



Corrective Services NSW Offender Program and Facilitation Standards

Endorsed by the Corrective Services
Administrators' Council

ACKNOWLEDGEMENTS

National Accreditation of Offence Related Programs Working Group
Australian Capital Territory, New South Wales, New Zealand, Northern
Territory, South Australia, Tasmania, Queensland, Victoria, Western Australia
2005

**The Corrective Services Administrators' Council (CSAC) endorses the
standards detailed in this document.**

Foreword

Corrective Services NSW operates in a challenging environment. It is also highly dynamic; corrections has evolved from a punitive role to a rehabilitative one. The delivery of effective offender programs is a key component in achieving this rehabilitation.

Aspirations cannot exist without benchmarks – without standards we cannot compare our work, or know whether we have succeeded or failed. Where there is no structure, uncertainty and reactive thinking fills the void, particularly in the area of Corrective Services.

It is also through shared thinking, shared experience and collective resources that we can best meet the growing needs of Corrective Services New South Wales.

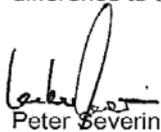
This document details the standards expected of offender programs across New South Wales as well as the professional practice standards with which staff who deliver programs are expected to comply.

To provide some background, the Corrective Services Administrators' Council (CSAC) agreed that a working group chaired by Western Australia, would be established to undertake further research into national accreditation of offence-related programs.

Subsequently, the National Accreditation of Offence Related Programs Working Group established a set of national standards for the content delivery of offender programs which would contribute to the development of a national accreditation framework.

The Standards are guiding principles which are evidence-based and have been assessed by Dr Lynne Roberts and Associate Professor David Indermaur of the University of Western Australia. In addition, they have now been reviewed by the Director, Offender Services & Programs and the State-wide Manager Programs, Corrective Services NSW.

These standards will assist in reducing re-offending and ultimately make a positive difference to the lives of offenders, victims and the community.



Peter Severin
Commissioner, Corrective Services New South Wales

29 July 2014

Table of Contents	Page
Foreword	2
 <i>CSNSW Offender Program Standards: Conceptual Document</i>	
1. Standards, Indicators and Clarifications.....	4
2. Standards: Program Content.....	5
3. Standards: Program Delivery.....	7
 <i>CSNSW Professional Practice Standards: Program Delivery</i>	
4. Scope of the Professional Practice Standards.....	13
5. Area One: Self-Management.....	14
6. Area Two: Facilitation of Group Learning.....	15
7. Area Three: Delivery of Programs as Prescribed.....	18
8. Area Four: Application of Theoretical Concepts.....	19
9. Area Five: Working with Indigenous Values, Concepts and Processes.....	20
10. Area Six: Working with Culturally & Linguistically Diverse (CALD)	21
11. Area Seven: Co-facilitation.....	23
12. Area Eight: Management of Program Relationships.....	24
13. Area Nine: Program Organisation.....	25
14. Area Ten: Staff Training	26
 <i>Offender Intervention Programs: Service Delivery, Evaluation and Standards Monitoring Framework</i>	
15. Site Audit Document.....	27
16. Standard One: Program Resourcing and Support.....	28
17. Standard Two: Scheduling of Programs.....	31
18. Standard Three: Program Participant Enrolment.....	34
19. Standard Four: Program Facilitator Accreditation.....	35
20. Standard Five: Supervision of Facilitation Practice.....	36
21. Standard Six: Program Integrity and Effectiveness.....	38
22. Standard Seven: Program Reporting.....	41
23. Standard Eight: Program File Management.....	43
 <i>APPENDICES</i>	
Appendix A - Supervision arrangements for OS&P staff.....	44
- Reflective Practice in Supervision	45
- Peer Group Supervision	46
- Self Assessment	46
- Video observation	46
Appendix B - Recommended competencies for Supervisors and Supervisees (staff facilitating programs)	47
Appendix C - Relevant Legislation and Operational Instructions.....	52

CSNSW Offender Program and Facilitation Standards (adapted from the Australian Offender Program and Facilitation Standards)

1 STANDARDS, INDICATORS AND CLARIFICATIONS

1.1 Assessing Programs Against Standards

Having agreed on program standards, the Working Group developed a set of indicators for these standards. These indicators represent the practical criteria to be used when a particular program is assessed against the program standards. Since it is anticipated that programs will be documented in a variety of ways, the indicators need to encompass this variety. The indicators therefore refer to “program documentation” rather than to specific documents such as theory manuals, training manuals, facilitator manuals etc.

Program documentation encompasses comprehensive information regarding both the content and delivery of programs. Some documentation may be common to several programs as it covers standards relating to management as well as organisational, site management and facilitator training.

1.2 Clarifications

The following clarifications apply to terms used throughout this document. Following the Canadian definition, an *Offender Program* is a structured intervention that addresses the factors directly linked to offending behaviour.

