

QUESTION TAKEN ON NOTICE

ADDITIONAL BUDGET ESTIMATES HEARINGS: 21 FEBRUARY 2011

IMMIGRATION AND CITIZENSHIP PORTFOLIO

(243) Program 4.2: Onshore Detention Network

Senator Cash asked:

Have there been any changes made at Villawood detention centre by way of staff processes, or care provided to detainees following the three deaths and subsequent protests?

Answer:

The Department's contracted Detention Services Provider, Serco, has implemented a number of actions since the deaths and subsequent protests at Villawood Immigration Detention Centre (IDC) in 2010, particularly around policy and procedures, but also around enhanced training and the positioning and use of emergency response equipment.

Changes have included improvements to operational and procedural guidelines for reviewing clients' security risk assessments; more clearly defining and communicating responsibilities during emergency type incidents; and improving processes for accessing communications equipment, translators and staff support mechanisms.

Serco has also implemented additional critical incident management training, negotiation training, and improved training in the area of command centre (operations) management. Other improvements include enhancing communication equipment carried by officers and increasing accessibility to first aid equipment, including defibrillators.

The Department's contracted Health Service Provider, International Health and Medical Services (IHMS), has also made a number of operational changes following the three deaths and subsequent protests at Villawood IDC.

From 29 November 2010, a new mental health policy reflecting better practice approaches for the identification and support of people in immigration detention who are at risk of self-harm and suicide - the Psychological Support Program (PSP) – was operationalised at Villawood IDC. This new policy replaced the existing 'Suicide and Self Harm' (SASH) Protocol. At the time of transition to this new policy, clients at Villawood IDC who were being monitored under the previous SASH protocol, were transferred to PSP, according to clinical need and associated risk level.

From a staffing perspective, from November 2010, increases were made to mental health staff numbers at Villawood IDC. Increased supports were also put in place to manage crisis situations, with processes streamlined to better support people who may have witnessed traumatic events. This includes conducting group debriefings,

which use routine mental health and psychological screening (and language appropriate) tools to identify 'at risk' clients. In addition, daily collaborative stakeholder meetings are now also held, with a focus on clients who are placed on PSP, as well as preventative health. This also includes multi-disciplinary care planning for all clients developed via group meetings, with input provided by DIAC case management, Serco, IHMS, the specialist torture and trauma provider and other providers, as necessary. This has resulted in better profiling of clients to ensure a client's total psychosocial history is understood. It also allows for more active management of clients by pro-actively improving emotional health skills and managing any identified risks.

From a health promotion perspective, IHMS counsellors are continuing to develop mental health promotion materials and tools in discussion with the Department, including:

- Services available to help with stress management;
- Raising the awareness of mental health matters; and
- Explaining that mental health is about helping people manage 'stress' during difficult times.

In addition, counsellors are running practical relaxation groups as well as sessions on drug and alcohol education and management.