Mr Walsh: Very often that is the first interaction that a child or young person will have with the health system and, as Therese and Katrina indicated, because of that we have a very primary care approach to youth detention centres because we have to do what a GP would do, and that is do a basic assessment of all of their health needs.

Mr PURDIE: Is that when they are in detention on remand or only when they are in detention on sentence?

Mr Walsh: In detention, so it is not in watch houses; it is in the detention centres.

Mr PURDIE: This committee is aware, and I am certainly aware with my background, that on average in a young offender's life cycle of offending by the time they get to detention they have been in the system an awfully long time, potentially years. They might enter the system at 11 or 12 and they might be 15 or 16 before they get remanded in custody, let alone held in custody on a sentence. Do you think there is a massive deficiency in the process if the first time they are coming into contact with the health department is when they are in custody, mindful that we know, and as was pointed out to us, that the majority of these kids have suffered trauma, a lot of them are suffering mental health issues, drug addiction and other concerns? Also, we know that this is potentially a criminal justice response. The police are trying to deal with this whole issue that they probably need more help with. That takes me to my next question. What is the wait time for the local CYMHS services? If a person who is not in custody and is an at-risk youth in a community and needs medical attention, what is the wait time at a local CYMHS referral agency at the moment?

Mr Walsh: When we get to that I will hand that over to Stephen to respond. I think the issue of children and young people being disconnected from the mainstream services of our communities, like health, education and other activities, is a result of the layering of the risk factors that exist in a young person's life. The issue is, as you say, when a person does arrive in a detention centre, as Scott has said, all of them are traumatised and their risk factors are significant both in intensity but also in

number. Therefore, their disconnection from going to a GP or seeking support for themselves has not occurred. This is an environment where we see that as a responsibility: we have them and we should provide those services. I do not think it is unusual that they have disconnected from the mainstream health services.

Mr PURDIE: Shouldn't it be the case that these young vulnerable kids should not be able to disconnect from the system? We have representatives from the education department coming in later and we have other government departments that should be providing support for these kids. Is there anything the committee could be recommending to ensure that at a much earlier stage these vulnerable young people are put before the health department and those assessments are done and we start playing music and doing art with them before they have been in the criminal justice system for three or four years?

Mr Walsh: What we would say, and certainly where our planning is going with the Better Care Together program, is that in that zero to five age group you can provide a lot of services and interventions that are going to reduce the likelihood of either the size of the risk or the number of risks for young people, for children, and that that is in an environment where you are more able to intervene because once you get to six or seven they are starting to make decisions of their own. Yes, there is always more you can do, and that is what we see we can do in that space. Sandra can talk some more about what we are doing in Better Care Together. Can I go to the CYMHS access because there is ED access and then there is CYMHS?

Dr Stathis: Just before I answer the question about CYMHS, I have been really impressed by the early action group initiative that has commenced in Townsville and is being rolled out to Cairns and Mount Isa. I think that is an excellent example of early intervention within the youth justice system. That is different from early intervention across the life span, but I really would commend the committee to the early action group where it is focusing on young people who are entering the youth justice system early. What I really like is that they assess the whole family and my understanding is that they are picking up youngsters within the family who are not in the youth justice system. I think that is excellent program and I would commend that to be rolled out. I think it is a fantastic program.

When you talk about child and youth mental health services rather than general health, because of course, child and youth mental health services are mental health services, young people can enter CYMHS services across the life span. The difficulty is that many of these families, particularly First Nations people, are anxious about accessing mental health services and are suspicious about mental health services, so we are doing a lot of work within First Nations to encourage and support this cohort.

Publicly funded child and youth mental health services once again focus on severe and complex mental health problems. No-one rings a bell when you move into that severe and complex level, but we are not seeing those young people who are initially presenting with mild to moderate health problems because they are managed by Headspace, sometimes even child development services, child health services will see these young people, GPs.

However, to specifically answer your question about waitlists, we have community CYMHS, child and youth mental health services, in all hospital and health services across Queensland. The waitlists vary. The model is roughly the same but the waitlists vary across Queensland. Under Better Care Together we have commenced a number of programs across the continuum of care to try to address the waitlists, but not only address the waitlist of young people coming in but, when they are assessed through the community CYMHS, work out whether there are other services that are better placed to manage their mental health concerns.

Mr PURDIE: Chair, is that a question I could put to the witness on notice—the wait times in those local community CYMHS?

CHAIR: Yes.

Mr PURDIE: When those earlier providers identify someone who needs to be referred to CYMHS—and often those referrals need to be timely because of all those reasons you said about people at a time and place having the courage to take that step maybe—the committee would like to know how long it then takes for those people to get the care that they need. I appreciate you would not have it with you, but if you could provide that to the committee as a question on notice, that would be great.

Dr Stathis: We would be happy to do that.

Mr HARPER: Thank you, Dr Stathis, for recognising the work of the early action group. I have been involved with them in Townsville since helping establish that in 2015-16. For the benefit of the committee members who do not understand the interaction of the early action group with Health, I had a briefing recently—you might be able to take this on notice—where some of the young people they have assessed very recently now have NDIS packages as a result of FASD or whatever else. The second part to my question—and I do not mind who answers this—is that I am interested in the post-sentence space. What happens when kids are released from the Cleveland Youth Detention Centre and the importance of Health in that role? The committee has heard a lot of people are reoffending at a very high rate after release, and I think there is a gap there that needs to be addressed. There are two parts to the question: the early action group and post sentence.

Dr Stathis: Scott could comment about the Brisbane Youth Detention Centre and West Moreton Youth Detention Centre and I would assume Katrina may be able to respond to when they leave the detention centre.

Mr HARPER: Being from Townsville, I am probably more interested in the Cleveland Youth Detention Centre—no offence to Brisbane.

Mr Walsh: Katrina will be able to respond to what happens when people leave the detention centre.

Ms Roberts: When young people are released, understanding that cohort and demographic of young people in Cleveland, 90 to 95 per cent of the population are First Nations. They come from all over North Queensland. Their healthcare needs are documented and a discharge summary is provided to the caseworker. We will provide that to a local clinic if we know where the young person is accessing care. I think one of the known gaps sometimes is around the integration of the family in care and being able to continue with the health needs once a young person is released.

I said before that if a young person requires a specialist outpatient appointment at a secondary or tertiary service that is actually made. Generally it might be to the Townsville Hospital, but these young people are from all over the north, so referrals have to be picked up in that place where they return to home. Also, the caseworkers are provided with the discharge summary. They are the intercept really about communicating back with their local communities about what their ongoing healthcare needs may be. Regarding the mental health programs, there is also a number of mental health programs that follow the young people.

Mr HARPER: Is the caseworker from Youth Justice or Child Safety?

Ms Roberts: Yes, Youth Justice.

Mr HARPER: Could you comment on the early action group in Townsville? I do not know if you can expand on that at all.

Ms Roberts: You probably know more about the early action group than what I could comment. I do know that it has a number of clinicians on it. They help the young people engage with clinicians and can assist them in getting to appointments and, as you said, getting an early diagnosis, intervention and treatments.

Dr Stathis: I think the strength of the early action group is that it is a multiagency collaborative approach. We recognise that it is not just a health issue; it is a multiagency issue, so you need a whole-of-system, holistic response. I think that is one of the strengths of the group—that it is multiagency, whole of system and it focuses on the younger ones.

Mr McDONALD: Earlier it was mentioned there was one session per week for three of the centres in North Queensland?

Mr Walsh: Three clinics.

Mr McDONALD: One session per week at each of the three clinics? Was that right?

Mr Walsh: One GP, was it?

Mr HARPER: Yes, one GP for three clinics is what I have noted.

Ms Roberts: Yes. That is correct. That is at Cleveland.

Mr McDONALD: As we all agree, the earliest intervention and support for those young people is critical. Again, you might not have the data here with you, so I am happy for you to take these questions on notice. I am really interested to understand what is the average wait time for a young person to see a psychologist and to see a paediatrician? It would be really interesting to see what the wait time is for a young person in detention in those communities across the state but also a young person who is not in detention. Are there sufficient services in the community in that space and what is the gap for those in detention centres? Would you have the data there now or are you happy to take that on notice?

Mr Walsh: I am happy to take it on notice, but I think it is worth asking Stephen and Sandra to talk about the pathways into the child and youth mental health services. You can have a referral from a GP through outpatients or directly to CYMHS, you can have it through other agencies or you can turn up at an ED. There are different access points and assessments that occur at those. It is worth talking about that and then we can provide the numbers afterwards. Stephen and Sandra, do you want to talk about those pathways in?

Ms Eyre: I want to place the issue a little bit more in context. Children and young people might have various problems before they even get near a youth justice or child safety system, and the wait time for interventions to address what might be identified varies according to what that issue might be. If a child is identified at school that they might need a little bit of speech therapy, it depends if the family are able to access a private speech therapist or they have to wait for a public service. It will be a little bit difficult to pull together wait times. Unless there is a specifically identified group of people in a certain region, that would actually be very difficult.

I want to go back and talk about the importance of having enough scaffolding across our mainstream services. When we are looking at children and young people—in fact, mums and babies, and mums during their pregnancies—it is really important that we have, and the DG referred to that in his opening remarks, a real focus on the first 2,000 days to ensure that there are enough supports to address the range of issues that impact early parenting and children. It does not matter what circumstances they are in, even if they are in the most optimal circumstances, they might still have a developmental problem or a hearing issue or something like that. It is really important we have all those universal supports in place. There is no doubt there is not enough of those. Then we are looking at specific strategies where we might start looking at more indicated or at-risk cohorts and populations. That is where it is really important to bring in some more targeted interventions.

Rather than heading straight into a CYMHS trajectory which, of course, as Stephen said is focused on specialist, severe mental health intervention, we are actually looking at establishing under Better Care Together what we are calling Head to Health kids hubs—it is an initiative we are doing with the Commonwealth government—and they focus on zero to 11s. At this stage we are piloting two of them in South-East Queensland—one on the Gold Coast Hospital and Health Service and its partners which is leading and the other one in Children's Health Queensland in collaboration with Metro North and Metro South.

Mr McDONALD: It is in your submission.

Ms Eyre: Yes, that is right. They are particularly important in averting and identifying some of those early complexities before kids get into the youth justice system.

Mr McDONALD: I refer to the DG's earlier answer with regard to the provision of health services in watch houses. Is there any legal impediment to health being able to provide services in watch houses?

Mr Walsh: I am happy for Stephen or Sandra to talk more broadly, but the reason why Queensland Health does not provide services directly into watch houses is that kids are only there for a very short period of time. There is an assessment that needs to happen and, as you have heard, it is very thorough. In a watch house environment that is very difficult to do. That is fundamentally why. However, if there is a specific issue, then they will contact us.

Mr McDONALD: Back in 2013 there was a recommendation about the establishment of therapeutic secure care environments. Would that be a better place for you to conduct health assessments for this vulnerable cohort?

Mr Walsh: I think this is a question better answered by Scott and Stephen, given their expertise.

Prof. Harden: Are you referring to the end of the Carmody report and the therapeutic environment?

Mr McDONALD: Yes.

Prof. Harden: That was really rendered around juvenile justice and the child protection population of young people. It would be a good place to do health assessments. It is largely based off a UK model of what were called secure children's homes, which were reasonable-sized family-like institutions with big walls around them. It is certainly true, but a whole separate system would be required. It seemed to be on the end of the inquiry report as a thing to do with a particularly—there is a cohort, which is difficult and the agencies all get together and struggle. I would say what we have
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noticed in the last five years is that the agencies are working together a lot more closely and collaboratively across child protection, education, health and juvenile justice, who have been terrific leaders in this area, to try to meet those needs. Whether that is the right model and solution for that, I do not know.

Mr TANTARI: I would like to explore the drug rehabilitation services, particularly those in the regions as I am the member for Hervey Bay, which is a regional centre itself. What services exist in the regions and what do they practically look like—in particular, the services themselves? What are the after-hours services? We understand those services are available Monday to Friday, nine to five, but are there services outside of that? We have heard from other witnesses that substance abuse is pretty prevalent within this cohort. What services are available?

Mr Walsh: It is a very big question because there are lots of different communities and lots of different services available in them. It might be worth categorising the fact that there is child and youth mental health services, alcohol and other drug counselling services, as well as residential rehab services, and they are not everywhere.

CHAIR: Would it be preferable to take it on notice?

Mr Walsh: We can provide a list around all of that. Part of the intent of the question, as I understood it was: what is the access during office hours and what is the access after hours—

Mr TANTARI: That is correct, particularly in regional areas.

Mr Walsh:—and how do we do that? I am happy for Sandra to respond to that. Broadly speaking, mostly after hours it is either through calling an ambulance if there are significant issues or arriving at hospital. I am happy for Sandra to talk.

Ms Eyre: That is correct. Generally, the services do not operate after hours or on weekends. There is the Alcohol and Other Drugs Information Service, ADIS, which is a line that individuals and families can call and get brief interventions and information. That is certainly not like getting in to see a worker face to face to support a young person with their issues.

We did a whole lot of service planning as part of the development of Better Care Together. The evidence is there is huge need, as you would have heard through all your submissions, particularly looking at that 13- to 25-year-old age group. The government, through an election commitment, is bringing on a youth specific alcohol and other drug residential rehabilitation service in Cairns. There is no doubt there is a need for additional bed-based services, but also young people need quite flexible options. They do not just turn up at a service. We need many more models where there is various outreach and also where young present. They naturally present potentially to youth services. We need many more flexible models around counselling, assertive outreach as well as additional bed-based service models, day programs. There is quite a significant need.

We put in additional funding and also additional harm reduction initiatives. That is very important to support young people if they are using substances to mitigate the risk of their use. Some of those initiatives are yet to roll out. Certainly there is additional need for many more service responses.

Mr TANTARI: You were just saying that there is an increased need for these services. In this particular cohort is there a growing incidence of substance abuse as a percentage of the overall cohort?

Ms Eyre: I would prefer to take that on notice because the thing with young people is it fluctuates. It can be episodic. It fluctuates also when different substances come onto the market or there are different supply initiatives happening through law enforcement, so young people's drug use fluctuates. That is why there is a use of inhalants. Anecdotally, people talk about younger people accessing methamphetamine. Yes, inhalants are a problem.

When I say there is a need, we actually have some planning frameworks. They take a population health approach and look at the epidemiology of a population and make some assumptions about the incidence and prevalence of substance use. Those planning frameworks tell us that there is a need when we match it up with our actual service coverage. There is a gap across all the service elements for alcohol and other drugs but particularly with young people. Yes, in regional areas, it is difficult to ensure there is sufficient coverage.

Mr HART: Katrina, you said earlier that the caseworkers are given the treatment plan for people who are released from youth detention. Do you know how long a caseworker would stay involved in a treatment plan for someone released from youth detention?

Ms Roberts: It is more a discharge summary of care that is provided and follow-up appointments or referrals that may have been made. I am unable to tell you how long a YJ caseworker stays involved with a child.

Mr HART: Acting DG, the committee heard earlier that in some cases caseworkers are only involved for 72 hours after release. Do you have any stats about whether follow-up plans are instigated and for how long they may be involved when someone is released from youth detention?

Mr Walsh: If you are talking about caseworkers who are a part of the youth justice system, I do not know. If you are talking about caseworkers who may be part of a child and youth mental health service where the young person has an ongoing connection through that service after they have left the detention centre, then we would be able to answer that question.