The *Intensity* of a program is an overall measure of the impact it is designed to have on offence-related behaviour. Programs vary on the dimensions of duration, frequency and complexity. High intensity programs are characterised by a range of interventions including cognitive behavioural. They provide information, develop offence-related insights and skills and address entrenched and complex psychological problems that underlie offending behaviour. Typically, low intensity programs are characterised by information and raise awareness of issues that underlie aspects of offending behaviour.

Re-offence risk is the risk of further offending. It does not take into account the seriousness of further offending or the degree of damage it may cause.

The *Responsivity* principle refers to the tailoring of interventions to meet the risk and need levels of offenders, as well as their individual characteristics. It also refers to how a client responds to an intervention, and how approaches are adapted to suit the learning styles, abilities, and level of motivation of individual offenders.

Criminogenic needs are those dynamic risk factors that, when addressed, result in reduced risk of recidivism. These may include attitudes, values, antisocial peer associations or substance abuse as well as any other factors which have been demonstrably linked with change in risk of reoffending.

2 PROGRAM CONTENT

In Sections 2 and 3 of this document, agreed standards are in italics and indicators follow each standard in non-italicised text.

2.1 Empirical model of change

The Program is based on an articulated model of change.

The program documentation clearly articulates the model of change on which the program is based, and demonstrates that the program model is consistent with contemporary published evidence from criminological, psychological and correctional research.

The Program is empirically validated.

The program documentation provides evidence (where available) that the program has an ability to reduce levels of recidivism compared with no intervention with an equivalent group of offenders or compared with current practice.

The Program has evidence to justify its application to the target group¹.

The program documentation presents a comparison of the target group with any groups the program has been validated with, or presents direct evidence of its ability to reduce recidivism in the current target group.

2.2 Criminogenic needs

The Program addresses identified criminogenic needs of the target group.

The program documentation clearly identifies the program's target group in terms of characteristics including, but not limited to age, gender, family, social and cultural background, educational status, motivation, health and mental health status, and offending background and re-offence risk.

The program documentation presents evidence that the program primarily addresses criminogenic needs and that these criminogenic needs are characteristic of the target group.

2.3 Responsivity

The Program's content and delivery options address the responsivity characteristics of the target group.

The program documentation identifies those characteristics of the target group that have a demonstrated impact on their ability to engage in the change process and to learn within an offender program, citing the evidence for this impact. Program documentation describes the strategies used in the program to address these responsivity characteristics, citing the evidence base for each strategy.

The Program content and delivery options include strategies to address the individual responsivity needs of participants.

The program documentation describes strategies which the facilitator(s) can use in order to assess the responsivity needs of individual program participants, whilst maintaining program integrity.

¹ The target group is the segment of the offender population to which the program is primarily directed. In some cases offenders from outside this segment will be appropriately included in the program because it forms part of their individually tailored treatment plan.

The program documentation offers alternative strategies with which to meet the learning needs of individual participants, whilst maintaining program integrity. It also includes procedures for ongoing assessment of the effectiveness with which key program learning objectives are achieved by individual participants.

2.4 Risk/Intensity

The program intensity is clearly defined and matches the re-offence risk level of the target group.

The program documentation presents evidence for the program being categorised as “low”, “medium” or “high” intensity according to agreed criteria expressed in terms of the duration of the program and the complexity of its interventions.

All members of the program's target group will have the same re-offence risk category (“low”, “medium” or “high”) and program documentation presents evidence that this re-offence risk category matches the intensity level of the program.

The program documentation identifies the risk assessment procedures used to assess the program's target group and presents evidence that they are valid and evidence based. The re-offending base rates that define “high” “medium” and “low” risk will be nationally agreed upon for each area of offending behaviour (sex offending, violent offending, etc).

Low Intensity

Low intensity programs usually last for 10-20 hours and aim to provide information and raise awareness of issues that underlie aspects of offending behaviour. These programs mainly involve giving information, discussing and clarifying problems, and considering possible solutions, including community agency referrals. They provide a minimal intervention for offenders who are, in any case, at low risk of reoffending.

Medium Intensity

These programs usually last for around 50-100 hours (although some are longer) and aim to provide information, skills and insights that are relevant to a particular type of offending behaviour. They are generally described as 'cognitive behavioural' because they focus on the relationship between problems in thinking and problem behaviours (including offending). They have a significant impact on participants through active skill development via role-play, rehearsal and feedback, and through the operation of therapeutic group process.

High Intensity

These programs usually last for 100 or more hours (often significantly more) and are multi-modal, providing a full range of psychotherapeutic interventions. They provide information, develop offence-related insights and skills and address the often entrenched and complex psychological problems that underlie offending behaviour. High Intensity programs operate through a combination of cognitive behavioural work and therapeutic group process.

2.5 Program Documentation

Program documentation must comprehensively define the program including its purpose, monitoring, design and delivery, and implementation.

