



**ACT**  
Government

# Offender Reintegration

## Programs Compendium

Justice and Community Safety Directorate

# 1. Purpose

- 1.1 This document provides ACTCS staff in case management roles with information regarding the programs and interventions offered through the Corrections Programs Unit (CPU).
- 1.2 This document is intended to inform case management discussions and the case planning process.
- 1.3 This document is not intended to inform referrals for specific programs and interventions, noting that this may be governed by policies and/or operating procedures, such as the *Referral Process to Corrections Programs Operating Procedure* and *Custodial Case Management Programs and Interventions Operating Procedure*.
- 1.4 Where programs are owned by other jurisdictions, this document has kept their program manual and compendium phrasing, and program integrity requirements, with annotation to reflect the equivalent ACT position.
- 1.5 Where required, the Assistant Commissioner, Offender Reintegration, may establish Operating Procedure/s under this Compendium.

# 2. Scope

- 2.1 The Programs Compendium (the Compendium) is available as a resource to all ACTCS staff, with relevance to staff in case management roles, and the CPU.

# 3. Definitions

## 3.1 Offender

A person found guilty of an offence. Applies to those in the community and in custody.

## 3.2 Detainee

A person held in custody. Includes pre and post finding of guilt and/or sentence.

## 3.3 Remandee

A person held in custody prior to sentence, or when a sentence is stayed under appeal. Remandees are not eligible for the offence specific, or offence related programs connected to

the remand charge(s), however, may be eligible for other programs in respect of unrelated offences for which they are sentenced. A remandee who is sentenced for a certain type of offending and is also on remand for similar offending will not be eligible until sentenced for all similar matters (e.g., multiple family violence offences).

### 3.4 Appellant

Where a defendant has been found guilty of an offence, they may appeal that finding (appeal against conviction) and/or appeal against the length of sentence (appeal against sentence) imposed by the Court.

### 3.5 Programs

For the purposes of this document, programs are group interventions intended to reduce criminogenic risks, or to address health, wellbeing, and social issues that are linked to offending.

### 3.6 Interventions

Group or individual engagement around health (including mental health), wellbeing, disability, and other biopsychosocial issues, intended to manage behaviour, trauma, and improve access to other programs, services and supports. Interventions may be clinical and/or linked to offending.

### 3.7 Services

Other services provided to offenders and/or detainees that are distinct from those provided through CPU. These are primarily provided by external agencies and individuals and managed through ACTCS Detainee Services, where provided at the Alexander Maconochie Centre (AMC). These may not have direct links to offending. There are other services that offenders and/or detainees may access independently from ACTCS, or where ACTCS may not have ongoing oversight or communication. These are not detailed in this compendium.

### 3.8 Program Integrity

Program Integrity is one of the five key principles in offender rehabilitation, along with the Risk, Needs, and Responsivity (RNR) principles, and Professional Discretion (below). Program Integrity means that a program or assessment should be delivered/undertaken in accordance with the evidence base and rules upon which it was developed. If program delivery does not have integrity, this evidence base cannot be relied upon to demonstrate effectiveness.

### 3.9 Professional Discretion

The principle of Professional Discretion acknowledges that there are atypical circumstances where the application of professional judgement will lead to a better outcome, or where rigid application of a model, assessment, tool, or similar, is likely to be counterproductive. An example of this is that serious or special interest offenders may not return moderate or higher risk levels from an LSI-R assessment, however, may still require an intervention.