Mr HART: Who manages the health plan for someone when they are released from a youth detention centre?

Mr Walsh: I will ask Stephen to answer that. If they are assessed to require ongoing mental health work through the CYMHS team, they manage it. Stephen can talk to that.

Mr HART: Can Stephen tell us whether or not that is voluntary?

Dr Stathis: I can talk once again at a high level and then Scott will be able to dig down. There is no waitlist in the Brisbane Youth Detention Centre and the West Moreton Youth Detention Centre to see any mental health clinician, whether that is a psychologist, a psychiatrist, a social worker or whoever. Scott can talk about this: with the previous model, we had a team in the youth detention centre and a team in the community. The difficulty then is young people were seeing multiple different clinicians. We have changed our model of care, so the same clinician who sees a young person in the detention centre then continues to follow them up in the community. Scott would be able to talk more clearly about that.

Prof. Harden: I cannot tell you what the average continuation of therapy in the community is but, if they are in active treatment with our mental health service, they would be involved for some weeks because of the ongoing treatment at the very least. That is reviewed on a regular basis every few weeks in terms of clinical review meetings. We would be involved as long as the young person was agreeable to that or as long as we believed it was clinically necessary. This treatment is by and large voluntary unless people have met criteria and required treatment involuntarily under the Mental Health Act. That is relatively uncommon in this population.

Mr HART: No conditions are put on their release to have this follow-up?

Prof. Harden: Conditions of release would not be something that Health is involved with. They would not bind Health either. It is a voluntary system.

Ms BUSH: Mr Walsh, I will direct this question to you and you can refer it to whomever you like. If it is not the right way to frame it, let me know and I will reframe it for you if that is okay. The committee has heard that, despite youth crime and crime going down, our incarceration rates are going up. Clearly, we need to rethink our response to youth justice. In some jurisdictions part of that looks like raising the age of criminal responsibility and putting in a service sector response. Parking that conversation about raising the age, if we were to insert a stronger service response to young people, particularly the 10- to 12-year-olds and the 10- to 14-year-olds, what would that look like for Health? Can you see a path forward in Queensland for us to achieve that, touching on some of the things you talked about in terms of place-based responses? Does that make sense?

Mr Walsh: It certainly does make sense. I would draw on what Sandra talked about earlier—that is, we would say that the more points of service you can have in a community it provides a greater opportunity for a young person in that age group we are talking about to find themselves in contact with a service. As Sandra called it, that is scaffolding. It is about having a whole range of early activity services through to services that help a person in a minor therapeutic way through to the residential drug and alcohol services. Most of those are in the community space. We see, as part of our Better Care Together, that we are growing that space to provide more points of services in more communities as well as increasing the services with child and youth mental health services because, if people progress through those and require an intervention as significant as working with a child and youth mental health service, they should be available. Our answer would be: taking a wellbeing approach is actually having more services in more locations which gives the ability for young people to come in contact with it.

Ms BUSH: What you are saying is that, if you had the authorising environment and the investment, you believe Queensland has the practitioners and the capability to do that?

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Mr Walsh: Like every other state in Australia and every other country in the world, we are suffering a workforce shortage. We are constrained by workforce. You want skilled people. In all situations they do not have to be skilled, but they have to be operating in an environment where there are clear standards and procedures, but you want a skilled workforce. That is a challenge for us and it is also a challenge for the non-government sector.

Mr PURDIE: Mr Walsh, I refer back to my question about opportunities for earlier intervention. Page 4 of your submission talks about Youth Justice making a referral for an assessment in the community. This might be a question on notice but how often does that happen? How often does the youth justice department make a referral to Health for a forensic assessment?

Mr Walsh: I might ask Scott to talk about how we work with Youth Justice, and that might lead to how those referrals are made.

Prof. Harden: Youth Justice would normally refer to us for a clinical mental health assessment rather than a more forensically oriented assessment. That can happen in detention. It happens in the community. In the catchment area we cover, which is up to and including Rockhampton, with our group of services we regularly visit the youth justice service centres and talk to staff. We found that is the best way of picking up referrals. If they think that a kid has a mental health problem, they ask for us to have a look.

Mr HARPER: I refer to page 9 of the brief: 'Health programs and services demonstrating efficiencies in reducing a young person's contact with the youth justice system'. For clarity, when you mentioned CYMHS you were referring to the child and youth mental health services?

Mr Walsh: Yes.

Mr HARPER: The top paragraph under that dot point states—

Forensic CYMHS provides a transitions service for First Nations young people who are released from youth detention. The objectives ... wraparound social and emotional well being ...

I am interested in that second paragraph—

The program has been successfully running for 12 years and has demonstrated positive outcomes for First Nations young people to date.

I take you to the last sentence—

The program is currently available to First Nations young people who reside in the Brisbane area.

Director-General, I am from Townsville. I want to see a comparative for the Cleveland Youth Detention Centre. Is that program not as freely available or available to kids coming out of the North Queensland Cleveland Youth Detention Centre? I put it to you that it should be if you are seeing success in the Brisbane area.

Mr Walsh: We are happy to establish these services wherever we are funded to establish them.

Mr HARPER: Thank you, Chair. That would be something that we can certainly take on board.

Mr Walsh: I think that is the answer. We would want to establish these services wherever we can.

Mr McDONALD: Sandra mentioned earlier that the new youth and alcohol drug residential treatment service in Cairns is being delivered. When is that expected to be delivered?

Ms Eyre: In 2025.

Mr McDONALD: What is the capital budget and what is the operational cost of running that?

Ms Eyre: Can I take that on notice?

Mr McDONALD: Absolutely.

Ms Eyre: In terms of the operational cost, it is actually going to be run through a non-government organisation provider. I will just have to check the probity around the release of the operating budget, but I think that will probably be okay.

Mr McDONALD: Thank you. We really are dealing with this worst of the worst cohort and these services are vital. I understand that project was first promised back in October 2020. Do you know why that did not happen?

Ms Eyre: There is a great deal of planning that needs to take place. In particular, one of the issues that can often create some delay is identifying a suitable site. Communities are not often in favour of one of these services being in their backyard. The health department works very closely

with the hospital and health service's capital and property area to scope out many potential sites. The sites have to meet particular criteria. They cannot be too far away from the hospital. There is a whole range of delays associated with that.

Ms BUSH: Sandra, I think you wanted to respond to my question also. I want to pick up on what you just said there as well. Something that the committee has been talking about is the impact of stigmatising and labelling a lot of young people and the very real mental health impact that has on them and the very real impact that has on communities and on victims and how unhelpful that is in terms of getting these place-based services up and running. Did you want to comment at all on that?

Ms Eyre: I can certainly reinforce that stigma across all levels is a real factor for mental health, alcohol and other drugs. It is exacerbated when you have young people and alcohol and other drugs. A lot of people in the community are very supportive of more being done. It is often tricky if it is close to where people live. The stigmatisation plays out in a very real way when you are trying to establish services that are appropriate for a young person. In a residential setting, in a community where people live—it has to mimic what good life for a young person is: it is not closed away somewhere—communities often have difficulty with that. We have found, though, in the case particularly of adult residential rehabilitation services for mental health and alcohol and other drugs, once they are in there the community embraces them, gets in there and helps fundraise.

I did want to round out what the DG was saying before about what might it look like. The place-based service models are an extension of what the early action groups look like. You have all the players around the table. Importantly, it is not the what; it is more the how some of these programs are established. We really need to ensure that they are co-designed. People with lived experience of families, the communities and First Nations people are part of the thinking and the design of what those place-based services need to be. You need all the agencies. You need the joint planning, the sharing of resources and the very assertive, flexible approaches—after-hours services and on weekends. It is all those sorts of elements.

CHAIR: I have a couple of questions that you could take on notice, because I am mindful of time. You mentioned early or earlier intervention in the zero to five age cohort. Were you referring to those who come within the realm of youth justice or are we talking across Queensland, every single child—

Mr Walsh: More generally—to prevent them entering the youth justice space.

CHAIR: Wonderful. For those you say are not getting these contacts, how is that being addressed? I come from remote areas and there are difficulties when living eight hours away from town. There not only are multiple reasons that you cannot access services but the issue is, if you do have access and are diagnosed with something, there is that cost to even get back in for a follow-up appointment. I would really like to understand that broader issue.

The other question is about specialists. We understand that there are shortages across the world. What initiatives are there to encourage or access specialists? Could we also have a breakdown of Queensland Health FTEs working across the three detention centres broken down by clinical role? That would be great.

I am not quite understanding the situation when youth are coming into watch houses. They are seen once they are detention but, if they are released and they are not coming within that realm, is there any opportunity to assess all who come into the watch houses? There does not seem to be any methodology to be able to follow and track what occurs with these youth?

Mr Walsh: My understanding—and Stephen may want to talk more—is that they may not be there for very long. To arrange for a service to do an assessment may take longer than the person is there.

CHAIR: Yes, but if there is nothing now there could be something when they leave the watch house and head back home.

Mr Walsh: I think it comes down to what Scott said before. There is no compulsion. You cannot compel a person to go to a service once they leave a watch house.

CHAIR: Just a reminder that responses to questions on notice are due by Monday, 18 December. I want to thank you all so very much. I realise time is precious. You have given so much to the committee. We wish you all the very best over the holiday season. Thank you very much.

MORRISON, Ms Kathy, School Supervisor, Disability, Inclusion and Student Service, Department of Education

ROSENGRAVE, Ms Robyn, Executive Director, Student Engagement and Alternative Learning, Department of Education

STEVENSON, Ms Hayley, Assistant Director-General, Disability, Inclusion and Student Services, Department of Education

CHAIR: I now welcome officers from the Department of Education: Ms Hayley Stevenson, Assistant Director-General, Disability, Inclusion and Student Services; Ms Robyn Rosengrave, Executive Director, Student Engagement and Alternative Learning; and Ms Kathy Morrison, School Supervisor, Disability, Inclusion and Student Service. Would you like to make an opening statement before we have some questions for you?

Ms Stevenson: Before I start, I wish to acknowledge that we are meeting here on Meanjin and I would like to acknowledge the traditional owners of the land on which we meet—the Yagara and Turrbal people—and pay my respects to their elders past and present. I thank the committee for the opportunity to outline how the Department of Education is working to ensure that all children and young people are engaged in positive learning and how we are contributing to the youth justice reform.

Queensland students are on their way to a bright future—91 per cent of our school completers from 2022 are already in further education, training and employment. Our Equity and Excellence strategy, which is a new education strategy, outlines our efforts to provide all young people with a personalised pathway focused on educational achievement, wellbeing and engagement, as well as culture and inclusion.

As I am sure you all know, education is a really important protective factor for our young people, especially for our most vulnerable, but we also know that there are external factors such as mental health concerns, trauma, domestic and family violence, and housing instability that can impact a young person's ability to engage and remain engaged with education. The Department of Education has implemented a range of strategies over previous years to try to overcome these barriers. I will quickly outline a few.

In 2013 we commenced the youth engagement strategy. One part of that strategy was establishing youth engagement hubs in each of our education regions. These services worked to locate, case manage and then re-engage young people who have been absent from school for an extended period of time. Another part of the strategy was the establishment of FlexiSpaces in 52 of our state schools that provided an alternative learning setting but within the school gates for those young people who were not quite able to engage in the mainstream normal classroom.

In 2018 we commenced the Education Justice Initiative. That comprises us employing court liaison officers who work with young people appearing in the Childrens Court to look at their current level of school engagement and work to strengthen or re-engage them with education. Then in 2021, recognising the emerging wellbeing needs of our students, the department commenced the implementation of a \$106 million Student Wellbeing Package. Part of that package was employing an additional 464 wellbeing professionals like psychologists and social workers to cover all state schools in Queensland.

Another element is that a pilot project is currently underway to provide free GP services in 50 of our schools that have secondary age students. At the start of this year we established a network of Student Child and Family Connect directors—one in each of our eight regions. They provide that multiagency coordination and support for our most vulnerable young people. What we know is that a lot of the work that education does we cannot do alone. There are a lot of influences outside the school gate and we need to play a role in linking those supports so that we can support our students and their families.

We also know there is a lot more for us to do. As our communities are facing increasingly complex challenges, our schools need more support as well to ensure every student remains engaged. On Monday a new youth engagement education reform package was announced. That comprises \$288 million worth of investment to strengthen the prevention and early intervention in the youth justice areas. The package builds on some of the existing strategies and there are some new ones as well. There is an additional \$45 million to expand the FlexiSpaces into another 50 schools across Queensland but to also provide with those FlexiSpaces a dedicated teacher who can then support those students who are outside of the mainstream classroom and support them to get back into the classroom after a short period of time.

The package also expands on the Queensland Pathways State College. That was established in 2017 and currently has six campuses. The package will expand that to 12 campuses. Next year there will be a new campus in Toowoomba and in Deception Bay. By 2027 there will be additional campuses in Mount Isa, Central Queensland, Logan and Cairns. That is for those students in years 10 to 12 who face significant barriers to engaging in mainstream schools.

The package also delivers some brand new services for us—\$57 million for a new intensive education case management service. This service will have caseworkers work with students who have been excluded from school or who have missed a significant amount of time due to suspensions. They will provide support to the student to enable that continuity of learning during that period and to ensure that they re-engage with education and training.

We are also providing funding for some NGO-run alternative learning programs for young people who are known to the youth justice system or perhaps going in and out of youth detention but are not quite ready for mainstream re-engagement. As part of our suite of ongoing support to students, we provide the education services for any young people who are held in our detention centres. At the moment we have the three detention centres and they have education and training programs in there. They focus mainly on literacy and numeracy, reading and vocational education and training.

I mentioned our Equity and Excellence strategy. There are a number of other initiatives outlined in there, particularly the precincts and partnerships initiative, which provides some place-based and whole-of-government solutions to ensuring differentiated support for our schools and the students within them.

We are confident that we are on the right path to bolster that support, to bolster the protective factor that education plays. If we can keep young people engaged in school, we know that we are going to change their life trajectory. We know that the work that teachers and their support staff do every day in our schools is extremely valuable and increasingly challenging. At the heart of it is ensuring that our students get the benefit of a high-quality education. I welcome any questions from the committee.

CHAIR: Thank you.

Ms BUSH: First of all, I acknowledge on behalf of myself—I cannot acknowledge on behalf of everyone—the wonderful work that all of our teachers and educators do. I think they do a fantastic job. You are right: they are a protective factor. I do not want my next question to detract from that in any way, but I do want to focus in on suspensions and exclusions, because we have heard that obviously there is that pipeline into the prison system. Your submission on page 4 says that you are looking into that and looking at the rates of suspensions and exclusions. I wanted to understand what work is going on. What is happening in that space? I think we would all agree that no child really should be suspended and excluded from school. Surely there is another way we can contain them on the property and educate them and continue that education. Can you comment at all on that?

Ms Stevenson: Absolutely. It is a really complex matter that our principals grapple with every day. Like our communities, there is an expectation that our schools will be safe places for students to learn but also for teachers and other staff to have a safe workplace. It is about ensuring we get that balance right. Some of the work that is being undertaken at the moment is building on previous work. There has been a real focus on particularly the early years and ensuring that we put in wraparound support for any schools that are experiencing challenging behaviours for students in those younger years. We have really seen that be successful. We have seen a decline in any of those school disciplinary absences in the early years.