The program documentation includes:

- Program Theory: identifies the genesis, empirical evidence and model(s) of change upon which the program is based

- Program Management: identifies the target group, criteria for participant eligibility, assessment process, and exclusion/inclusion factors
- Program Facilitation: sets out the aims of each program session and how each session is to be delivered so that the program can be delivered in the way it was designed
- Assessment and Evaluation: the assessment and evaluation tools and guidance on their appropriate administration, to determine the impact of the program
- Facilitator Requirements: indicates the minimum training, support, competencies and other characteristics required to deliver the program
- Participant material: the exercises and handouts required by the offenders for the program to be delivered
- Organisational support: specifies the nature and level of organisational support required for effective delivery
- Risk Management: procedures are identified for managing risks to participants and staff

3 STANDARDS: PROGRAM DELIVERY

3.1 System integration

The Program is part of an integrated approach to offender management, such that:

(a) offenders are scheduled to the Program as part of their case management plan;

The program documentation describes the elements of a case management plan that may be satisfied by participation in this program and outlines referral pathways to the program

The program documentation demonstrates that participants are enrolled in the program through appropriate assessments of risk, need and responsivity, and outlines any other specific assessments required by this program and/or departmental policy

The program documentation describes the reports required, containing assessment of participant progress and based on evidence from program records. Reports and post program reviews provide recommendations for further intervention/work to maintain/enhance program effect

(b) the Program is appropriately linked to other relevant interventions, and participants have access to a sequence of programs (including maintenance and booster sessions, and prison-to-community through-care programs) if necessary to meet their treatment needs; and

The program documentation describes the processes that are in place to ensure progress made by offenders in this program is reinforced and taken forward during the remainder of their current episode and following release or completion

(c) *Non-program staff in the program delivery facility and wider organisation are aware of the program's objectives.*

The program documentation describes strategies in place to develop and maintain non-program staff's awareness of the program's objectives and strategies.

3.2 Organisational Support

Responsibility for the effective delivery of the Program is shared with non-program staff, including at the highest organisational levels.

The program documentation provides evidence that operational staff at all levels share a commitment to effective delivery of the program.

Broader system encourages participation in the Program and the Program is not subject to undue disruption due to system and site requirements.

The program documentation provides evidence that senior management are actively committed to the proper resourcing and delivery of the program, and to ensuring a supportive program environment.

3.3 Program Environment

The Program is delivered in an appropriate and safe environment that takes into consideration participant and facilitator needs, such as level of privacy, comfort, cultural sensitivity, accessibility and physical resources and equipment - see Correctional Centre Standards 2.1.S.2.1; also CSI's Facility Assets Correctional Standard – Programs/Services (under review).

The program documentation demonstrates that the environment in which the program is to be run provides a safe working environment for staff and participants according to local standards endorsed by staff and management, as outlined in the standards cited above.

The program documentation demonstrates that the environment in which the program is to be run allows staff and participants appropriate levels of privacy, comfort and freedom from unnecessary distractions to promote effective facilitation and learning.

The program documentation demonstrates that the program environment is consistent with the responsibility needs of participants in relation to such factors as gender, cultural background, intellectual and mental health status.

The particular physical resources and equipment required by the program are listed in the program documentation, and shown to be available.

3.4 Program Staffing

Staff have the competencies, training, qualifications and personal qualities required to effectively deliver the Program. (Please also see Policy for Professional Supervision for Offender Services & Programs Staff – [D14/444944](#))

The staff competencies, training, qualifications and personal qualities required to effectively deliver the program are described in the program documentation, together with the rationale and evidence for requiring these competencies, training, qualifications and personal qualities such as skill proficiency and the ability to effectively communicate.

Staff who conduct assessments for the Program, are appropriately qualified, trained and resourced

The staff qualifications, training and resourcing required to provide assessments for the program are described in the program documentation, together with the rationale and evidence for requiring these qualifications, training and resourcing.

Program staff receive regular professional² supervision by an appropriately qualified and experienced practitioner

Within CSNSW, Senior Services & Programs Officers (SSAPOs) will provide supervision to Services & Programs Officers (SAPOs) or Community Corrections Officers (CCOs). Senior SAPOs will be supervised by Senior Psychologists from within the specialised intensive therapeutic programs areas (e.g. Sex & Violent Offender Therapeutic Programs, Intensive Drug & Alcohol Treatment Program). Please see full details in the Policy for Professional Supervision for Offender Services & Programs Staff – [D14/444944](#).

Management of Program staff ensures consistent program delivery

Program documentation describes how, in managing program staff (deciding on such matters as leave, acting opportunities, etc), high priority is given to the consistent delivery of the program.

3.5 Managing Risk/Safety

The Program identifies any specific risks to staff and participants inherent in the program and has mechanisms to minimise these risks.

Specific risks to program staff and participants are identified in program documentation, with supporting evidence.

Program documentation describes the risk management and risk minimisation strategies in the program, with a rationale for their choice.

3.6 Participant Selection

The Program has a transparent selection process that is consistent with the program's inclusion/exclusion criteria and is aimed at maximising each participant's benefit from the Program and their contribution to it.