## 4. Introduction

- 4.1 Offender Reintegration through its CPU seeks to provide detainees and offenders with opportunities to engage in quality programs and interventions, to assist with rehabilitation, reducing the risk of recidivism, and to ultimately promote community safety.
- 4.2 Programs and interventions may benefit the detainee or offender by providing them with skills and strategies to manage situations, feelings, and emotions, with a view to making more positive choices.
- 4.3 Meaningful participation in appropriate programs and interventions may also provide evidence that a detainee or offender has engaged in their case plan, which in turn may support applications for parole, classification, and/or employment.
- 4.4 Given the nature and size of the ACT jurisdiction, several of CPU's program offerings have been acquired from other jurisdictions. Where this is the case and where appropriate, program integrity and eligibility requirements have been adhered to as far as possible, with permission sought over any jurisdictional divergence.
- 4.5 It is important that case plan goals and therefore referrals are derived from thorough assessment. It is also important to consider the limitations of assessment tools such as the LSI-R in isolation, which considers risk in terms of likelihood but not severity. The LSI-R has predictive validity in respect of general recidivism but is not an accurate predictor of specific types of offending, including serious violent or sexual reoffending, with offenders with solely these types of offences often returning low LSI-R scores. In such cases, referrals to CPU with the appropriate contextual information are encouraged so that additional assessment methodology can be applied.
- 4.6 The Risk Principle (Andrews and Bonta, 1995) states that the intensity of intervention should be proportionate to the risk of recidivism, and that targeting higher risk offenders is likely to be the most beneficial in terms of community safety. There is a body of evidence to suggest that recidivism risk can be increased for lower risk offenders who are given a disproportionately intensive intervention. However, lower risk detainees should be afforded the opportunity to meet expectations in respect of classification or parole, and therefore referrals to CPU with relevant context are encouraged.

- 4.7 Sound assessment will not only identify the level of recidivism risk, but also which areas should be targeted, in accordance with the Needs Principle. This principle relates to dynamic risk factors, or those that are amenable to change and that may warrant a referral to CPU for a program or intervention. Referrers are encouraged to refer to CPU based on assessed and prioritised need, noting that there may be multiple competing needs that cannot be addressed simultaneously.
- 4.8 Responsivity factors are those which make a person more, or less responsive to intervention, with the Responsivity Principle being the third part of Andrews and Bonta's Risk Needs Responsivity model. Responsivity factors may have implications for a person's suitability for a program or intervention. Referrers to CPU are encouraged to provide information in respect of any known responsivity factors to inform the assessment and allocation process. An example of this would be a person with an acquired brain injury and cognitive impairment that had implications for participation in a group program. A person who meets eligibility criteria for a program may still be deemed unsuitable based on responsivity and/or other factors during the CPU assessment stage.

## 5. EQUIPS

- 5.1 Explore, Question, Understand, Investigate, Practice/Plan, and Succeed (EQUIPS) is a suite of programs which may be undertaken individually, or holistically where multiple identified criminogenic needs are identified, or a higher intensity intervention is required. Detainees in custody and offenders in the community are eligible for EQUIPS, with sessions being scheduled in accordance with need and demand.

### 5.2 EQUIPS Foundation

EQUIPS Foundation is a general therapeutic program available to all offenders who meet eligibility criteria, regardless of their offence type.

Eligibility Criteria: Eligibility will be determined by the LSI-R. Offenders who are medium risk and above will be eligible for programs (the ACT equivalent LSI-R level is high medium).

Detainees who are on remand or who are appealing against convictions are not eligible. Those who do not meet the program eligibility threshold based on risk, but who are identified with the following needs may be considered for participation:

- 3x offences in custody related to drugs or aggression within the last 12 months.
- Are identified as serious or special interest offenders, using the *Offence Severity Scale*, or other specialist risk assessment tool, as appropriate.

The program consists of the following modules:

- Module 1: Explore – Why are we here?
- Module 2: Question – What’s it all about?
- Module 3: Understand – What’s the focus?
- Module 4: Investigate – Why did this happen to me?
- Module 5: Practise and Plan – Where to from here?

The standard EQUIPS Foundation program consists of 20 x 2-hour sessions (40 hours) divided into five modules of four sessions each.

### 5.3 EQUIPS Addiction

EQUIPS Addiction is designed to address the addictive behaviour of program eligible offenders and to provide participants with a pathway to support services for addictive behaviours. There are group processes and self-management planning sessions in this program to help participants link their learning to their personal experience of addiction.

Eligibility Criteria: Eligibility will be determined by the LSI-R. Offenders who are medium risk and above (the ACT equivalent LSI-R level is high medium), and who meet one of the following criteria will be eligible for this program:

- Offenders who have significant substance addiction history
- Offenders who have significant gambling history.