Ms BUSH: What are the early years?

Ms Stevenson: That is prep to year 3. Another element is that we have much greater oversight and real-time monitoring about what is happening. If we know there is a young person who has experienced a large number of suspensions—which is stressful for the school and really challenging for everyone—it is about how we push in support and look at what else needs to be done. We check on what has already been done and whether there is anything else that we are yet to try. Through that, we are establishing a suite of brokering services so that schools can then reach out and get additional support. That might be from a multidisciplinary team that comes in and does, say, a speech language assessment or a functional behaviour assessment. It is really trying to push that expertise into the schools.

Our regions are establishing a multi-tiered system of support, which is an evidence-based process. It looks at the evidence, knowing that we have the interventions or supports right at that base layer for universally teaching those proactive, positive behaviours. For those students in the

middle who require a little bit more support, that ensures we have those supports in place. We then have really focused attention on those students who are most likely to be attracting those suspensions or exclusions.

The FlexiSpaces that I mentioned in the opening are about recognising that sometimes there might be an incident that occurs where a young person is not coping well in the classroom. Instead of a suspension, we provide an alternative place with a teacher where that young person can continue to learn but also the issues and the triggers of the behaviour can be addressed and then we have a successful transition back into the classroom. We have seen that work on a small scale and we are looking to scale that up more as well.

Ms BUSH: I have been to a couple of the FlexiSpaces and they have worked very well for exactly that.

Mr PURDIE: You listed detention facilities before where you provide education to detainees or inmates, I suppose. What about education in watch houses? We know more kids are spending longer in watch houses. How does that look?

Ms Stevenson: We have previously provided in-place teachers at the Brisbane watch house when there were a number of young people being held in the watch houses. Kathy could possibly talk more because those teachers came from the Brisbane Youth Detention Centre, and they provided modified support and education for students in watch houses. We have also developed curriculum materials that can be delivered in that unique setting to provide education. We remain responsive, so if Youth Justice or Queensland police reach out and want that education provision, we are ready to go with that. Kathy may talk a bit more about what is currently in place.

Ms Morrison: As Hayley was saying, we are always committed to making sure that, wherever a student is, we are delivering the best possible curriculum we can to them. Obviously, in a watch house, it is a very different circumstance. Generally, that looks like one-to-one education. Depending upon which watch house it is, it can be that staff are doing that within a central courtyard area or they may be doing it through the glass to those students.

Mr PURDIE: I was going to suggest that there are probably not too many central courtyard areas in watch houses. I am assuming that is done one-on-one in a cell or through the glass door.

Ms Morrison: Generally. We also make sure that we are doing physical activities with them. That can be physical activities that are able to be done in a small space. Circuits are a fun—

Mr PURDIE: In their cell? It is asking them to do push-ups and sit-ups in their cell?

Ms Morrison: It is in the communal area outside their cells, generally speaking, which is a larger area. Usually the students have enjoyed the circuits that have been provided for them.

Mr PURDIE: Going back to the detention centres, we have been told that people in these centres are often in their cell for 23 hours a day. How do you deliver training, education, health and fitness regimes when they are in their cells for 23 hours a day?

Ms Morrison: Upon entry, each student is assessed around what their needs are, so there is a highly personalised curriculum that is provided to them at the level they need. As you can imagine, a lot of the students in detention centres and watch houses have lower reading ages. The average reading age is around 8.8, yet the average age of a child in detention is anywhere between 15 and 16, depending upon which detention centre it is. We very quickly establish where they are at in their learning and we provide a curriculum that suits their needs so that they can experience success, develop some confidence and then engage in that learning.

Mr PURDIE: It really is a bespoke approach. We are not picturing any of these kids trying to do NAPLAN or keep up with any curriculum. It is just a targeted, needs approach.

Ms Morrison: Yes.

Mr HARPER: Thank you to each of you. Just picking up on some of the commentary, I am very lucky in my electorate of Thuringowa in Townsville that we have a GP at Heatley, my old school. Keeping kids in education is key to reducing offending in the community and keeping them out of the youth justice system. I know that through the Townsville Stronger Communities Early Action Group there is a Department of Education rep there working with a range of NGOs. If I can go back to 2017-18, that group at that time mapped that Townsville district. I am pulling numbers out of my head, but I think there were around 248 kids who were absent from school in the region. A system was set up with a couple of liaison officers—and I can never remember the title—and that got them down to 78 kids within 12 months. That is outstanding.

I want to comment on that mapping work continuing—of keeping kids in education. I have become a champion of Clontarf. I have got four academies in Townsville—500 young people. We have the Stars program, Silver Lining, Indie School, the pathways college, flexi school and the Stronger Smarter school system at one of our primary schools in Weir. It is about keeping kids from young ages through to high school who are disengaged. We just opened up the Indie School, and I know we contribute some funding to that, whilst it is largely federal.

CHAIR: Member, do you have a question?

Mr HARPER: What is the importance of those programs continuing? Is there any other opportunity to expand these into other areas? Sorry for the long question.

CHAIR: That was a lengthy one.

Ms Stevenson: It builds on what Kathy previously said—that it is really about knowing the learner and knowing where the learner is at. For some young people, engagement in a Clontarf program or a program related to sports or the arts can be that one thing that keeps them coming back to school every day. We know that they are very effective in that engagement space. Part of the new reform package is an additional \$29 million to expand the offerings for First Nations students in those programs, expanding into sport and also the arts so we are able to offer that one thing that we all liked when we went to school. It is making sure we have more of those things that get the young person through the front gate and then we can wrap the supports around them and engage them in the curriculum through that positive element.

Mr HARPER: Are you able to provide the committee with the success rate of Clontarf if you just look at those academies—people who finish school, get their HSC and get employment?

Ms Stevenson: Yes. We are absolutely happy to provide that information.

Mr McDONALD: I too would like to give a shout-out to all the great teachers. I have 36 schools in my area and they do a remarkable job. We heard last week that if a young person attends education for one hour then they are not counted as absent. Can you confirm that for us?

Ms Stevenson: The way that the nonattendance is calculated is that it is for half a day. A young person can arrive at school maybe 30 minutes late and that will not count to the statistics as a half-day absence. It is a half-day or a full-day absence and that is what we report to the Commonwealth. However, schools monitor that. If a young person was late to school and missed their form class, then our schools have the same-day absence notification so a parent would get a text message to advise that their child was late to school.

Mr McDONALD: My background was policing as well and I remember having a conversation with Chris Muir where I said, 'Can you tell me who my 15- and 16-year-olds are when they are 10 and 11?' He said, 'I can do better than that, Jim. I can tell you the five- and six-year-olds.' He subsequently started a program and it is going really well. We have this worst of the worst cohort who I believe are taking up an enormous amount of time in the schools, with behavioural management and that sort of thing. When a child starts to demonstrate some early signs of criminology and that sort of thing, what programs are available for your schools to be able to assist that child and allow the teachers to spend the time with the other cohort?

Ms Stevenson: What we do is that early intervention and we will be looking at the behaviours that are being demonstrated in the classroom—and even before that. We now have Free Kindy. One of the hopes out of that program is that through attending kindy our parents will be more comfortable to have that pre contact with schools and our schools will have more knowledge of the child to provide those wraparound supports.

As I spoke earlier, the real-time monitoring of any suspension data gives us an insight, particularly in those early years. I met with all of our regional directors yesterday and on Monday, and they know the names and the schools of students who are losing a large number of school days due to a suspension. We then push in that bespoke differentiated support for those particular students. It is really on a student-by-student basis because we know if we can keep them engaged—year 3 is really critical—and teach them how to read by year 3, then they have a much more positive trajectory. I guess the focus is more around that education engagement.

Mr McDONALD: And keeping them engaged. You also provide services in resi care with Child Safety. Do you have the attendance rates for that? Last week we heard that if somebody only attends for an hour then they are ticked off as being in attendance. You can take it on notice because I am mindful of time. It is about attendance rates at resi care and with Child Safety. That is obviously vital.

Ms Stevenson: Absolutely. We have a strong relationship with Child Safety and the child safety service centres. We monitor that data and do data matching. The attendance rate for our students in care is actually quite close to the state average. I will get it confirmed but I think it is only about four percentage points lower. The attendance rate is higher.

CHAIR: Amongst that data, could we also get attendance rates in watch houses and detention, including remand?

Mr PURDIE: With that data, would that also have the suspensions? Obviously, attendance encompasses suspension, but could we see a correlation of those kids who are essentially in care and their level of suspension?

Ms Stevenson: Certainly. We will get the school disciplinary absence rates as well.

Mr TANTARI: I would like to further explore some of the questioning from the member for Ninderry and others regarding suspensions and exclusion rates. We have heard from witnesses in the past about how attendance at school is effectively one of those areas that can actually cut off or apprehend an individual from going into the youth justice system. We have also been talking about serious repeat offenders, and that cohort currently sits in those age groups of around 14 to 17. I would be interested in finding out the statistical data that may be available regarding suspensions and exclusions between 2011 and 2017. From a research perspective, is there a correlation between that cohort that is happening now and whether the suspensions and exclusions occurred back in their formative years, which you talk about is prep to year 3 or year 4? Is that historical data available for the committee to access?

Ms Stevenson: We certainly have the suspension rates from 2019 to 2022 across the different year levels.

Mr TANTARI: How about back a decade or so? I am particularly interested in seeing this cohort that is currently here now—those who are now between the ages of 13 to 17—because we are being told there is an increased number in that cohort becoming serious repeat offenders. I am just wondering what the potential impacts of suspensions or exclusions could have been on that cohort that we are currently dealing with now from their history as they went through their school years.

Ms Stevenson: We can certainly take on notice whether we can look backwards particularly at that cohort, but we do know and acknowledge and are working on the over-representation of First Nations students receiving suspensions and exclusions and students with disability and students in care. We really acknowledge and have a sharp focus on students in those cohorts to ensure we maximise the amount of time that they are in school, because we do know that they are potentially at greater risk of becoming disengaged from education once they get a suspension and then that trajectory can follow.

Mr HART: Does the department keep data on trends in absenteeism? I am hearing high schools on the Gold Coast maybe having as high as 70 per cent absenteeism on a Friday and then the perception becomes that crime is happening Thursday and Friday nights. Do you have any figures you could provide the committee on that?

Ms Stevenson: We do monitor and have data around the absenteeism rate or attendance rate. What we have seen across Australia is a bit of a decline in school attendance since COVID, but Queensland is holding fairly well compared with other states and territories. We do see different trends like that, that there is some lower attendance on a Friday or at different periods of time, so our schools will look at that data and see if there are other things that they can do to address those periods where they are seeing lower attendance by changing the programming and timetabling of the school to address that.

It is also about communicating the value of education and that every day at school counts. We work with our parent community around that. It is really important for parents also to value education and to ensure that their child is attending school every day. More and more we are working in the space of how do we overcome some of the barriers that families might be experiencing which is limiting their ability for their child to get to school every day. That is a real focus for us.

Mr HART: Seventy per cent really surprised me. Is that a number that rings true to you?

Ms Stevenson: No. I think our statewide attendance rate is much closer to 90 per cent, so I would think that an attendance rate of 70 per cent would be something that we would certainly look at and support that school and school community.

Mr HART: Sorry, that is 70 per cent absenteeism.

Ms Stevenson: That sounds extraordinary actually.

Mr HART: It sounds extraordinary to me, too. Can you provide the figures for attendance maybe regionally on a Friday to the committee?

Ms Stevenson: We certainly can do that.

Mr HART: You can provide that on notice; that is fine. With regard to vocational education in our detention centres, can you tell us what the department is doing there? How many students may be participating and what follow-up does the department do to ensure that these things keep going when the kids go home?

Ms Stevenson: I will ask Kathy Morrison to respond. Kathy was the principal at the Brisbane Youth Education and Training Centre for seven years and is now the school supervisor for all the principals of the detention centre schools so is very well placed to provide some information on that.

Ms Morrison: You are correct that there are very strong vocational education and training programs whilst students are in detention centres that are designed to prepare them for the future. Obviously they are identified in high-interest areas for those student, but also in areas that it is believed that they will be able to gain employment post detention if education and training is not the right thing for them.

In terms of supporting them following release from detention, there is a range of things that we do. Some of them may be around handing back to the school that they are going to and supporting that school where possible. Another thing that the Department of Education did back in 2020 was to establish Vocational Training Queensland to address the identified service gap for children involved in the youth justice system, both in the community and those exiting detention who had significant difficulties maintaining their mainstream educational enrolment.

Through partnerships with youth justice service centres, special assistance schools, community-based organisations and state schools in all eight education regions, VTQ provides both literacy and numeracy vocational qualifications for students aged 15 years and older and differentiated intensive literacy and numeracy interventions for students aged 10 to 14 years. To date, there are 82 partner sites across Queensland with a student enrolment of 848, and that is specifically to assist in transitioning students out of detention where, as Hayley mentioned, there is not always a really neat fit for them. This is that soft landing, if that is what you want to call it.

CHAIR: Member for Burleigh, I am trying to get everyone to get their second question in so I will come back to you.

Ms BUSH: We are all very aware that schools are such fantastic hubs for their community and they are at ground zero in seeing what is going on for kids and their families. We have heard from others throughout the submissions around the importance of place-based responses and multiagencies coming together, co-designed with community. Did you have any comments on either the work you are doing in that space or opportunities that you see for education to have more of a role in that area? Is there anything happening in that area?

Ms Stevenson: Absolutely. I think we all know that our school principals and our schools are really innovative when they see that there is an issue and quite often will make those informal links and wraparound supports, but more formally one of the initiatives under Equity and Excellence is our precincts initiative. That is really about formalising that whole-of-government approach within a community place base.

Two place-based precincts are being established currently—one in Mount Isa and one in Bundaberg. For those precincts there is a principal who is appointed and there is a governance structure and really formalising the links with other government agencies and non-government organisations to ensure that coordinated support. Each of those precincts might have a bit of a different focus on what they are attempting to address. In Mount Isa it is around that engagement and ensuring students are attending school and are on those meaningful pathways. My understanding for Bundaberg is that it is around employment pathways and strengthening those school and industry links.

It is also about ensuring all of the schools in that precinct work together as a whole. It is not about a school competing with the school down the road but sharing resources. If one school has a fantastic facility that is providing an area for industry to work, then students from the surrounding schools having access to that. That is the precincts model.

There is also the Partnership Initiative. Off the top of my head, there are 32 schools, or it might be more, participating in the Partnership Initiative and that is where in looking at the data we have identified those communities as being low socio educational advantage. Then it is about working really flexibly in those places to ensure that those schools are able to attract experienced principals,

offer incentives to retain staff, ensure that if there are any initiatives that are being rolled out that they are included and are preferenced in that, recognising that for some of our communities there will always be a need for that additional support.

They are our formalised structures, but we also know there are other hubs that are in place. We are working with philanthropists around setting up schools as the hubs of communities as well. Even from the learnings from our wellbeing package, particularly with our GPs in schools and schools having psychologists and social workers, our schools are then forming a student wellbeing centre, a place where parents feel more comfortable coming into the school as well. I do think there is quite a lot that is happening in that space. That is because schools recognise that they are not able to address all these issues alone. It actually requires the efforts of all within the community and that includes government agencies as well as community groups and volunteer groups.