The program documentation describes the way(s) in which participants are selected for the program and describes the strategies that are in place to ensure the process is transparent. The program documentation describes the assumptions and strategies used in the program's selection process which aim to maximise each participant's benefit from, and contribution to, the group.

Participant selection includes re-offence risk, criminogenic needs and treatment readiness. Assessment of the participant's pre-program re-offence risk is based on an empirically justified protocol.

Assessment tools and strategies used in the program to assess re-offence risk, criminogenic needs and treatment readiness are described in the program documentation, together with the evidence for their empirical justification.

² In this context, the term "professional" supervision refers to supervision that extends beyond administrative supervision to include emotional support and professional development.

The participant selection process allows for the inclusion of offenders from outside the target group where their participation is justified in their individual treatment plans.

The program documentation identifies the circumstances under which offenders from outside the target group may participate in the program.

Participants engage in High Intensity Programs on the basis of their informed consent, even when participation is mandated.

Strategies for ensuring the informed consent of participants of specific programs are described and justified in the program documentation. In CSNSW, only the High Intensity Programs (SOP, VOTP, IDATP) and the EQUIPS Domestic Abuse Program require informed consent.

The rights and responsibilities of participants, including legal exceptions to confidentiality, are clearly communicated. Clear guidelines govern the expulsion of a participant from the Program.

Strategies for ensuring that participants understand their rights and responsibilities are described and justified in the program documentation.

Guidelines for expelling a participant from the program are described and justified in the program documentation.

Inclusion in the Program is based on the needs of a participant and the needs of the participant group as a whole.

The strategies that will balance and reconcile the needs of the participant and the needs of the group are described and justified in the program documentation.

3.7 Program Completion

Processes exist to minimise the number of participants who do not complete the Program.

The strategies that the program uses to minimise the number of participants who do not complete the group are described and justified in the program documentation.

Processes are in place to manage problems arising from offenders' non-completion of programs.

The strategies that the program uses to manage problems arising from participants who do not complete the program are described and justified in the program documentation³.

3.8 Facilitation Style

The Program strategies reflect best practice in program delivery including group process work, which maximises the effectiveness of the program.

Program delivery strategies, including those based on group process work, are identified and described in the program documentation, together with evidence that all staff who deliver programs are trained in their use.

³ These may include problems for both the individual and the group. Problems for the individual may include stigmatisation, risk level elevation and alternative treatment options. Problems for the group will mainly relate to group dynamics.

The program documentation identifies and justifies the balance of psycho-educational and group process program delivery strategies required for the effective delivery of the program.

3.9 Monitoring and Evaluating Participants

Regular feedback is provided to participants at intervals appropriate to the duration and intensity of the program.

Protocols for feedback to participants are described in the program documentation.

The Program specifies a Protocol on reporting of participant progress and outcomes, highlighting changes in criminogenic needs that are based on relevant and verifiable information, empirically justified methods and sound clinical judgement.

All report protocols and templates which document participant progress and outcomes are included in the program documentation, together with evidence that they are based on relevant and verifiable information, empirically justified methods and sound clinical judgement, and that all program staff are trained in their application and use.

Progress and outcome reports objectively review the participant's progress in the Program, and are recorded in OIMS in a format that assists staff and other agencies in the subsequent management of the offender. Comments are typed in the Comment field summarising the offender's participation and performance throughout the program. This comment then takes the form of a Summary case note at the point of completing the offender's obligations or at the offender's exit point.

The program summary for the offender will take the form of an e-offender record. A template will be available from OIMS via EDRMS.

Program documentation presents evidence that all report protocols and templates that are used to review participants' progress in the program are objective and are in a format that assists staff and other agencies in the subsequent management of the offender.

3.10 Monitoring and Evaluation of Program

The Program is routinely monitored and evaluated according to an agreed schedule and with sufficient frequency to ensure program integrity.

Program monitoring and (process) evaluation strategies and methodology are documented and justified in the program documentation.

Procedures are in place to monitor the progress of the program and to ensure program integrity.

Strategies for program monitoring and ensuring program integrity are documented and justified in the program documentation. These strategies include timely feedback to staff who deliver programs and processes for recording suggested program improvements to facilitate later program review.

The Program has clearly stated objectives, and there are procedures in place to evaluate the outcomes of the program.

Program objectives are clearly and objectively stated and strategies for outcome evaluation are documented and justified in the program documentation.

Evaluation is conducted within relevant ethical guidelines.

Ethical aspects of the evaluation of the program are identified in the program documentation, and strategies to ensure ethical evaluation are described and justified.

4. SCOPE OF THE PROFESSIONAL PRACTICE STANDARDS

The Professional Practice Standards focus on the range of practice, knowledge and skill required to deliver rehabilitation programs effectively.