Detainees who are on remand or appealing against conviction are not eligible. Those who do not meet the program eligibility threshold based on risk, but who are identified with the following needs may be considered for participation:

- 3x offences in custody related to drugs within the last 12 months
- Are identified as serious or special interest offenders, using the *Offence Severity Scale*.

The program consists of the following modules:

- Module 1: Understanding addiction.
- Module 2: Understanding change.
- Module 3: Problem solving.
- Module 4: Better living.
- Module 5: Self-management planning.

The standard EQUIPS Addiction program consists of 20 x 2-hour sessions (40 hours) divided into five modules of four sessions each.

#### 5.4 EQUIPS AGGRESSION

The EQUIPS Aggression program is designed to increase participants' ability to manage difficult life events and minimise aggressive behaviour. It is based on a strong cognitive behavioural therapy (CBT) approach and is linked to mindfulness and values. The program targets both expressive and instrumental aggression. The addition of an offence mapping process will help participants link their aggressive behaviour to their offence.

Eligibility Criteria: Eligibility will be determined by the LSI-R. Offenders who are medium risk and above (the ACT equivalent LSI-R level is high medium), and who meet one of the following criteria will be eligible for this program:

- A current or historical criminal conviction for a violence related offence
- A history of institutional violence

Detainees who are on remand, or appealing against conviction are not eligible. Participants must not have a current sex offence conviction.

Those who do not meet the program eligibility threshold based on risk, but who are identified with the following needs may be considered for participation:

- 3x offences in custody related to drugs within the last 12 months
- Are identified as serious or special interest offenders, using the *Offence Severity Scale* or other specialist risk assessment tool, as appropriate.

The program consists of the following modules:

- Module 1: Identifying emotions.
- Module 2: Aggression management.
- Module 3: Beliefs and values.
- Module 4: Offence Mapping.
- Module 5: Self-management planning.

The standard EQUIPS Aggression program consists of 20 x 2-hour sessions (40 hours) divided into five modules of four sessions each.

## 5.5 EQUIPS DOMESTIC AND FAMILY VIOLENCE

The EQUIPS Domestic and Family Violence program is based on CBT principles and strategies for behaviour change. The aim and purpose of this intervention is to provide a format that will enable increased access to offenders who have Domestic and Family Violence offences. The EQUIPS Domestic and Family Violence program includes all forms of domestic and family violence – intimate partner, family, elder and sibling abuse and any type of abuse that is deemed by the courts to be domestic in nature.

Eligibility Criteria: Eligibility will be determined by the LSI-R. Offenders who are medium risk and above (the ACT equivalent LSI-R level is high medium) will be eligible for this program so long as they have a current domestic or family violence conviction.

Detainees who are on remand, or appealing against conviction are not eligible.

Those who do not meet the program eligibility threshold based on risk, but who are identified with the following needs may be considered for participation:

- Are identified as serious or special interest offenders, using the *Offence Severity Scale* or other specialist risk assessment tool, as appropriate.

The program aims are achieved by exploring the following topics:

- Module 1: Understanding Abusive Behaviours.
- Module 2: Exploring Core Beliefs, Emotions and Mood.
- Module 3: Investigating Offence Mapping.
- Module 4: Understanding Victim Impact.
- Module 5: Relationship Skills and Self-Management Planning.

The standard EQUIPS Domestic and Family Violence program consists of 20 x 2-hour sessions (40 hours) divided into five modules of four sessions each.

# 6. Sex Offender Program (SOP)

## 6.1 Preparatory Program

The preparatory program explores several areas for intervention relating to criminogenic needs which have been identified as applying to most sex offenders. However, it does not address risk factors and therefore, should not be regarded as a rehabilitative intervention, per se. Anyone



completing the preparatory program must complete a sex offender program subsequently to claim having undertaken a rehabilitation program.

The power of the preparatory program lies in preparing offenders for programs designed specifically to address criminogenic factors. The emphasis of the preparatory program is to address a range of responsivity barriers, resistances and poor motivation which stand in the way of participants engaging in intensive group interventions that target criminogenic needs.