Ms BUSH: We have had different departments talk about place-based responses—DATSIP, Health and now you. Who takes the lead in that or is it determined by whatever the pressing issue is locally? I am curious. We now have all these different things happening with different agencies leading.

Ms Stevenson: We were having a discussion about this yesterday, actually. If we are going to commence a precinct in a particular area, the first thing is to see what is already established and what the governance body is. We do not need to impose it over the top but work with what is there and ensure that we certainly have a strong education leadership at the table that is able to make those decisions.

Mr PURDIE: Taking you back to my previous question you took on notice about data, I think I specifically spoke about suspensions and the correlations between people on DOCS orders. Can I also include in absenteeism which we have spoken about? Is that data you would have? I thought about it when you were talking about it before. It is an offence in Queensland to not ensure that your child is going to school. I have been involved in instigating proceedings against parents and caregivers for truancy. There is a process that has to be approved by the DG et cetera. What is the process when the state is the carer of a child that is not going to school? I am assuming the DG has not ever recommended that the state or DOCS be charged with the truancy offence for not ensuring that a child is attending school. What is the process when a child who is under the care of the state is not attending school?

Ms Stevenson: It would be that strong engagement with the relevant child safety officer who is responsible for that young person. We would look to address whatever the issues are to that young person attending. As I did say, the attendance rates are actually quite comparable for that group. Generally children in care attend our schools frequently. If they were not, it would be probably the guidance officer or in our regions we have a position called a principal adviser student protection. They would liaise directly with the relevant child safety office and say, 'Hey, we have a concern around this child. Can you tell us what is happening here?' and see the reasons for that occurring. Sometimes with placement instability there might be a period of time for that young person, as they are settling in, that might impact their attendance. Our approach would really be supportive to overcome what the barriers are to education.

Mr HARPER: In my many representations to Minister Grace I am constantly reminded that we have over 1,300 schools. How many of those are primary schools?

Ms Stevenson: This might be a good one to pass on to Robyn. I think we have around 700. I think it is between 700 and 800 primary schools.

Mr HARPER: With GPs in Schools and counsellors and social workers, I think you mentioned there were around 50 high schools at the moment.

Ms Stevenson: Fifty schools in the GP program.

Mr HARPER: You can take this question on notice as well. Are social workers and other wellbeing people in high schools or primary schools?

Ms Stevenson: They are across all of our settings. The psychologists, social workers and additional guidance officers are primary, secondary—P-10 to P-12—special schools and education centres in the detention centres. They are across all of our state schools. We are currently in the third year of rolling that out. I believe we currently cover 70 per cent of our state schools, with the rollout of the initiative due to complete in June next year which we anticipate will cover the remaining 30 per cent of schools. We have currently employed 466 additional wellbeing professionals, and they are located across the state across every single region. Some of them work across a number of schools. For some of the hard-to-reach schools or schools where it is difficult to attract staff, we are starting to investigate other, more flexible options as we near the end of the rollout.

Mr HARPER: The context of that question was, in looking at our terms of reference and tackling the issues in front of us right now, if we do not break the cycle, in 10 years we will be sitting around having the same conversation. It is really important that we look at interjurisdictional reoffending rates. Last week we heard that Victoria has one of the best reoffending rates and they have announced a \$200 million package over four years of mental health and wellbeing leaders into their 1,800 schools. Are you aware of that program?

Ms Stevenson: Yes.

Mr HARPER: Can you provide any commentary? Are we heading in the same direction? This is for the committee to go forward and make recommendations.

CHAIR: Can we take that on notice?

Ms Stevenson: Yes.

Mr McDONALD: I am really interested in the consequences for action with some of the youth in terms of, again, the time taken on behavioural management aspects for teachers dealing with this cohort and not being able to attend to others in schools. I understand from your SDS that where that occurs in the schools there has been a change in the way the behavioural management system operates and that principals and deputy principals now cannot escalate to a point of suspension without there being a physical assault. They actually have to go through all of the processes. They called it a 'soft launch' of a change to the behavioural management electronic system. The principals cannot go in and override that system. They have to go through this linear process. Surely our professionals and teachers should be able to self-determine behaviour management at a school. If the principal cannot help his young cohort of teachers in the school with behaviour management issues, then I think what we are measuring is wrong.

Ms Stevenson: I am not sure of that account, because our principals retain the unfettered autonomy to issue a school disciplinary absence based on the reasons set out in the legislation. There has been discussion about the importance of maximising learning days for our students, but we would certainly not expect any staff or students to be in a situation where there is violent or aggressive behaviour in a classroom where they feel unsafe. Certainly, our principals would be able to issue a disciplinary absence for any of those means. I would be very happy to share with the committee the different reasons that can be used for a school disciplinary absence.

CHAIR: Can you take that on notice as well?

Ms Stevenson: Yes.

Mr McDONALD: Could you investigate that, because I have very good information about that?

Ms Stevenson: Yes, I am happy to take that information.

Mr TANTARI: Being a regional member, I would like to explore a little more the regional youth engagement service. I understand that it is located throughout the state. Does it only become engaged when a child hits 30 days of consecutive nonattendance? What else might trigger a referral for this service? What works? What does that engagement service do with families? What about the children who are not at that threshold and who clearly need support? What do you do in that area?

Ms Stevenson: Our Regional Youth Engagement Service are people. It is service; it is not an actual place. When we used to call them a 'hub', people thought that you could visit a hub, but it is a service. I might ask my colleague Robyn to talk about the work that they do around the threshold for that particular service becoming involved, because we have a continuum of service offerings that are school based as well as regionally based. It is also about ensuring that that service is focused where it is needed and not overlapping with other service provisions.

Ms Rosengrave: By way of background, this has been a really successful initiative for us. We have had over 5,000 young people who have engaged or re-engaged in the service. The purpose really is about working with the young person and the person's family and about engaging with the services available within the region and within that school community to support the young person back into school. We do have thresholds of 30 days but, if there is a young person we recognise prior to that 30 days that we could get in with that support to get them back into school, then we will do that on a case-by-case basis. That could be for a range of reasons. It could be some of the young people that we identified who are in our care and we recognise that we may need support to get them back into school and re-engage with learning or training.

While it has a 30-day threshold, it is not something that we hold tightly to because we also are very aware that we want young people back at school as soon as possible as we know the value and importance of education. We also know the importance of engaging the other agencies in this. Unless

we know the background of the young person, we cannot then put the appropriate strategy into place to support them. It could be a mental health issue. It could be that they have other complex matters that are getting in the way of their re-engaging with learning. We look with the other agencies and services to provide that support to get them back in.

Mr TANTARI: The other part of the question was: what work do you actually do with the family?

Ms Rosengrave: We work very closely with the families, because often it can be that the families are not comfortable and confident with education themselves. Many times we have families who have not had good histories in their own backgrounds around the value and importance of education. It is about working with them, trying to build that trust and understanding about how important education can be for their child. We then can work with the family to understand that a bit better. We can work with them engaging with community. Often it is our First Nations young families and communities that we are working with. We try to engage with the community and with elders within the community to show them how important it can be for their young person to be engaged in learning. We do try to work very hard with families to encourage them to value the importance of education.

Mr TANTARI: Is that engagement with families a multiagency approach as well, given that you are in education? If you were to engage with a family that less than desirably wants to engage with education, for whatever reason they may have, would it be a multiagency approach?

Ms Rosengrave: Yes, and we look to our other services and agencies to support us with that work.

Mr HART: If a school or a teacher identifies the early state of criminality in a student, what steps would the school or the Department of Education take? Are there any specific programs you can refer that child to?

Ms Stevenson: With that, we work closely with our partners in Youth Justice if a young person has had contact with Youth Justice. We are also about ensuring that we look after the young person, their education and their engagement. We would want to wrap around the support and keep them retained in education. Say a young person engaged in offending behaviour on the weekend but it does not impact on the safety of what is going on at the school, we want to keep that child at school. We work closely with our colleagues in Youth Justice to provide the support around those students. If a young person is at school, those students would have access to, say, our guidance officers, youth support coordinators and wellbeing professionals. It would really be about the support inside the school. If they are disengaging and involved in other offending behaviour, it would be working with the youth justice service centres around that.

I am not aware of any programs particularly around identifying students on an offending pathway being segregated and providing them just with the intervention. There is a whole lot of risk that would be associated with that around unfairly identifying young people. It is much more of that supportive approach. What supports does this young person need in their life particularly to overcome so that they can engage in learning? We talk about wellbeing and support for learning, because we know the protective factors of education. Our core business and our core focus remains delivering that education.

CHAIR: Wonderful, thank you. I am mindful of time. I will just ask a couple of questions that can be taken on notice. Further from what the member for Burleigh asked, it would be enormously beneficial for the committee if somehow we could get a map. Through the hearings, the constant is the importance of earlier intervention. The earliest we have heard was zero to five and zero to eight. There are a lot of spans. If we could get some kind of map to understand the process from an education angle when behaviours indicate that something is not going quite right.

We have information and have been told that there are some real difficulties in the space for teachers. They have a process to go through in reporting and working with parents when there are behavioural issues. When that cannot be resolved, it is then escalated to what is called a subcommittee or team within the school. If it is then not resolved, it goes to the principal who goes through a process as well including, again, with the parents. If it is not resolved, it then goes to region. I cannot figure out—and we do not have enough time—whether that is where the youth engagement hub is.

We are hearing that because there is no mandatory way—and this could be with behaviours or absenteeism—even when it goes to region, it needs the permission of parents or the carers for the recommendation from that hub whether it be to attend flexi school or something else. It would be of

great benefit if we understood that as well as the time frame from that first time. Is it a year that all of that process goes on for? Could it take two years? I know that could be a bit of work, but I think it would help us enormously.

We have learnt and have heard so much in your submission. There is an incredible amount of work being done. You should be totally congratulated. As the volume of work is so huge, it would help us enormously. Also, can you take on notice how that operates for remote Indigenous communities? Also, if we could understand how specialist and staffing issues, which are happening across the world, may impact that. I do not know how those services are going to those remote communities, as remote communities are difficult and expensive to access. That would be huge.

Another question was in relation to training and vocation within any sphere. Is that mandatory? Is that voluntary? Within watch houses, detention et cetera, what are the numbers? What percentage are actually participating? Do the FlexiSpaces, which I think are fantastic, incorporate a youth worker? We have seen the incredible results in flexi schools, but the relationships with youth workers are paramount.

Mr McDONALD: There was a question we did not get to. We know that disengagement rates are very closely linked to criminality. There is a question on notice No. 250 to which you can refer. There has been a growth of 4,422 back in 2020 to 5,823 in 2023, which is quite significant. We would be really interested in understanding why and what specifically is being done, because that cohort are the ones who from the evidence go on to commit criminal action.

Ms Stevenson: The cohort of disengaged?

CHAIR: Yes. Thank you so much. That was huge. We deeply appreciate that you have taken the time with us today. You can imagine we have so many more questions, but those questions taken on notice will assist us. A reminder that the date for the responses to those questions on notice is 18 December, just a week before Christmas—how divine! Thank you so much again. Have a really lovely holiday break once we get there. Thank you.

Proceedings suspended from 11.01 am 11.15am.

CREARIE, Ms Mary, Executive Director, Programs, Department of Housing

RAINE, Ms Chantal, Acting Deputy Director-General, Housing and Homelessness Services, Department of Housing

STEVENS, Ms Angela, Acting General Manager, Service Delivery, Department of Housing

CHAIR: Would I welcome officers from the Department of Housing: Ms Chantal Raine, Acting Deputy Director-General, Housing and Homelessness Services; Ms Angela Stevens, Acting General Manager, Service Delivery; and Ms Mary Crearie, Executive Director, Programs. Would you like to make an opening statement before the committee has questions for you?

Ms Raine: Thank you, Chair. I would like to acknowledge the traditional owners of the land on which we meet today and pay my respects to elders past, present and emerging and extend that respect to First Nations people here with us today. Also with me today are Ms Mary Crearie, Executive Director, Programs; Ms Angela Stevens, Acting General Manager, Service Delivery; and our support staff Madonna Cuthbert, Robyn Faulkner and Larissa Knight.

We thank the committee for the opportunity to provide a briefing on aspects of the terms of reference relevant to the department. I hope that the written briefing in response to the committee's initial questions, dated 27 November 2023, has been of use.

As you would be aware, the department works with all customers, including young people, their supports and decision-makers, to understand their housing needs and connect them with services and supports. This includes working with Youth Justice and Child Safety to make and accept referrals and share information about young people in need of housing assistance and support. The department uses its full range of housing assistance, products and services to deliver the right solution at the right time to meet people's housing needs. Young people and their families can access housing and homelessness services including social and private housing assistance, remote Indigenous housing, homelessness support services and crisis accommodation delivered by the department directly or funded by our service providers.

In 2022-23 almost 12,000 young people aged 10 to 24 years were assisted across Queensland by specialist homelessness services. In 2023-24, 64 specialist homelessness services were allocated \$48.5 million to assist young people across Queensland, and through the 2023-24 budget the Queensland government will be delivering an additional \$18.1 million over two years in new funding to enhance and expand housing and homelessness services for young people. This includes \$13.4 million to enhance services at five existing immediate supported accommodation services and \$4.7 million to deliver 13 new specialist mobile support services. The department also actively participates in the implementation of the Youth Justice Strategy and is represented on key governance committees, including the multiagency collaborative panels.

In 2022 the Department of Housing undertook extensive engagement with young Queenslanders and representatives from government and community agencies working with young people to inform its response to *Towards ending homelessness for young Queenslanders from 2022 to 2027*. This includes young people with a lived experience of homelessness alongside youth justice and child protection systems. Towards ending homelessness is a policy and framework to improve housing outcomes for young people. It is backed by a \$29.8 million investment across four years through to 2025-26. There is also \$10 million per annum ongoing from 2026-27. This includes 25 commitments to strengthen homelessness and housing responses to young people across the human services sector and better integrate with critical services including education, health, employment, child safety, and youth and adult justice. Good progress has been made implementing this five-year policy and framework, including commitments specific to young people engaged with the youth justice system or those at risk. A key action is the construction of 38 new housing units that will deliver an innovative program of housing with onsite support to provide early intervention approaches for at-risk families in Brisbane with the aim of preventing young children entering the child safety system.

On 28 November 2023, just last week, the Minister for Housing launched a new product called Youth Housing Essentials, providing assistance to young people 25 years or under transitioning from government services, including temporary supported accommodation, care, corrections, youth justice and youth foyers to support them into housing. We heard from young people that they often struggle to make ends meet during the critical transition phase of moving into a home of their own, with limited funds to cover moving costs and necessities such as furniture and white goods. Youth Housing Essentials is short-term, one-off assistance of up to \$5,000 per household to support this transition.

Victims of crime are being assisted through the Helping seniors secure their homes initiative being piloted by the department in Cairns, greater Cairns, Townsville, Mount Isa and Toowoomba local government areas. This program provides practical home security improvements and is supporting community safety. A total of \$30 million has been funded for this initiative. There has been a strong uptake in the pilot areas and very positive feedback from those who have benefited from safety and security enhancements.