The Professional Practice Standards are comprised of ten core areas of practice in relation to program delivery:

- | | |
|-------------------|---|
| Area One | Self-Management
Staff who deliver programs demonstrate high levels of self-awareness, reflective practice and continuous improvement of their performance. |
| Area Two | Facilitation of Group Learning
Staff who deliver programs facilitate groups utilising programs effectively to achieve intended outcomes. |
| Area Three | Delivery of Programs as Prescribed
Staff deliver programs effectively as prescribed to achieve intended outcomes. |
| Area Four | Application of Theoretical Concepts
Facilitation practice is underpinned by a strong understanding of behavioural and educational theory. |
| Area Five | Working with Indigenous Values, Concepts and Processes
Staff who deliver programs demonstrate a strong understanding of Indigenous values, concepts and processes integrated into programs. |
| Area Six | Working with Culturally and Linguistically Diverse (CALD) Values, Concepts and Processes
Staff who deliver programs demonstrate a strong understanding of CALD values, concepts and processes integrated into programs. |
| Area Seven | Co-facilitation
Co-facilitators work together effectively to facilitate groups utilising programs to achieve intended outcomes. |
| Area Eight | Management of Program Relationships
Staff who deliver programs develop and maintain constructive relationships with all others involved in delivery of programs. |
| Area Nine | Program Organisation
Staff who deliver programs plan, organise and administer programs efficiently and effectively. |
| Area Ten | Staff Training
Staff who deliver programs are required to complete both <i>Creative Group Work</i> and <i>Cognitive Behavioural Therapy</i> (State-wide Programs Team) and Motivational Interactions (BFCSA). In addition, they need to undergo appropriate program content training by the State-wide Programs Team (eg for EQUIPS Domestic Abuse) |

AREA ONE: SELF-MANAGEMENT

Area One: Self-Management sets out the standards relating to staff when they are delivering programs. Staff need to demonstrate high levels of self-awareness, reflective practice and continuous improvement.

1 Indicator and its criteria

1.1 Willing to maintain active, meaningful reflection on own practice

- Time is taken for sessions to be debriefed effectively
- Debriefing results in personal improvement goals being developed
- Continuous improvements arising from personal reflective practice are demonstrated
- An appreciation of the impact of own gender, ethnicity, social background and personality on their facilitation practice is developed

1.2 Invites and is willing to use feedback to improve own practice

- Feedback is consistently invited from participants, peers and colleagues
- Feedback of all types is received constructively (includes positive, improvement, critical)
- Effective changes are made in response to feedback where valid
- Improvement is demonstrated in subsequent practice

1.3 Uses supervision effectively to improve own practice (see Appendices B and C)

- Formal supervision agreements with Supervisor(s) are established
- Supervision is attended at the agreed rate
- Practice issues are actively referred to during supervision (includes professional, peer & cultural)
- Arrives at supervision prepared for meaningful reflection and discussion
- Engages in open, genuine discussion and conceptualisation regarding own responses
- Understanding and practice is enhanced by making agreed changes
- Professional, respectful interactions are maintained

1.4 Is able to operate within the limits of own competency

- Limits of own competency are accurately described consistent with practice evidence
- Appropriate guidance is sought when reaching limits of own competency
- Recognises their counter transference vulnerabilities and seeks help if needed

1.5 Is able to maintain personal boundaries and confidentiality

- Appropriate personal and professional boundaries with participants and peers are identified and clearly articulated
- Effective personal strategies are applied to manage boundary and confidentiality issues professionally and with integrity
- Boundary and confidentiality protocols are effectively applied to program facilitation in the group

AREA TWO: FACILITATION OF GROUP

Area Two: Facilitation of Group sets out the standards relating to staff when they are delivering programs. Staff need to facilitate groups effectively to achieve intended program outcomes.

2 Indicator and its criteria

2.1 Is able to set up a positive climate and learning environment while being mindful of responsiveness factors

- Care and concern for individual participants is demonstrated, bearing in mind that not all participants are the same but have different levels of intelligence, communication abilities and other personal characteristics (responsivity factors)
- Participants are appropriately affirmed
- Ground rules (group, behavioural, health and safety) are established using participant contribution and upheld consistently
- A high degree of group energy for task is maintained
- Group attention is maintained to enable participation and learning
- Participants are engaged through effective personal style
- Belief in participant ability to change is continuously demonstrated
- The learning environment is appropriate for the group's members (men, women, youth, Indigenous & Torres Strait Islanders, CALD)
- Thoughts, feelings and behaviours are explored

2.2 Is able to set up and maintain the presence of key therapeutic qualities in the group

- Pro-social behaviour is modelled consistently
- Relatedness is maintained within the group through rapport building, instilling hope, accurate empathy, genuineness, warmth, respect, self-regulation and confidence
- Participants are successfully invited to take responsibility for their responses and participation
- Active listening and mindfulness is maintained when facilitating
- Therapeutic principles are flexibly and adaptively applied "in the moment"

2.3 Is able to manage group dynamics effectively

- A useful level of focus, energy and engagement is maintained
- All group process is made transparent
- Each stage of group development is recognised and facilitators work effectively within each stage
- Antisocial behaviour and attitudes are proactively and effectively challenged