The preparatory program has been designed around exercises and activities which help participants reflect on their lives and offending to increase their sense of self efficacy and motivation to participate in programs which directly target criminogenic needs.

The program does not have specific eligibility criteria and so offenders will be prioritised based on the eligibility criteria for the high and moderate intensity SOP, noting that detainees who are on remand or appealing against conviction are ineligible until the appeal is finalised.

The preparatory program is run twice weekly, for up to eight weeks.

## 6.2 High Intensity SOP

The High Intensity SOP is an evidenced-based, intensive, resource manual guided intervention program for adult male sexual offenders who have been assessed as having a high risk for recidivism and recommended to undertake the program.

Offenders should only be referred for the program if they meet following criteria:

1. Adult male sexual offenders;
2. Have been assessed as being in a high-risk category to re-offend sexually and have been identified as having moderate to high criminogenic offending needs associated with sexual recidivism;
3. Are ready, willing, and able to undertake the program;
4. Have sufficient time remaining on their sentence/order to complete the program; and
5. Furthermore, it is recommended that offenders, where possible, have completed the preparatory program, or similar, to enhance their ability to engage in and benefit from participation.

The program schedule involves a total of 350 hours of group-based therapeutic intervention delivered through three sessions of three hours duration per week for 39 weeks.

## 6.3 Moderate Intensity SOP

The Moderate Intensity SOP is a derivative of the high intensity program, covering the same treatment areas (see previous section for details) relating to criminogenic needs identified as applying to most sex offenders. However, the overall duration of the program and the frequency of its delivery each week are reduced, designed to match the medium to low risk (the ACT position is to include all sex offences where a high intensity program is not

required) and needs of sex offenders as determined by a combined Static 99R and Stable 2007 score (where both tools are applicable to the offence – where one tool has been used, this will be case-noted, including the reasons).

The moderate intensity program was designed around exercises and activities targeting criminogenic and related responsivity needs. Not all participants will need to complete all the exercises and activities. This will depend on the individual requirements of participants as determined by professionals trained in behavioural assessment, intervention principles and program facilitation for sex offenders. Thus, the moderate intensity program can be tailored to meet individual offender's criminogenic, and responsivity needs.

Offenders should only be referred for the program if they meet following criteria:

1. Adult male sexual offenders.
2. Ready, willing, and able to undertake the program.
3. Sufficient time remaining in their sentence/order to complete the program.
4. Furthermore, it is recommended that offenders, where possible, have completed the preparatory program, or similar, to enhance their ability to engage in and benefit from participation.

Given the reduced intensity from the high intensity program, the Moderate Intensity SOP may be completed in less than 6 months, if undertaken at the same schedule as the high intensity program.

## 7. Brief Intervention Programs (BIPs)

The Brief Intervention Programs (BIPs) are available to remandees and sentenced offenders. The BIPs are psychoeducational and are not linked to specific offences or offending behaviour. The BIPs have most utility with participants who require a low intensity and/or short intervention, however, can also be used with participants who may go on to undertake criminogenic programs.

Each BIP consists of five x 1.5 hour sessions, usually run over two weeks.

### 7.1 READINESS

This program aims to give participants an introduction to group based psychoeducational programs with each session containing a variety of delivery methods with the view to encourage confident engagement from all group members.

### 7.2 HEALTHY RELATIONSHIPS

This program aims to introduce participants to the idea of different relationships, assist participants in understanding healthy/unhealthy relationship behaviours, and learn new communication skills. Healthy Relationships also explores the concepts of conflict resolution, boundaries, sexual consent, and relationship breakdown.

### 7.3 ALCOHOL & OTHER DRUGS

This program aims to assist participants to build confidence in being able to make changes, develop an understanding of and basic skills to help manage Alcohol and Other Drug (AOD) risks, support each other to help make positive choices in future and develop knowledge and confidence to access other supports in AMC and community.

### 7.4 THRIVE

This program aims to improve general well-being, reduce symptoms of anxiety and stress, enhance coping skills, to give support to and receive support from others.