As the committee would be aware, there is unprecedented pressure on the housing market nationally and in Queensland which has been driven by a range of factors including previously historically low interest rates, material and labour shortages, and Queensland having the largest net population gain from interstate migration into the country. The Queensland government is increasing the supply of social and affordable housing for all Queenslanders, including young people, through the QuickStarts Qld program, the Housing Investment Fund and other innovative solutions. The Housing Investment Fund will support 5,600 social and affordable home commencements across Queensland by 30 June 2027, and 3,265 new social housing homes will also commence under QuickStarts Qld by 30 June 2025.

This concludes our opening statement. I hope this information has been of use to the committee. We are very happy to answer any questions from the committee.

CHAIR: Thank you.

Mr TANTARI: We have heard from a lot of witnesses that, when a young person transitions out youth detention, housing is one of their most important needs. How does the department assist with that transition from detention and how does it look from your end? What do you do to ensure young people have a home, particularly those who do not have anywhere to transition to—they do not have a home to go to? Does your department just provide a roof over their head, or do you provide additional supports to help them remain in their house and maintain it?

Ms Raine: When a young person is transitioning from care, we have 22 Housing Service Centres across the state, and we have a frontline team that works in collaboration in local places and works with staff in terms of youth justice and other staff across government to collaboratively work through each case and look at conducting pathway planning for the individual in terms of what are the housing solutions that we need to work through for this young person. In terms of housing solutions, there are a range of housing solutions that we do work through. It is based on an assessment with the young person and what their needs are.

We often see outcomes. It might mean that the young person transitions into a social housing home of their own. It might mean that they would prefer to stay within their broader family household, and we help them to then transition back into that. We also have examples where we help young people move into private rental properties, and we provide products and services and private market assistance to do that. Alongside that, we also broker the services of our specialist homelessness funded services. They then help to case manage that young person in terms of settling into their new property and their new home and providing a range of assistance. Our staff in our Housing Service Centres do, and are, on a range of local place-based response groups both across government and with services across the human services sector.

We will then also look to ensure that we have safe accommodation, that it is available, that we are looking at what factors are required for this young person to stabilise in their new home and that they have the supports in place—we broker supports—and we ensure that they have ongoing, available access to the services they require. As I said in my opening statement, it includes things such as Youth Housing Essentials. In this case, that would be someone who would be a very prime candidate for us to assist them with everything through to household goods—whether it is moving costs, set-up costs, white goods—to ensure they can establish themselves in the home and that it is theirs.

When they are in the home we also can provide them with supports, financial assistance and tenancy skills. That means that our specialist homelessness services come in. We work with the individual and the household in terms of cooking skills, financial management skills and any other things they need to stay in their home and be well equipped to be a great tenant and member of the community.

Mr McDONALD: In relation to the 38 new homes that you mentioned before, has that project commenced? Has it broken ground? When are they expected to be built? Are there any interim plans for that project?

Ms Raine: The 38 units of accommodation I referred to are centred around two main projects. Those particular projects are based in Brisbane in the first instance. In terms of where they are, there is one that is close to construction commencing and there is another that we are in the process of planning. We have also been working with some of our homelessness providers here in Brisbane in terms of helping to co-design what the operating model will be at both of those sites. We would see them coming into action in the next year or two.

Mr McDONALD: There is one that is commencing?

Ms Crearie: There are two sites: one is more advanced than the other. I do not think either of them are actually fully in construction, but one is about to start construction and should be delivered within the next 12 months or so. The other site is in the advanced design stage at the moment, and we are about to go out and procure the construction of that site. It is going to possibly not start construction until later in 2024, so possibly the construction will be around about 12 months or so after that.

Mr McDONALD: What is the planning for that? What are the interim targets to open those houses? Is that two of the 38 in the next two years?

Mr PURDIE: Is it two houses?

Ms Crearie: No, they are groups of flats. There are 38 in total that are in construction. They are in two separate groups.

Mr McDONALD: Two lots of 19?

Ms Crearie: No, actually, it is not. I may have to correct that number. I might need to refer to the document.

CHAIR: If you could take it on notice just so I can make sure that everyone gets questions in.

Ms BUSH: I just have a couple of questions to wrap my head around a few things. It might have been something I should have put to Child Safety, so let me know if you cannot answer this. For young people who may not want to be at home, who may not fall under the care of Child Safety because there are parents who are technically willing and able, so they are not under orders but they are not going home, who engages with those young people who might be self-placing in really precarious circumstances? Who is the lead agency with those kids?

Ms Raine: When we have a young person who is not engaging with their existing household, we, as a department, definitely engage with these young people and work through pathway planning with them in terms of a housing solution and other supports they might need. We also do have our specialist homelessness services across the state that are dedicated to servicing young people, and they also may interact with these young people. In terms of the specialist homelessness services, under their guidelines, they provide services for young people, 16 and over. If someone is completely disengaged and may well be sleeping rough, we have mobile services that go out and basically are in locality and they interact with people who are sleeping rough.

Just this year, within our department, we set up a Critical Response Team who work hand in hand with local councils, QPS, Child Safety, Youth Justice and our specialist homelessness services. They commenced in April this year. They have been working predominantly in Brisbane, because that is where we are seeing probably the higher numbers of people who are disengaged and sleeping rough. They are doing that in a really collaborative effort. We have a team who have a mobile van. They go out daily to the hotspots across Brisbane, and they are moving into other parts. In other parts of the state, we also have examples of that where our staff from our Housing Service Centres are going out with our funded specialist homelessness services and doing mobile outreach, engaging with young people and, where required, engaging with other services in supports as well.

Mr PURDIE: We spoke before about transitioning young people from detention into housing. Do you have any numbers or data to show youth coming out of detention and how many you place and how many might end up self-placing or homeless or at a loose end, essentially? I am happy for you to get that to us on notice if that is not currently available.

Ms Raine: We do have some data in terms of young people transitioning. I will hand over to Mary.

Ms Crearie: We do not require young people to disclose if they are transitioning from justice. There may be occasions where we have had a referral through a justice worker et cetera, because we are aware that people are exiting youth institutions et cetera. However, the data that we have of Brisbane

young people who are in the age cohort between 10 and 17 suggest that we assisted just below 5,000. Some 4,991 young people in that age group were assisted by specialist homelessness services in 2022-23, and the number of those who disclosed that they were engaged with the youth justice system was 85.

Mr PURDIE: Only 85 out of nearly 5,000?

Ms Crearie: Yes.

CHAIR: Out of those referrals or applications, what percentage were able to be housed?

Ms Raine: The data that Mary just talked through was the number of people who were assisted through our specialist homelessness services. Our other entry point is through our Housing Service Centres. In total across the last year, we assisted in total—

Ms Stevens: With regard to the data, we know from a Youth Justice perspective that they report a daily number of 461 serious repeat offenders, and we know our department has 60,000 tenancies that the department and our provider also manage. The majority of serious repeat offenders have formerly lived in public housing, and approximately 25 per cent—a small number—currently live in households with families across the state.

What we do know from the data, too, is that, not unexpectedly—I am sure the committee has heard from other agencies—many young people are experiencing multiple and complex factors that impact their housing needs; they are domestic and family violence, disability or health conditions. We know, too, that having safe, secure accommodation is really important for young people to return home once they have exited youth detention.

CHAIR: Sorry, I need to get clarity on this. What we have heard is that there are youth remaining in detention because there is no accommodation to go to. What I am trying to understand is, within that process, if assistance cannot be provided, is that why youth are remaining in detention, because there is nowhere to go? We have heard about the volume of youth who have been helped. Do we have any statistics on those who have not been able to be helped, or a time frame that might lead to that being shared with us?

Ms Raine: We are on the multiagency collaboration panels across the 17 locations and then we also have other location-based working groups as well. In terms of people transitioning from care or custody, we have assisted all of the young people who have come through those panels to date and into housing. When we are aware of a young person and the need is presented, we absolutely work through all available opportunities and outcomes. What we have seen in terms of our involvement with the multiagency collaboration panels is that there is a variation in those housing outcomes. In some instances, the young person is transitioning back into a social housing household of which they are not necessarily the tenant, but they are a household member. There are also examples where we have transitioned people into their own accommodation in the private market. All of the opportunities that we have had through those panels we have then provided and assisted people to get housing outcomes. If it is through other means that those young people are not coming through the panel efforts, and that they are coming through our front door, either via our specialist homeless services or via our Housing Service Centres, we do have data associated with that which largely looks at the young person group as a whole.

For instance, in 2022-23, there were 4,453 households which received private market assistance where at least one of the applicants was aged under 25 years at the time of assistance. We do use a range of different forms of housing assistance and we have data which looks across the young person cohort in full. That is why, in terms of developing the report *Towards ending homelessness*, we have also been really mindful of the feedback that we got from those with lived experience, and incorporating other aspects and other initiatives that can then lower any barriers in terms of the young person and of getting housing.

CHAIR: Can that data be provided as a response to a question on notice? I want to get to the next member and I am mindful that I am chewing up some time here.

Mr PURDIE: To finish that line of questioning, in talking about those placements for younger people—and you have even assisted them into the private market—what age range are we talking about? What is the minimum age that you will help someone sign a lease? Do you have data on the age brackets of people you have helped into independent living?

Ms Stevens: We do, yes. Where a young person is commencing a social housing tenancy, the department must be satisfied that the young person signing the tenancy agreement understands what they are signing and their tenancy rights and obligations. If they are under 18—so younger people—then they could be supported by another government agency such as Child Safety or a specialist Brisbane

homelessness support service to support that person to live safely and sustain their tenancy. We know that as at 28 November 2023 there are 127 active social housing tenancies where the main legal tenant is 18 years of age or under. Of those, 69 per cent are people who are 18 years of age and 31 per cent are people under the age of 18.

Mr PURDIE: What is the youngest?

Ms Stevens: The department acknowledges people's privacy, but what I can advise is that the youngest person with a tenancy agreement is a 14-year-old in a regional area with 24-hour care.

Mr HARPER: I am from Townsville. For the benefit of the committee, can you provide a brief update on the Townsville Youth Foyer? When is it likely to open and how many people will it house? If I can paint this scenario: could a young person coming out of Cleveland Youth Detention Centre, perhaps successfully transitioning into the Transition 2 Success program, be eligible to move into the Youth Foyer? I know there is a criteria around earning and learning, so can you just unpack that for us?

Ms Raine: In terms of the Townsville Youth Foyer, it will be the third youth foyer that the department has built. We have two other foyers across the state. Certainly, the youth foyer model is a very successful model. The model itself is billed as being for young people up to the age of 25 years who are, as you said, either earning or learning.

In terms of where the Townsville Youth Foyer is at, I had the pleasure only recently to actually get up on site and do a bit of a tour. We are very close to finalising the construction for the youth foyer in Townsville. We also have established and are now supporting specialist homelessness services. They have actually commenced, so they are bringing staff on board. We are hoping to commence with our tenants from early 2024.

Mr HARPER: How many?

Ms Raine: It will be up to 40 units of accommodation, accommodating individuals. In terms of what the model provides and what it will bring to Townsville, it is the opportunity where young people who do not have other forms of assistance will be supported through on site—supported accommodation through our specialist homelessness services. They will have a unique unit of their own, their own place to call home, but they are within a small community which is a very supportive community. It allows them to be brought in and to grow, and to grow a level of independence that sees them very successfully transition into their own place beyond the youth foyer.

In terms of the young people who are eligible, there is a requirement that the people need to be at least on a trajectory to either undertaking study—we have examples of young people in high school who are in our youth foyer on the Gold Coast—whether that be secondary or even moving into TAFE and/or tertiary study, or they are working in some capacity. It is a great model. We have looked across the world in terms of being informed about this model and also across other jurisdictions. Certainly, under the report *Towards ending homelessness for young Queenslanders*, we definitely have been. The success stories have been highlighted as a result of the two foyers that we have here in Queensland already and the third that we are embarking on opening in early 2024.

Mr HARPER: Very cleverly placed—between the TAFE campus and the Pathways College is NRL Cowboys House—so well done and thank you.

Ms Raine: Thank you very much.

Mrs GERBER: Sorry for the technical difficulties at the start, but I did not miss your presentation. I could still hear you; you just could not see me. I am reading from your submission. I wanted to ask you about HP7. Before I get to that, I have a follow-up question from the member for Ninderry's question in relation to the children who are under the age of 18 who have signed tenancy agreements with the Department of Housing. Have you connected all of those children with Child Safety as well? Do they have a child safety case officer managing them as part of their independent tenancy with the Department of Housing?

Ms Raine: There are a small number of young people who are classified as tenants with us. Yes, they are supported by other government departments as well as it is a requirement that we have other support services that are working with them.

Mrs GERBER: Are you saying they are not necessarily connected to Child Safety—that not all of them are connected?

Ms Raine: In terms of?

Mrs GERBER: In terms of having a case officer. They are under the age of 18, yes?

Ms Raine: Yes. In terms of having supports and services, yes, we do involve Child Safety. Absolutely Child Safety is a primary agency that works alongside the young people whom we provide the tenancies to.

Ms Stevens: I was going to add that some of those tenancies are also supported by our community housing providers who are specialists in the space for young people. While some of them will be connected with Child Safety, they do have a provider who specialises in that area as well.

Mrs GERBER: What happens with those children—I am still talking about the cohort who are under the age of 18—who have an independent tenancy agreement with housing if they come into contact with the criminal justice system? What happens from a housing perspective? What happens to their tenancy? What happens to their lease? Are there any automatic things that flow from them being cautioned by police or coming into contact with the criminal justice system?

Ms Raine: In terms of coming into contact with the criminal justice system, we are obviously supporting them as a tenant of the property. If that results in that particular young person being detained for a period of time, then it enacts—and it is actually a provision that enacts across all of our social housing properties. There is a period of time where someone can be away from their home, so there is an allowable period of time. If the person returns home within that time, then they retain their tenancy. If it is for an extended period of time, it may result in the need for us to end the tenancy and work with them further when they are exited in terms of a new tenancy.

Mrs GERBER: What is the period of time that you will hold their home for them? The circumstance you are giving there is when the child goes into detention or is removed from the community as a result of a youth justice order they can return to their home, but what is the period of time that you will hold the home for? That is the most extreme circumstance. We know that before a child is detained or removed from the community they may have come into contact with the criminal justice system 20 times in relation to a caution or a number of other interventions that might happen. Is there anything that happens from a housing perspective if that child first comes into contact with the criminal justice system to the lease, to their arrangements, to them living by themselves in the community?

Ms Stevens: Five months is the time frame generally, but there are exceptions that can apply to each of those. That is the time frame. In answer to the second part of your question about what happens to support the young person, the department works in an integrated manner with other multiagencies and multidisciplinary areas. We would be working with the person's caseworker or support worker or the facility to understand when that young person would be released and ensure that there were provisions happening around that. We are monitoring that absence because we also need to make sure that the property is being maintained and cared for. Then we are ready to support that young person with wraparound support and work as part of that intensive case management approach with other services.

Mr TANTARI: I have looked at your submission. In particular, some witnesses previously have indicated to the committee that young people who are homeless or at risk of becoming homeless can often fall foul of the system and come into the youth justice system. You have the Youth Housing and Reintegration Services. I note that that service is available in the location that I represent in Hervey Bay and other locations across Queensland. Would you be able to inform the committee a little bit more about that service? In particular, I note that as part of a service you have an after-care service. What is that and what does that look like?