2.4 Presents information clearly and appropriately

- Instructions are given effectively
- Information is presented in a well ordered, structured manner
- An appropriate level of detail is provided for the group – not too simple nor too complex

2.5 Is able to manage effective group learning

- Appropriate control of the session is maintained
- Dynamic interpersonal learning occurs within the group
- Content, process and time is balanced to achieve best possible learning outcomes
- Decisions regarding how content, process and time are balanced are soundly justified in terms of principle and theory
- All sessions, activities and exercises are effectively linked to objectives and each other
- Key learning points are articulated

- Role play is effectively facilitated
- Role play is effectively de-rolled and debriefed
- “Homework” is effectively monitored and managed to enhance learning

2.6 Is able to demonstrate effective questioning techniques

- An inquiring style of questioning is maintained using the Socratic method
- Participant motivation is increased through questioning

2.7 Is able to maintain effective, appropriate interactions with all individuals, sub-groups, the whole group and those outside the group

- All individuals, sub-groups, the whole group and those outside the group are engaged in a manner which enables the achievement of program objectives within appropriate boundaries
- The amount and type of personal information of participants is appropriately shared
- The amount and type of personal information disclosed by facilitators is managed through supervision
- The values and beliefs that guide their group practice are recognised

2.8 Is able to manage resistance to the program

- Resistance is identified, explored and addressed to increase willingness to participate
- A constructive approach is maintained when managing resistance

2.9 Is able to manage conflict appropriately

- Conflict is managed through a range of appropriate strategies
- Conflict results from, and in, forward movement of the group
- Any risk of harm is identified and safely managed
- Tension in the group is worked with effectively

2.10 Is able to assess participant learning

- Participant behaviour and attitudes are continuously monitored and assessed (rehearsal, observation, evaluation exercises, feedback rounds, formative assessment)
- Gaps in understanding and learning are identified
- Effective strategies are used to address participant gaps and needs
- Progress of individual participants is assessed in terms of program objectives and individual treatment needs

2.11 Is able to use self effectively in promoting therapeutic change

- Demonstrates alertness and sensitivity to matters relevant to the interpersonal functioning of the group
- Appropriately and assertively identifies and confronts areas of immediate interpersonal relevance where the group is avoiding them (“focal conflicts”)
- Resists being drawn into unhelpful matters or irrelevant issues
- Consistently draws attention to the function of “red herring” matters and subterfuges
- Consistently demonstrates appropriate use of self (humour, spontaneity, etc) in order to broach “difficult” but relevant interpersonal matters as they affect members of the group and their relationships
- Functions reflectively, rather than reactively, under stress in order to check self and consider issues theoretically before proceeding
- Avoids “misuse” of self, such as inappropriate disclosure, or drifting into a dual relationship role with group or its members during program delivery.

2.12 Is able to respond responsively to group needs

- Responsively varies facilitation strategies to improve delivery of key elements of program
- Keeps the group on track, balancing delivery of key program elements with responsivity to participants

AREA THREE: DELIVERY OF PROGRAMS AS DESCRIBED

Area Three: Delivery of programs as described sets out the standards relating to staff when they are delivering programs. Programs are to be delivered effectively as described to achieve intended outcomes.

3 Indicator and its Criteria

3.1 Is able to deliver program as designed

- Content is congruent with program and underpinning concepts
- Content is consistent with outcomes, program objectives and manuals
- Session objectives are used effectively to focus learning at start and end of sessions
- Exercises and activities within the program (individual, pair, group) are facilitated as designed
- Therapeutic qualities and principles are consistently maintained throughout the program
- Pro-social behaviours and attitudes are modelled and promoted throughout the program

3.2 Is able to use program materials effectively

- All requisite available materials are ready for use prior to sessions
- Materials are used effectively to support learning and program outcomes

AREA FOUR: APPLICATION OF THEORETICAL CONCEPTS

Area Four: Application of theoretical concepts sets out the standards relating to staff when they are delivering programs. Facilitation practice is underpinned by a comprehensive understanding of relevant theory and models.

4 Indicator and its Criteria

4.1 Applies the body of relevant theory and principles appropriately:

- Delivery and professional practice consistently reflects a strong understanding of the theoretical concepts and principles of the programs delivered

4.1.1 Psychology of Criminal Conduct (risk, need, responsivity)

- Theoretical frameworks are applied accurately to individual and group behaviour continuously throughout the entirety of the program.
- Facilitator consistently generates hypotheses re the meaning and significance of the behaviour of individual participants

4.1.2 Cognitive Behavioural Theories (CBT) including dialectical behaviour theory

- Participant conduct, needs and changes are described in terms of the relevant theoretical concepts and principles

4.1.3 Group therapy and practice

- Participants are assisted to articulate their goals in the context of the program's theoretical concepts and principles
- Therapeutic principles (responsibility, respect, openness, collaboration, support) are demonstrated
- Key decisions and choices are based on sound theoretical rationale

4.2 Uses motivational interviewing techniques effectively

- Different types of motivational questions are used appropriately and effectively
- Socratic questioning style is displayed appropriately and effectively

4.3 Maintains awareness of stage of change

- Participant and group stages of change are monitored, acknowledged and used positively.