### 7.5 THRIVE EXTENDED

This program aims to assist participants manage their emotions to help prevent aggressive or impulsive behaviour, practice strategies to help get through crisis situations, receive support from and provide support to others and develop a personalised toolbox of strategies to use in difficult situations.

### 7.6 MAKING MY WAY

This program aims to help participants identify their short- and long-term goals, what they need and what obligations they may have to help ensure a good future, what barriers may be faced and what strategies might be needed to overcome the barriers.

## 8. Solaris Therapeutic Community

8.1 Co facilitated with Karralika Programs Inc., the Solaris Therapeutic Community is a closed entry residential program for male detainees in the AMC who have alcohol and other drug dependency issues. It uses a 'community as method' approach to treatment and ongoing recovery. Solaris aims to provide a safe, secure, and supportive learning environment within a correctional setting where participants can explore and establish change within a social and personal context.

8.2 The program comprises of 16 weeks residential plus graduate support and up to 12 months transition support post release for Graduates.

8.3 To meet eligibility criteria for Solaris, all the following must be present:

- Detainee at AMC
- Male

Priority is given to sentenced male detainees who have a release date within the next 6-24 months. However, detainees on remand are also considered. The program is run in an

accommodation area of the AMC and entry is also linked to bed availability and detainees' non-associations status.

8.4 The program comprises the following stages:

- Orientation (4 weeks): introduction to program, communication, AOD education
- Readiness (4 weeks): introduction to relapse prevention emotional regulation, understanding yourself, "10 Defining Moments", strong emotions, core beliefs.
- Treatment (4 weeks): understanding guilt and shame, relationships, self and values.
- Commitment (4 weeks): resilience, self-esteem, self-image, relapse prevention, time management, goal setting.
- Graduate (flexible timeframe): relapse prevention strategies, planning for release and life in the wider community.
- Transition (up to 12 months): support to assist with community reintegration (optional for Graduates).

8.5 During their residence in the Solaris Therapeutic Community, participants are required to attend group meetings, therapeutic group sessions, and all mandatory program elements each weekday. There are sessions facilitated by external agencies to deliver additional programs, for example, financial literacy and creative therapy. There may also be in-house education sessions, organised sports, and cultural group sessions.

All participants attend individual case management session with their allocated Solaris AOD Case Manager focussing on program comprehension and relapse prevention.

Throughout the Graduate phase, a participant is expected to attend all meetings along with co-facilitating sessions with staff for new participants until such time as leave the Solaris Program

Within the optional Transition phase, support is given to each voluntary Graduate to help practice and maintain their recovery including help to establish links to additional services for example, medical professionals, counsellors, and/or further AOD treatment options.

## 9. Individual Interventions

9.1 The CPU can facilitate one on one intervention with internal or external providers, only in circumstances where the detainee/offender is ineligible or unsuitable for group programs. Individual interventions will not be offered if a suitable group program is available, and eligibility and suitability criteria are met.

9.2 Group programs are derived from a known evidence base and offer participants opportunities to learn from one another, while individual interventions do not. Group programs are also the most efficient and can provide the most detailed information to the case manager in terms of participation and progress.

- 9.3 Responsivity and other factors that may have significant implications for a person's ability to participate in group programs should be identified at the time of referral to enable timely consideration of all options. Such factors may include, but are not limited to:
- Intellectual disability or cognitive impairment
  - Insufficient time remaining on sentence to complete a group program.
  - Does not meet program eligibility criteria (this would include for SOP as not male etc.).
- 9.4 While trauma is a consideration regarding program suitability, it should be noted that many group participants have experienced trauma, and that supported exploration of this can assist in reducing risk. While identification of trauma at the time of referral is important, it does not in itself preclude group participation.
- 9.5 The CPU will select the most appropriate provider based on skillset and availability. The focus and parameters of individual intervention will be determined between the CPU and the provider. This will include the nature of intervention, frequency, duration, and reporting requirements.
- 9.6 Individual intervention has most commonly been used to provide an intervention in respect of sexual, violent, or other complex patterns of offending when eligibility and/or suitability for group programs cannot be met.