Ms Raine: We provide 64 specialist homelessness services across the state for young people. It does mean that we have funded services that undertake after-hours servicing. We have supported accommodation. We have emergency style accommodation. We even have youth hubs that we also fund where young people can access and walk in to access assistance.

The program that you referred to in terms of young people accessing services to reintegrate, that is one of the programs that our specialist homelessness services provide for young people. That is primarily focused on what is the support that is required. It is very much around a case management model—assessing the need of the young person. What do they need in terms of reintegrating and establishing a home within a household and within a community? That case manager then works with that individual.

We have some really great examples. The Queensland Youth Housing Coalition operate across Brisbane—north and south of the greater Brisbane area. They have very longstanding case managers. They work for that individual. I often hear some amazing stories. A young person may have been 16 and walked in to access their service. They were sleeping rough. They have now returned five years later to say, 'Thank you for helping me with my first home. Thank you for sticking

by me and here I am. I am now working. I will always remember this interaction and the support that you provided me in my younger years.’ They are very dedicated workers and case management models focused on attuning to the person and what the person needs, accessing services and wraparound supports.

Mr TANTARI: To the second part of my question, what is the after-care service? I am interested in unpacking what that is that you provide to the clients.

Ms Raine: It does differ in different locations. In terms of the after-hours service, it does mean that there are housing staff who work within specialist homelessness services who are available and can conduct outreach after hours and can assist people with emergency accommodation and support to then ensure that they have somewhere to stay and then work with them and case manage them into longer term housing and supports.

Member, if I may, I want to go back to the YHARS program. In terms of the official funding of that program, it is actually funded by Child Safety. It is a great example where we continue to collaborate with a range of agencies across the state and pool resources and funding to ensure that the young person is at the centre and that supports are wrapped around them.

Mr TANTARI: That is under the national agreement; is that correct?

Ms Raine: Yes, that is right—the National Housing and Homelessness Agreement.

Mr McDONALD: We know there is a rental crisis at the moment. There is a very large shortage of housing and that is no surprise. At an earlier hearing the committee was told about a young person who left detention and was provided with a tent—to be accommodated in a tent. Do you understand the circumstances of that situation? How many other people have been provided with tents when they leave detention?

Ms Raine: What you described is something that we would hope does not occur. We would be very much wanting to look into that particular example in full. Our specialist homelessness services are provided with funding which includes the ability for them to broker people. If someone is requiring emergency accommodation, they can broker young people into hotel and motel accommodation.

In terms of the provision of tents, it is absolutely within our guidelines across all of our specialist homelessness services that tents are not an appropriate form of housing. What I can say is that there have been one or two examples that I have myself asked our staff to investigate further. When we have investigated those further, it was some not-for-profit organisations not within the housing and homelessness system that handed out those tents. In response to that, I asked our area manager, our regional director and our specialist homelessness services locally to go and sit down with that particular not-for-profit organisation and talk through the fact that we have all of these services, funding and ability to provide much more dignified forms of accommodation and housing for people who might be facing those circumstances.

Ms BUSH: The situation you have just described is one that we have tapped into in my electorate—the service around brokerage and getting people into accommodation, and that has worked quite well. Where we have heard of rumours of people being given tents, it has been revealed that it is often sometimes someone in the neighbourhood who has done that. When we have unpacked it, it has not been quite correct.

I wanted to come back to young people who might be sleeping rough and self-placing. I think it is important to get on the record that not all young people sleeping rough and homeless are a risk and are committing crimes. In fact, it is often the other way around. They are very vulnerable and very at risk of being victimised themselves. I thought it would be a good opportunity to hear what you are doing in that space when you identify a young person who is a victim of crime and the types of referrals and responses that you might have for that person.

Ms Raine: I mentioned earlier the fact that we have set up within the department a critical response team. This team is going out with Child Safety, Youth Justice, QPS, local council and also our specialist homelessness services. We map out hotspots across the state. We have daily reports coming from each of our regions in terms of if there are hotspots emerging et cetera. We then ensure that we send staff out and in a collaborative manner. There are examples where hotspots appear. I might use an example in Brisbane that emerged. It was under one of our local bridges here in the city. We planned the outreach very carefully. We engaged with all of the young people. We then sat back down with all of our colleagues across government. We went through all of our records and we looked at where all the various youths were. Obviously we were focused on: do they have a house? Do we need to provide a house? What other supports are needed et cetera?

In terms of that young group, they were congregating in a spot. Sometimes these young people are not ready to engage, but we are going out daily and really trying to establish good relationships with the young people. When we looked across just that particular instance, there were a number of young people who actually had homes—some of them were social housing homes—so we assisted them to go back to them as far as Ipswich et cetera and the Gold Coast. There were some who did require some support through Child Safety and Youth Justice. Then there was a very small number whom we then assisted into emergency style accommodation and have worked to really solidify an ongoing housing outcome for them.

Mrs GERBER: Sorry to labour the point, to go back to my question, but I really wanted to drill down to understand what is happening with the 100 or so young people who you just spoke about between the ages of 14 and 17 who have their own tenancy agreement with the Department of Housing. If they come into contact with the criminal justice system, and not detention—I am not talking about being removed from their home and put into detention—and the Department of Housing are notified that this young person has come into contact with the justice system, that is they have been cautioned, they have been before the courts on a minor offence or they are doing a community service order, what is done, from a Department of Housing perspective, at that point in time to turn that youth around and what happens to their tenancy agreement? They are by themselves, right?

Ms Raine: If there was an incident where there was involvement, the Department of Housing may not be made aware of that. Our relationship is obviously primarily with that young person as a tenant. Where it involves criminal activity or damage or issues associated with the home that that person is living in, then we have the ability under legislation, as any landlord does, to investigate, confirm or not whether the tenant was the actual young person who undertook the damage or did undertake criminal activity in the home. There is zero tolerance in terms of criminal activity in social housing homes. As we would do with any other social housing tenant, we would work through investigating the issue. If it was a serious situation, it may well result in the fact that we, as a landlord, need to pursue action through QCAT which may result in a warrant of possession and that person being evicted. That is a very extreme situation and it does have to relate to their role as a tenant within the social housing property.

When the department becomes aware of issues associated with that young person and they are needing other services and supports and it may impact their ability to actually stay in their home, we do work with other government agencies and we do access other supports to bring into the home and work alongside the young person.

Mrs GERBER: When you say 'bring supports into the home', are you talking about a case officer living in the home to ensure there is supervision?

Ms Raine: We have specialist homeless services that come in on a regular basis, but if it is at a point where someone is really struggling and requiring more supports and they are not able to sustain the tenancy, we may then look to activate a supported accommodation style of housing for that individual for a period of time, and that gives them the ability to be in this 24/7 intensive level of support, focused on building skills to then be able to be independent and sustain a tenancy of their own in the longer term.

Mr HARPER: I will put my North Queensland hat back on again. Can you elaborate on the Mount Isa trial? I know the department is working with the local community on an evidence-based trial of finding integrated ways to address key risk factors for youth offending, including homelessness, domestic and family violence? Are there any results coming out of that trial so far?

Ms Raine: In terms of the work where we are in partnership with other agencies and also local council and service providers in Mount Isa, our role is to understand and to work collaboratively in terms of the individuals that that particular group is working through and supporting. We absolutely delve deep into housing for that individual. There are examples in terms of the work that has been done to date where there are some of these young people who are in existing social housing properties who are members of a broader family unit. We have examples where we have then called on some of our specialist homelessness services. It was not that long ago where I was out in Mount Isa and I met with Centacare that is one of our specialist homelessness services there. What they have been doing in Mount Isa is they have been going into some of these households and providing in-home tenancy support and skills. There are some great examples in terms of working with households, right back to cooking, cleaning, financial management—those types of things—to really try and create the safe and stable environment that we could possibly help to create in that household. We also have some examples through the work we have done there in Mount Isa which has resulted in accessing some unique housing solutions for some of the young people as well.

Mr HARPER: I should have put that in context: we had a regional forum out there recently and this issue was raised. Thank you very much for your response.

Mr McDONALD: You mentioned in your opening, Chantal, the Housing Investment Fund. Can you tell the committee, given the rental crisis we are facing at the moment, how many houses are being built by that fund to date, given it was first budgeted in June 2021?

Ms Raine: In terms of the Housing Investment Fund, there has been a number of projects that this has facilitated in terms of injecting additional social and affordable housing into Queensland. As at 30 September 2023, over 1,600 homes have been approved for support, and this includes 116 which are under construction and 118 households in homes supported by the fund. There is quite a number underway. You may have seen that there certainly have been some announcements since the Housing Investment Fund was launched where there are some great examples where we are teaming up with community housing providers and with property developers. I think there was one in particular announced recently through the Brisbane Housing Company which amounted to quite an additional uplift in terms of social and affordable homes.

Mr McDONALD: I was particularly interested in the number that have been built. Was that 116, or are they under construction?

Ms Raine: In terms of the overall homes that have been approved under the Housing Investment Fund, the number that I have is that it is over 1,600 and that includes 116 which are currently under construction.

Ms BUSH: I want to pick up on the conversation that has been happening around the lack of a suitable accommodation being an issue for people transitioning out. I think what I might be referring to is more around bail and being able to be released into appropriate accommodation. I know under the Bail Act there is a provision that says that that cannot be the sole reason someone is declined bail—the lack of appropriate accommodation—but I think in practice it is a problem. That brings me to my question which is around the fast-tracking remand program in North Queensland and whether you have a seat at the table in that, what successes you are having in that, and whether you are seeing any opportunities to address that issue and getting kids off remand or into the community, supervised.

Ms Raine: We definitely do have a seat at that table. As a result, we are very much involved in point-in-time moments in terms of young people and then being able to assist and make sure that the pathway is there and available in terms of accommodation and then longer-term housing supports and outcomes.

Ms BUSH: So that program is looking positive?

Ms Raine: Yes. There is some great collaboration that is occurring. Our regional director is involved in a senior officer group. We then have our staff within our housing services and we also team up with our specialist homelessness services for young people in the Far North and alongside all of our partners across government. There are some great conversations being had and I think it is that holistic planning for the individual that is really taking shape there. It is kind of all aspects that I am seeing coming to fruition for the individual and what they need.

CHAIR: Because we have run out of time, I ask that you take a couple of questions on notice so that I am not holding everyone up. I am trying to wrap my head around the mobile service which you mentioned earlier. Firstly, is that an after-hours service, as in after 4pm? Later on you mentioned an after-hours service; I am trying to ascertain if that is one and the same. If it is, where is that available, and is it only for youth? If it is only available for youth, is the classification that 18 years is the cut-off date? We have heard a lot about neurological conditions and comorbidities and that there are people over 18 who might have the capacity of a 12-year-old, so how is that determined in the services that are delivered if 18 years old is the cut-off? That was a big question, but there are several parts to it because I really need to get my head around that.

The other question, further to the member for Lockyer's question, from my involvement with our local community housing providers, HIF is only one stream of funding available. In terms of all the different projects that are going on across Queensland, with all the different buckets of funding, plus the private partnerships and community partnerships, what is the total that is currently under construction and also in the pipeline? I am aware of a lot that are not at construction stage; they are being held up in DAs with councils. What is in the pipeline? What is the projection?

Ms Raine: Would you like me to start?

CHAIR: No, that is fine because I know that we have run out of time.

Ms Raine: I can very quickly, though, clarify that young people in terms of housing assistance and our specialist homelessness services is from 16 to 25 years, so it does go beyond the age of 18 years. We can absolutely come back to you in terms of mobile services and after-hours supports for young people. We would really appreciate giving you the full picture of all of the great work that is underway in terms of lifting up the number of social and affordable homes that are coming into Queensland, and that is through a range of mechanisms. It is the HIF, but it is also purchasing and constructing—

CHAIR: I just want that bigger picture. The reason I need to understand about the youth—I work in this space constantly—is we are seeing that we have a gap. Literally after 4 o'clock on a Friday, there is only the one emergency hotline, and when they respond and there is nowhere to go, that is when we are having to pick up. This involves adults, and I am trying to ascertain that we do not have any youth being put in that position.

Ms Raine: We do have some services that operate specifically for young people and provide supports beyond that 4 pm point. An example of this also, which teams up with the injection of additional housing that we have brought to fruition, is that recently we announced the fact that there is an accommodation site that we have acquired in Hamilton which will be just for young people. One of our specialist homelessness services will be on site operating that, and that will be for people who need emergency style accommodation. That is about to go live very soon.

CHAIR: We have chewed up more than we should have of your time. I want to thank you all so much for giving up your valuable time. It has been wonderful and we have learned a lot. I also want to give a shout-out to all across the regions who work constantly and do an incredible job in one of the hardest of times. This last period, since COVID, has been extremely challenging, and I know what they are confronted with, including mental health issues, within our communities. We all have those that are portraying as homeless but who actually have a house to go to, and I acknowledge how hard that is to deal with, especially around confidentiality where we cannot share that with our communities. I want to thank everyone for their work, and I am sure the rest of the committee does as well. I give a reminder that responses to questions on notice are due by 18 December. I wish you well for the holiday season. Thank you so much.

HUMPHREYS, Acting Assistant Commissioner Tom, Strategic Futures Command, Queensland Corrective Services

ROEDER, Deputy Commissioner Ursula, Community Corrections and Specialist Operations, Queensland Corrective Services

CHAIR: I now welcome officers from Queensland Corrective Services. Thank you for giving us your time today. I invite you to make an opening statement before we ask some questions.

Deputy Commissioner Roeder: Good afternoon, Chair, and members of the Youth Justice Reform Select Committee. Thank you for the opportunity for officers from Queensland Corrective Services to address the committee in relation to its inquiry into youth justice reform in Queensland. I am Ursula Roeder, the Deputy Commissioner of Community Corrections and Specialist Operations. Here with me today is Tom Humphreys, the Acting Assistant Commissioner of the Strategic Futures Command.

Queensland Corrective Services enhances community safety through humane, modern, sustainable and evidence-informed corrective services to maximise rehabilitation and to reduce recidivism. QCS is committed to playing its part in reducing crime and acknowledges the devastating effects that crime can have on victims. The QCS strategic plan includes an objective to reduce crime which is supported through key strategies to reduce recidivism, disrupt crime and improve responses to prisoners and offenders who are vulnerable or over-represented in the criminal justice system. QCS acknowledges that young people involved in the youth justice system who become chronic or serious offenders are at high risk of transitioning into the adult correctional system. Further, QCS acknowledges that young people involved in the youth justice system often come from disadvantaged backgrounds, suffer from mental illness or substance abuse and disengagement from school. QCS recognises these issues can all be drivers which contribute to a young person's offending behaviour and many adults involved in the corrective services system also experience these issues. As such, addressing key drivers for youthful offending may help to reduce the trajectory of youthful offending into adulthood and ultimately the demand on the criminal justice system. As the end point of the criminal justice system, QCS implements a range of strategies to address the causes of offending and reduce reoffending through prisoner offender-centric assessments, delivery of programs, psychological support, education, vocational training, employment, re-entry services and end-to-end case management.

Queensland Corrective Services aspires to better utilise the time prisoners spend in custody through increased exposure to rehabilitation programs and services to support desistance from further offending. However, we also acknowledge that this aspiration is tempered by the size of the adult correctional population and the practical limitations of delivering programs and services within secure institutions.