4.4 Facilitates effective safety planning (relapse prevention)

- Participants are assisted to integrate learning to form an effective safety plan
- Participants are assisted to adapt and apply components of their safety plan in the context of their daily life

4.5 Uses offence descriptions (e.g. offence maps, offence chains) effectively

- The offence description increases participant awareness and understanding of factors which impact on offending behaviour
- The offence description remains integral to the formation of the safety plan and is referred to when applying theoretical principles

AREA FIVE: WORKING WITH INDIGENOUS VALUES, CONCEPTS AND PROCESSES

Area Five: Working with Indigenous values, concepts and processes sets out the standards relating to staff when they are delivering programs. Staff need to demonstrate a strong understanding of the Indigenous values, concepts and processes integrated into programs.

5 Indicator and its Criteria

5.1 Acknowledges, respects and supports core Indigenous values in facilitating the program

These values include:

- Connection to land
- Language
- Law, lore
- Culture
- Family, community, elders

5.2 Effectively manages Indigenous cultural processes and protocols in facilitating the program

These processes and protocols include:

- The impact of cultural relationships on group processes, for example:
 - Relationships of obligation
 - Avoidance relationships
 - Role of cultural hierarchy in group discussion
- Conventions relating to naming deceased people
- Effect of shame on group process and participation
- Appropriate gender roles
- Facilitator recognises relevant cultural processes and protocols and integrates them into their group management, for example
 - Role of elders in approving and leading discussions
 - Difficulties experienced by group participants who are in group with someone they have an avoidance relationship with
- Where the facilitator has to breach processes or protocols, this is done in a sensitive way which acknowledges the cultural validity of the roles (e.g. "I know I shouldn't ask about but would you mind just telling me ")

5.3 Facilitator links program objectives to relevant Indigenous concepts. The facilitator builds on these concepts to implement program objectives.

These concepts reflect the cultural ideals that Indigenous people have for themselves and include:

- Responsibility for self, family and community
- Linking of support network planning to concepts of family obligations and relationships of responsibility

AREA SIX: WORKING WITH CULTURALLY AND LINGUISTICALLY DIVERSE (CALD) VALUES, CONCEPTS AND PROCESSES

Area Six: Working with culturally and linguistically diverse (CALD) values, concepts and processes sets out the standards relating to staff when they are delivering programs. Staff need to demonstrate a strong understanding of the CALD values, concepts and processes integrated into programs.

(This section adapted from Queensland Government Practice Paper: Working with people from culturally and linguistically diverse backgrounds. Last updated June 2010 <https://www.communities.qld.gov.au/resources/childsafety/practice-manual/prac-paper-working-cald.pdf>)

6 Indicator and its Criteria

6.1 Is able to demonstrate a strong understanding of Multicultural values, concepts and processes integrated into programs

The need to recognise that people from linguistically diverse (CALD) backgrounds are not a homogenous group is consistently noted in literature and research relating to cultural diversity. In fact, there is considerable diversity within these groups, as well as many other factors, such as religion, which affect each person's identity. Similarly, a person may have a bi-cultural or multicultural heritage.

While a person's cultural, ethnic, or religious identity is likely to have a significant influence, either conscious or unconscious, on their beliefs, behaviour, values and attitudes, there are other factors that are equally relevant. These include:

- the person's age, gender, education and socioeconomic status
- the person's level of proficiency in English
- whether the person is a migrant and how long they have been living in Australia
- the extent to which they identify with a particular ethnic or religious group
- the person's level of acculturation into the dominant Australian culture
- other individual factors.

6.2 Is able to use effective approaches to practice:

It is neither feasible nor appropriate to provide a prescriptive approach for working with people from specific CALD backgrounds. However, a number of effective approaches/strategies are available to increase staff cultural and religious competencies when working with people from CALD backgrounds.

It is unrealistic to expect facilitators to gain a thorough understanding about every cultural, ethnic and religious group; however, it is critical to be aware of their intricacies and to avoid stereotyping or making assumptions based on a person's ethnicity, religion, culture or language. It is also important to be aware of the potential sensitivities around the use of some terminology.

For instance, using terms such as "culturally and linguistically diverse", "non-English speaking", or "migrant" when referring to someone could be offensive as it may be taken to imply that the person is being categorised or is not part of the broader Australian community.

Other areas covered by the cultural training at BFCSA include intercultural communication, respect, guidelines relating to the use of interpreters, obligations under legislation, CSNSW's strategic plan to manage people from CALD backgrounds and related procedures. This training

is designed to help staff to recognise and interact productively with diversity in the workplace and respond sensitively to the needs of diverse colleagues, clients, offenders and visitors.

In addition, CSNSW employs Arabic, Pacific Islander and Vietnamese Client Service Officers (CSOs). These CSOs, who provide advice relating to cultural matters, are located in Community Corrections.