A key initiative which will help to address capacity issues is the commissioning of the Lockyer Valley Correctional Centre. The new correctional centre will aim to reduce the rate of return through enhanced case management, health and rehabilitation services. The new centre will be the first in Queensland to be purpose built to support end-to-end case management. End-to-end case management places the individual at the centre of case management with levels of service provided based on the individual's risks and needs which are screened for at the point of entry into the system, whether that be the custodial setting or the community setting. It enables the process to prepare an individual for release to the community to commence as soon as they enter the correctional facility. It is a widely recognised, evidence-informed approach, designed to reduce recidivism of individuals entering the correctional system. Currently, end-to-end case management operates in all of our women's facilities, the Townsville correctional complex and within all community corrections offices for eligible women offenders. QCS is pleased to assist the committee in its inquiry, examining ongoing reforms to the youth justice system and support for victims of crime.

While QCS's core business is the adult correctional system, QCS has been involved in supporting reforms to the youth justice system, including the electronic monitoring component of the youth bail program, transfer of sentenced and remanded 18-year-olds to adult custody, and multiagency collaborative panels. QCS is also committed to ensuring victims of adult crime are supported and have a voice through the QCS Victims Register. We welcome questions from the committee. Thank you.

Ms BUSH: Thank you, Ursula, for that clarifying sentence at the end because I was thinking about QCS's direct involvement in youth justice, and you have clarified that. I guess where I was going was the indirect link between the adult incarcerated population who may be parents of young

people and whether there have been any studies undertaken around the risk factor that that provides—the likelihood of those young people, if not supported, transitioning into a life of crime also—and what you are doing specifically to target incarcerated adults who are parents, to support the broader family?

Deputy Commissioner Roeder: I might talk firstly to what we are doing around supporting parents who have children who are part of the youth justice system and then I can come back to the evidence base. We have, through our processes, a number of parenting and family support programs that we currently offer for parents in custody, and they range from working within family relations to parenting younger children. We partner with a number of private and not-for-profit organisations to deliver those programs in custody and also we can in community corrections make referrals to the service providers in the community. The programs that we currently have available are Parenting under Pressure program which is delivered at Lotus Glen Correctional Centre via ATODS, and it is developed as an intensive multisystemic intervention based on three key models that have informed thinking around how to improve family functioning. It operates on a strengths-based model and is aimed at improving family functioning and reducing child neglect and complex trauma in high-risk families in children from birth to eight years of age.

We have the Transforming Corrections to Transform Lives initiative which is currently underway with Professor Susan Dennison from Griffith University. It is a trial intervention program developed in response to significant research and engagement with mothers in prison and key stakeholders. It aims to support mothers and their children to have safe, dignified and fulfilling lives and to break down intergenerational cycles of disadvantage and incarceration. It will be delivered to approximately 115 mothers in Southern Queensland and in Townsville Women's correctional centres, and to mothers and children in the community between January 2024 and June 2027.

We also have Bringing Up Great Kids which is developed for Shine for Kids. It is a parenting program. The program delivers an evidence-informed series of modules to educate parents on a child's brain development, emotional development, communication techniques and understanding children's behaviour. Bringing Up Great Kids is open to all women, including mothers, aunts, grandmothers, older siblings and carers with children in their care under the age of 18.

There is the Belonging To Family program which is also delivered by Shine for Kids and funded by Queensland Corrective Services. It is a cultural mentoring program for First Nations women in custody in the Townsville Women's Correctional Centre who have a child and are seeking to reduce their reoffending and re-establish their relationships with their family. We also do playgroups as well in all of our female centres.

Ms BUSH: The evidence base you were going to touch on as well.

Assistant Commissioner Humphreys: I can add some data to that if that would assist. Youth Justice publish a census and that identified that in 2022, 27 per cent of young people who are under supervision by Youth Justice have a parent who has been held in our custody at some point. Also, Professor Susan Dennison, who Deputy Commissioner Roeder just mentioned, her research suggests that about four per cent of children in Queensland generally have a parent who has been imprisoned at some point during their childhood.

Mr PURDIE: I was aware that you monitor DPSOs, none of which are young offenders. In these trials in Cairns and some other areas, do you just monitor youth on bail in those areas or are you responsible for monitoring all youths, on the back of that tough on crime announcement the government made a couple of years ago when GPS tracking devices were the headline of that announcement? Is QCS responsible for monitoring that whole program or just in these trial locations?

Deputy Commissioner Roeder: We are responsible for monitoring the young people whom the court has applied an electronic monitoring condition on as part of their bail across those trial locations.

Mr PURDIE: How has that gone? I can see what your capabilities are to do that, but we have been told in relation to GPS trackers that essentially the young person has to consent to wearing one and they have to go through training on charging it. We have also heard more recently, anecdotally from frontline police, that they are even being told not to ask for a GPS tracker because we are just setting young people up to fail because they are not going to do it. In these trial areas where you are monitoring these offenders, can you give us some stats on the success or failure or the numbers of people you are monitoring?

Deputy Commissioner Roeder: Yes. With respect to Queensland Corrective Services, we are just a service provider for the monitoring so we do not have any information on the young people who are subject to bail except for what we need to know to do the monitoring. That might be curfew

times or locations that they can reside at or locations that they cannot reside at. Our information is very limited. Then we will just monitor. If there is an alert with the monitoring system that we cannot resolve we will elevate that to the police and the police will coordinate a response. We are also not involved in the suitability. Once we get someone on board, we will enter them into our system, we supply the devices to the police and the police are responsible for applying and removing the device. In terms of the outcomes of the electronic monitoring, the only information that we really receive is about when to remove a young person from electronic monitoring. In terms of whether that has been successful or not, we really do not have that information available.

Mr PURDIE: You would have the numbers. How many people are you monitoring today?

Deputy Commissioner Roeder: We are monitoring three young people today.

Mr PURDIE: Do you know in total, since the parliament has enacted this legislation, how many people you have monitored?

Deputy Commissioner Roeder: We have monitored 26 unique individuals.

Mr PURDIE: And there are three currently?

Deputy Commissioner Roeder: Yes.

Assistant Commissioner Humphreys: Could I add on the legislative framework, this operates under section 52AA of the Youth Justice Act, which is important to note. None of the powers that Corrective Services has under the Corrective Services Act or the Penalties and Sentences Act applies. Our role is quite limited here. If you were to look at section 52AA(7), the chief executive of Youth Justice may ask us to monitor a young person and our role there is limited legislatively to remotely monitoring the monitoring device, contacting the child on a mobile phone in relation to an alert or a notification from the device and then giving information relating to alerts and notifications from the monitoring device to the chief executive of Youth Justice and the police.

Mr PURDIE: The technicalities around this are that it has been outsourced to you because you have experience in this field with DPSOs, essentially.

Assistant Commissioner Humphreys: We had existing capability.

Mr HARPER: I think it is important to note in the context of those 26 who have been monitored so far, that that is a sentencing option for the courts. Instead of going into youth detention, it is a condition of their release on parole or bail; is that correct?

Assistant Commissioner Humphreys: It is a bail condition.

Mr HARPER: Thank you. I just wanted to clarify that. I just wanted to make a comment: I had a meeting with the CEO of Shine for Kids in Townsville. That is an outstanding program. I understand there is some evaluation around some of the trial programs in Townsville. I do not know if you can speak to that at all.

Deputy Commissioner Roeder: Not at the moment with the evaluation process in place, but I can certainly get you some further information on that.

Mr HARPER: In your brief, as of 3 October there were 26, 18-year-olds in youth detention in Queensland and since the amendments in March there have been eight transfers to QCS custody. Are there any further updates on 18-year-olds going out into adult corrections?

Deputy Commissioner Roeder: We are normally notified about a young person transferring to our custody around the same time that Youth Justice will provide the prisoner transfer direction to the young person. There could well be young people that Youth Justice are considering that may not have had that decision made yet. As soon as that decision is made we will become involved. We work quite closely with Youth Justice to ensure we have all that information available for that transfer and that enables us to determine appropriate placement for that young person.

Mr McDONALD: Going back to the electronic monitoring, can you talk us through the alerts and notifications situation, why they happen and how many of those get escalated to the Queensland Police Service?

Deputy Commissioner Roeder: There is some information that I may need to take offline just for security purposes, but, for example, alerts could include things like communication—no comms, is what we refer to, or a low battery alert. If a battery is going low, for example, our staff might ring the young person and request that they charge their device. For example, if they were not complying with that et cetera, we might then contact the police and say we have a low battery, we are going into no comms, the young person is not charging their device. The police would then determine their response from there. There are other alerts around tampering with the strap. If someone is attempting

to remove their device or just tamper with it in general, that will alert. If they have restrictions around geographical locations, so places they cannot go, we have those alerts and if they have curfews around timings of when and where they can be out of their residence, that will alert. Basically, the alerts are really geared towards conditions which might be on an order which they might have to adhere to or the ability for the device to remain connected to the central monitoring station through a communication network. We will always attempt to contact the child in the first instance. If we cannot do that or the information we receive indicates that they are being noncompliant then we will immediately alert the police and then the police will negotiate a response from there.

Mr McDONALD: Operationally, if there is a battery running down, do the police go out and change the battery or do Corrective Services officers in the location; how does that work?

Deputy Commissioner Roeder: The battery can be charged at home. Police have the equipment. We provide the equipment to the police and the police fit the devices and remove the devices from the young people.

Mr McDONALD: You just look at the monitoring; where they are?

Deputy Commissioner Roeder: Yes.

Mr McDONALD: How accurate are they—is it within metres; is it 100 metres or five metres?

Deputy Commissioner Roeder: That is a complex question to answer. There are lots of environmental factors that might indicate the proximity, but our staff are very well trained and have had a lot of experience in reading the electronic monitoring system and investigating movement et cetera to be able to determine locations. If they are moving in and out of an area which might have lower network coverage they will then contact the child by phone to confirm.

Mr TANTARI: At one of our other hearings the Australian Workers' Union submitted in regards to some staffing challenges they were having at detention centres. Would you be able to comment on their submission, particularly the impact those staffing challenges would have on your detainees?

Deputy Commissioner Roeder: Can I clarify: was it Corrective Services staffing?

Mr HARPER: Sorry, that was Youth Justice run detention centres.

Mr TANTARI: My mistake, sorry.

Mr HARPER: It has been information overload.

CHAIR: Do you have another one question?

Mr TANTARI: No, Chair.

CHAIR: Member for Currumbin, do you have a question?

Mrs GERBER: Thanks, Corrective Services, for being here today. I just wanted to go back to a question from the member for Thuringowa who talked about transferring young people from youth detention into adult corrections once they turn 18. We have heard that there has been a bit of a delay in that transfer process. Can you talk the committee through the delay—why that is and what is being done about it?

Assistant Commissioner Humphreys: Thank you for the question I have to reiterate that the transfer process is a Youth Justice process under the Youth Justice Act. I will try to have a stab at it. I think first it needs to be said that in terms of eligibility for transfer, the young person must have two months to serve under sentence in custody. That is an important point in youth justice because I am sure the committee has heard that a very large proportion of young people in detention are on remand so they are not eligible for transfer. They must have been sentenced to a further period in custody and that period must be more than two months. That is the starting point. Our understanding is also that there is a natural justice process that applies to a determination to transfer a young person and they may seek an order from the Childrens Court that they remain in youth detention. There are a few steps that need to be gone through before the transfer process commences and they come to us.

Then there are always individual factors. For example, if the young person has other charges and needs to appear in the Childrens Court and is on remand for those charges then they would not necessarily transfer to us. In our discussions with Youth Justice, the advice that has been given to us is that the number of 27 is not actually correct. The true number is significantly less than that. I cannot put an exact number on it, but we understand it is probably less than about 10 at this point. When the transfer process is communicated to us, then we will receive them as soon as practicable.

Mrs GERBER: When you say it is about 10, are you saying there are 17 young people who are on remand who cannot be transferred anyway? Is that what you mean when you say the figures are not correct? What do you mean when you say the 27 figure is not correct?

Assistant Commissioner Humphreys: I cannot speak to the individual young people because they are not our prisoners, to use an adult term, but the advice we have been provided is that number. While they may be 18 years of age, they are at various points in that process and have not completed the process where a transfer determination has actually been made.

Mrs GERBER: For the 10 that you say are delayed, can you talk us through those reasons?

Assistant Commissioner Humphreys: About 10.

Mrs GERBER: About 10, sure. Can you talk us through what is causing that?

Assistant Commissioner Humphreys: I really cannot say anything more than I just did, except that from our perspective it is not a delay because the transfer determination has not been made.

Ms BUSH: I am particularly interested in women in prison and I will make the connection to YJ, which is that around 60 per cent of the women prison population have children or might be the primary carers of children so we have a high percentage of women who are incarcerated who have kids at home. I am interested because if I think about my own child and if I were away for a long time, her ability to just pick up the phone and call me or for me to read a book to her at night would make a real material difference in her life, and if she did not have that that would have a real impact on her. I am interested in what practically, beyond programs, is being done to keep that connection alive for women and their children and what is QCS doing while women are in prison to drive down future recidivism for women particularly?

Deputy Commissioner Roeder: In all our women's facilities, on entry there is a question around whether they are the caregiver or parent of a child. We do not retain any data that we can retrieve from that because it is a case management discussion, but during that process there will be, on intake, discussions around access to children, do we need to involve caregivers in order to bring children in to visit. There are visit facilities there that are specifically designed to accommodate children with play equipment and toys et cetera to try to encourage that interaction. We do run playgroups in our correctional facilities, again to try to encourage that interaction between mothers and their children. We work, where appropriate and where required, with Child Safety in order to look at whether mothers can have access to their children and what that might look like. We also have capacity under our legislation to have children in custody with their mothers up until school age.

Mr PURDIE: I want to follow up on the member for Lockyer's questions about the practicality of these GPS tracking devices. I think you were saying they are geocoded. If someone breaches their bail or curfew and they leave a premises, that would trigger an alarm; is that right?

Deputy Commissioner Roeder: Yes. It depends on what program has been set up for an individual as to what their requirements are.

Mr PURDIE: What is the process then? They breach their bail, it has triggered that they left their premises, what do you do then?

Deputy Commissioner Roeder: If they have left their premises and that is outside of the information we have been provided that they are allowed outside of a curfew time, for example, we will notify police. Police will then have a response. We will not necessarily know what the outcome of that is because that is about individual youth management. The next advice we will hear might be in relation to whether we need to change conditions—it might be that the young person has changed address, and we would change that on our system—or if the device has been removed. If a young person has been arrested, the police may then notify us that they have removed the device and to remove that from our system, so we will no longer track it. We do not necessarily have any information between the point of providing the police with a notification of an alert and then what action the police may take. We will just be updated in terms of anything that impacts the monitoring.

Mr PURDIE: Talking about tracking, and mindful of the fact this was sold to the public as the worst of the worst offenders were going to be tracked, when this alarm is triggered and someone has breached their bail, can police then call you and say, 'We're in the house now. Can you tell us where they are? Can you pinpoint where they are, point us to their location and we'll take them into custody?' Do you do that?

Deputy Commissioner Roeder: Yes. If the police are requesting movement information from us, there are provisions for us to provide that to them.

Mr PURDIE: Is that done in a timely manner, or do they have to send that in writing?

Deputy Commissioner Roeder: No, they can contact us.

Mr PURDIE: When they go flat, you call the police. Is that all you do? More often than not is that rectified, or do some just remain flat and you never hear from that offender again?

Deputy Commissioner Roeder: That is probably again maybe a question for the police. We will get updates if it impacts the electronic monitoring information that we have. Generally, for example, if it is flat and the police or Youth Justice attend the young person's home, the young person charges their device, and that will come back on for us, and we will see that the device has been charged and we will not have any further action on that alert. It has been resolved. If we have questions, we can obviously follow that through with the police.

Ms BUSH: I will come back to my question around women. I will probably fixate on that a little bit. I appreciate this is probably a matter more for government policy. I know in some jurisdictions they are looking at more innovative practices, particularly for women, and looking at things potentially like even access to teleconferencing and devices so there is more connectivity for a young child—not just in the prison, but when they are at home; they can pick up the phone and ring mum or connect with mum in a better way. Are we exploring anything like that? Perhaps you might want to take it on notice. Are other jurisdictions doing any work in that space that we should really be looking at in Queensland and being a bit more innovative in that area?

Deputy Commissioner Roeder: The Lockyer Valley Correctional Centre will look at in-cell technology, which will be a first for our correctional system.

Ms BUSH: Is that for women?

Deputy Commissioner Roeder: That is a men's facility, but that will be a purpose-built introduction. We are currently exploring options for in-cell technology in our existing prisons. As a retrofit build, that is a little bit more complicated. We are definitely looking at ways we might be able to improve those communications and access for women, particularly while they are in their cells, so they might have access to educational materials or parenting information et cetera and ways that we can streamline phone calls and direct contacts through an in-cell technology option. That is being explored.

Ms BUSH: Are you doing work with children and families? I imagine there must be quite a big stigma for them—or they may feel that—if they have a parent incarcerated. What is the work that is happening for the family in understanding and explaining that and supporting people to facilitate contact who might not feel comfortable taking a child to a prison?

Deputy Commissioner Roeder: We have offender development staff in correctional centres. If a woman wants to access her child or has concerns about her child coming into prison, our offender development staff can make contact with the caregiver of the child to facilitate discussions around what that might look like in terms of visitation and to allay any concerns. If a woman is exiting custody, we also have the same option to try and link back into family. We contact re-entry providers, and they work very closely with women leading up to their exit from custody into the community. We will also link in with women's families and provide that continuity of care from custody into the community. In community we have our community corrections officers, who will also work with other government agencies and service providers if there is a need from a woman in relation to her child.

I mentioned the Transforming Corrections to Transform Lives initiative a little earlier. That is a dedicated intensive case management project that directly works with a woman who is a mother and her social supports and wraparound services to support that woman and her children through the custody system and into community.

Mr McDONALD: Going back to electronic monitoring, because we want to make sure people have confidence in that system, you mentioned that if you provide an alert about a battery or a device being tampered with and then it comes back online, you will see that. If it does not come back online do you contact the police to find out what has happened in eight hours or 24 hours?

Deputy Commissioner Roeder: We will alert the police and give them that information. They may come back and query us about the specific nature. We do push through information in relation to alerts even if we are not elevating to the police to say, 'We can't resolve an alert'. Even if we have resolved an alert, we will still push that information through to the police so they have all of that information. If we have an alert that remains unresolved then there is an alert protocol document between ourselves, the police and Youth Justice that will talk to all of those activities and agreed processes and protocols that take place, depending on what the alert is. There could be times where we would continue to reach out to the police, but, by and large, that is once we have notified police. They may involve youth justice—

Mr McDONALD: Is that what you were talking about earlier as something you could share in camera? Is that what you were talking about?

Deputy Commissioner Roeder: We can provide information in relation to, for example, if a device were removed, the last known location and those types of things. We can provide anything that the electronic monitoring system information contains. We can provide that to the police to assist them to respond to the alert if there was a device removal to locate that young person.

Mr McDONALD: How many devices have stopped working or been tampered with?

Deputy Commissioner Roeder: I would have to get back to you with that information.

Mr McDONALD: You had 26 unique offenders so there may be many more devices, I understand.

Deputy Commissioner Roeder: Yes. Devices might need to be swapped out from time to time. If that occurs, the police will have a stock of devices they can apply or change out if required.

Mr McDONALD: What is the maximum time an alert has been outstanding and how many of those have there been over a period of time?

Deputy Commissioner Roeder: I would have to take that question on notice and come back to you.

Ms BUSH: I feel like we are playing table tennis. I am probably at the end of my questions. I guess I am envisaging when mum goes into prison and there is no-one left to care for the children, so they are removed and put into the care of a foster carer under the protection of Child Safety. What statutory obligations does that carer then have to ensure that connection? I know that is a question more for Child Safety, but are you aware? If a mum said to you, 'I'm really concerned. My child was supposed to visit me last week. I can't reach the carer. They haven't come out,' how do you help facilitate and make sure that connection is happening?

Deputy Commissioner Roeder: Our staff would normally make contact with Child Safety and facilitate a call between Child Safety and the mother to have those discussions about what is occurring with her child and how they might be able to obtain contact.

Ms BUSH: In terms of the psychological responses in care for women in prison, can you give us a sense of what that looks like? Are they able to access psychology services to cope?

Deputy Commissioner Roeder: They can access psychologists. We also have counsellors. Our psychologist team runs resilience programs, which are about coping strategies. They can also access our educational staff if they are looking for personal development programs or access into those services. Queensland Health also operates within our facilities and provides medical services and prison mental health services.

Ms BUSH: Is there substance abuse assistance?

Deputy Commissioner Roeder: Yes.

Ms BUSH: I imagine that when a woman exits out of prison we want her to have every chance of succeeding, getting those kids back and caring for them so those kids do not go on to have any criminal activity.

Deputy Commissioner Roeder: Yes.

Mrs GERBER: I just wanted to ask a quick follow-up question—back to monitoring devices—from the member for Lockyer's question. The case example that you were giving, how many alerts have been outstanding in that case?

Deputy Commissioner Roeder: I would have to get that information. I do not have that information on me, sorry.

CHAIR: It is going to be taken on notice, member for Currumbin. Do you have a follow-on question at all?

Mrs GERBER: No. Thank you, Chair.

CHAIR: If there are no further questions on this side, I have a couple of questions. I am not going to monitoring; I am going to change it up just a little bit. I want to go back to the purpose-built facility at Lockyer. We have heard over the hearings about the importance of developing smaller facilities. Can I just ask whether you have any information—all of these questions can be taken on notice because I realise we are short of time—as to why that decision was made? Was it decided from an operational angle that this would be preferable to moving to smaller detention facilities? If you wish to take that on notice, that is fine.

Assistant Commissioner Humphreys: I think I can answer that. By way of context, it is important to note that the adult correctional system, the prison system, has as of today around 10,400 prisoners. We are a very large operation. To meaningfully respond to our capacity requirements we need to have facilities that have a lot of beds. Using Lockyer Valley as an example, which will have 1,536 beds, you can do the maths, if you were to divide that up into a smaller number of facilities, as to just how many facilities we would need to reach that total. We are limited in terms of our locations. Not every community wants to have a prison near it.

We have the Gatton precinct, which is master planned for a number of facilities of various sizes. There are some practical limitations there. These are secure facilities and necessarily; this means they have to have certain services. They need to have a secure perimeter, a management team and all the services that Deputy Commissioner Roeder just spoke about in terms of psychology, mental health and health. All of those have to exist no matter what the size of the facility so an economy of scale comes into play here. It is a matter of government policy obviously, but it would be cost prohibitive for us to run very small facilities with all of those services.

CHAIR: In saying that, within the larger facility, does the purpose-built unit have within it the smaller units?

Assistant Commissioner Humphreys: That is an excellent question. All of our prisons are a modular design. We have two general types of accommodation within a secure facility. We have what we call secure, which is secure cells; that is the sort of traditional cell that everyone is familiar with. We also have residential accommodation, which is generally a unit of six to eight beds opening into a common area with a kitchen and a communal bathroom. That is set up to enable prisoners to develop their independent living skills. Our unit sizes range from 12 beds in some cases to up to 50 cells. That varies for each centre. When I say 1,536 beds, that is not 1,500 prisoners who will ever be in the same place. It is very much a modular system. That is for safety and security but it is also about case management of those prisoners.

CHAIR: I asked this question earlier. If a 17-year-old with cognitive or neurological disorders and the capacity of a 12-year-old is transitioning across to an adult facility, how is that dealt with? Is there a full assessment done within the youth justice space and in adult corrections? How is that managed? Is that within a type of smaller unit and case managed?

Deputy Commissioner Roeder: Where it is known that a youth is transferring from youth detention into QCS custody, we will receive that notification and advice. Wherever possible we will try to interview that young person before they are received into us so that we get information pertaining to their circumstances from them and we get to understand how they might personally cope in the adult system. We also receive from Youth Justice a general transfer form which outlines any additional information that we might need to know about that young person. That could be anything related to safety and security needs, legal status, any program and education participation, any key assessments that would give us information in terms of their cognitive functioning, emotional regulation et cetera.

We work quite closely with Youth Justice during that period to gather as much information as we can so that when we receive them we have a good understanding of what their needs and their challenges might be. That allows us to make a placement decision about where we should best place the young person. Placement decisions will also consider their ties to family, kinship and cultural needs, as well as if they still have outstanding court and where that court might be located. The placement decision is based around those factors.

CHAIR: If someone is 18, 19 or 20 years old and has not come from the youth justice space—so they have never been detained before—is that same assessment done?

Deputy Commissioner Roeder: If they come directly to us, say, from court rather than from youth detention, then our adult processes will be followed. On reception to the centre and before they are placed in the centre proper, we will do an immediate risk needs assessment which identifies any immediate risk needs they might have in terms of harm to self or harm to others. We look at whether or not they have association issues with anyone in custody. We look at whether they might have a reported impairment or disability. We will also maybe talk to them about when they have completed school education and do some things to see whether they can read or write to determine their level of functioning. We then look to any concerns they might have about placement. There will also be screening done by Queensland Health with respect to medical needs. Once we have that initial information which identifies anything immediate that we might need to know, including substance use, we will then make a placement decision that allows us to manage them in that short period while we undertake further assessments and planning about a longer term placement. We will screen for

cognitive impairment, and if we identify through that that we think there might be a level of cognitive impairment then we can work with our psychological services unit to have assessments done and make referrals to the NDIS program.

CHAIR: So you would pick up if somebody had, for example, fetal alcohol syndrome?

Deputy Commissioner Roeder: We would identify if we are seeing impairment in functionality, and then we would work with Queensland Health. Queensland Health will also do their medical screening.

CHAIR: Within the juvenile justice space, there is a declaration as to a serious repeat offender. When they are transferred over to adult corrections, what actually happens to that declaration?

Assistant Commissioner Humphreys: I think we would have to take that on notice. When they come to us, they are in the adult system. That declaration applies in the youth justice system. I am not aware that it persists past becoming an adult.

CHAIR: I am just curious as to if we do have serious repeat offenders. There is not a lot of difference between 17 and 18 and then how that is captured within the system. You can take that one on notice.

Mr PURDIE: I want to ask a question on behalf of the member for Lockyer. When is the facility at Lockyer due to come online?

Assistant Commissioner Humphreys: We are expecting to commission that in the 2024-25 financial year.

Mr PURDIE: And that will increase capacity by 1,536 beds essentially?

Assistant Commissioner Humphreys: That is correct.

Mr PURDIE: You talked about the residential accommodation and independent living arrangements you have. I know youth detention facilities are not your wheelhouse but you have done well to try to help us in that area. We hear a lot about young offenders in maximum security being in isolation for 23 hours a day. At Cleveland, Brisbane or other youth detention facilities, are there any residential independent living, less than maximum security, options available to youth?

Assistant Commissioner Humphreys: I would not be able to comment. It has been about 20 years since I visited those facilities.

Mr PURDIE: That might be a good question for us to ask someone else. I am mindful of these capacity issues and it sounds like we are all looking forward to this facility opening in Lockyer. Watch houses, youth detention facilities and prisons have been struggling with capacity issues. I am mindful that you have a lot of contact with watch houses, because logistics and transferring prisoners around to court and from watch houses into remand et cetera is a big part of your job. Now that there are a lot of young people in watch houses and two watch houses have been taken offline—one at Caloundra and more so the one at Caboolture that is no longer available to police to use as a watch house—how is that going to impact on you transferring adult prisoners to court at Caboolture? Can you see any adverse implications to you—and I know you cannot speak on behalf of the police—from an adult watch house being taken offline to become a youth detention facility at Caboolture?

Assistant Commissioner Humphreys: I am not aware of any concerns within QCS about that plan. Our priority is always to assist police by bringing prisoners who need to come to us as soon as possible and that will continue. No, I am not aware of any concerns.

Mr PURDIE: Are there arrangements about when you have to bring a prisoner in for court at Caboolture as to where they will be held—they are normally kept in holding cells pending court or during court and then returned to a holding cell—if that facility is not available? So you have not done any risk assessment there of how you are going to manage that yet?

Deputy Commissioner Roeder: I can find out information in relation to that and come back to you. That would be our Escort and Security Branch.

Ms BUSH: I am also interested in the new prison at Lockyer but in other ways. This might be a matter of policy and I know, Tom, in another life we did some work on this. I want to talk about targets to actually drive down and reduce prison numbers. I recognise there is a growing population. I also recognise that we are investing in strategies to drive that prison population down. I guess my question has two parts. Are there targets that the department is trying to meet to drive down the prison population? Can you tell us anything about projection modelling and how that works?

Assistant Commissioner Humphreys: The role of Corrective Services is to receive people who are ordered into our custody by the courts and then we have the Parole Board that determines release, so prisoner numbers are not something that we target in terms of going up or down.

Ms BUSH: But you do provide programs in detention which should be contributing to that stat?

Assistant Commissioner Humphreys: Yes. We certainly take great efforts to reduce recidivism, to rehabilitate people and to assist them in how they re-enter the community. That is certainly correct.

Ms BUSH: But you are not responsible for a target.

Assistant Commissioner Humphreys: No. To my knowledge, there is no target in terms of prisoner numbers. I am not aware of that, with some exceptions, and South Australia would probably be one, where there is a whole-of-government target in relation to prisoner numbers. That flows into your question in relation to forecasting. Our forecasting is not so much about picking a target and then trying to achieve that; it is more about if the current trend—whatever that is over whatever window of time—continues, where do we expect to end up and then what operational considerations we need to think about in terms of managing that number of people.

Ms BUSH: So probably a bit of population growth and current rates forecasting.

Assistant Commissioner Humphreys: There were some questions around 18-year-olds who come in our custody. I wanted to point out that we have currently 227 in our custody who are 18 and 19 years old and we have 96 who are 18 years old. I wanted to reiterate that we actually are quite experienced in managing people of that age and most of them do not come to us via a transfer from youth detention. That is not to say that they have not previously been in the youth justice system. No doubt many of them have.

CHAIR: I want to thank you both so much for giving us your time today. It has been invaluable. I remind you that questions taken on notice are due on 18 December. To all correctional staff across the state, we wish you a merry Christmas and a good break if you get one. The time for the public briefing has expired. I declare this briefing closed and the committee will take a break before returning to hold a public hearing at 1.45 pm.

The committee adjourned at 1.13 pm.