6.3 Is able to use communication styles and engagement strategies that are appropriate to CALD group participants. These styles and strategies may include:

- Using speech patterns that are appropriate to people for whom English is not their first language (e.g. use short sentences, speak clearly at a comfortable pace)
- Avoiding the unnecessary use of jargon, generalisations and technical descriptions, rather using relevant concrete terms and examples

6.4 Is able to use cross-cultural training effectively to strengthen understanding and practice

- Cultural supervision and training is attended at the agreed rate
- BFCSA training is attended in the following courses:
 - Cultural Inclusiveness
 - Managing Diversity in the Workplace
 - Understanding of Islam and Muslims
- Open, genuine discussion regarding own response occurs
- Understanding and practice is enhanced by applying training and/or making agreed changes

AREA SEVEN: CO-FACILITATION

Area Seven: Co-facilitation sets out the standards relating to staff when they are co-facilitating programs. Co-facilitators need to work effectively together to facilitate groups to achieve the program outcomes.

7 Indicator and its Criteria

7.1 Is able to work effectively and supportively with co-facilitator to facilitate the program

- Shared roles and responsibilities within sessions are planned and agreed ahead of sessions
- Co-facilitators agree to how responsibility is shared
- “Stepping in to take over the lead role” is done respectfully and appropriately
- Co-facilitators agree on decisions about how to balance content and roles, process and time to achieve best possible learning outcomes in sessions
- The presence, energy, expertise and style of both facilitators is fully used with the group
- Co-facilitators progress from relay delivery to cohesive, synergistic co-facilitation
- Co-facilitators continue to develop their co-facilitation effectiveness through multiple co-facilitation deliveries
- Co-operative and respectful behaviour is modelled to the group

7.2 Is able to maintain honest, direct and appropriate communication with co-facilitator

- Regular, constructive briefing and debriefing occurs
- Issues and their root causes are clearly identified
- Responsibility is acknowledged and accepted
- Agreed improvements or changes to roles or practice are acted upon
- Differences and conflicts are readily identified and resolved between facilitators, in-group if appropriate

7.3 Is able to assist in each other’s development

- Co-facilitators are aware of and support each other’s practice improvement goals
- Co-facilitators maintain a shared set of partnership/delivery improvement goals
- High quality feedback is given to each other and accepted professionally

AREA EIGHT: MANAGEMENT OF PROGRAM RELATIONSHIPS

Area Eight: Management of program relationships sets out the standards relating to staff when they are delivering programs. Staff need to develop and maintain constructive relationships with others involved in the delivery of programs.

8 Indicator and its Criteria

8.1 Is able to establish and maintain supportive professional relationships with peers

- A supportive interest is taken in the work and professional practice of peers
- Requests for advice, peer supervision and mentoring are responded to constructively when sought
- Resources are shared
- Support is given to others to maintain personal boundaries and confidentiality
- Any breach of personal boundaries or confidentiality is not colluded with

8.2 Is able to establish and maintain effective relationships with members of other services involved in the effective delivery of programs

- Programs are promoted and colleagues educated about the programs, with specific advice provided on program eligibility
- Productive relationships with colleagues are established and maintained
- Problems encountered are solved together and solutions are effective
- Open lines of communication are maintained
- Conflict is responded to and managed constructively
- Feedback is responded to constructively and professionally

8.3 Is able to establish and maintain effective relationships with Managers and Supervisors

- Initiates and maintains open, proactive communication
- Meets all requirements for administrative functions, reporting, deadlines etc.
- Initiates speedy, constructive action on issues arising

AREA NINE: PROGRAM ORGANISATION

Area Nine: Program Organisation sets out the standards relating to staff when they are delivering programs. Staff need to plan, organise, administer and record programs efficiently and effectively.

9. Indicator and its Criteria

9.1 Is able to set up and administer programs effectively and efficiently, taking the guidelines provided for the following areas into account:

- Departmental operational policy, procedures and security regulations are adhered to
- Program schedule timelines are maintained
- Program scheduling staff are communicated with in a timely manner
- Only appropriate offenders are confirmed for programs
- Issues impacting on the successful delivery of programs are raised in a timely and appropriate manner
- Issues impacting on the successful delivery of programs are solved collaboratively with the services concerned
- Reports are completed on time and to the standard required
- Occupational Health and Safety considerations are managed within policy and operational guidelines
- Program related documentation is relevant, accurate and meets time frames
- All relevant information is recorded in OIMS including:
 - Creating a program schedule
 - Allocating offenders to a group
 - Recording attendance
 - Completing an offender
 - Finalising a group

AREA TEN: STAFF TRAINING

Area Ten: Staff Training sets out the standards relating to staff training requirements. Staff who deliver programs are required to complete the courses set out below:

10. Indicator and its Criteria

10.1 Attends Creative Group Work conducted by the State-wide Programs Team

- The **Creative Group Work** training course is aimed at developing the capacity of staff to effectively manage group dynamics. This is an experiential training course aimed at deepening learning and consolidating existing group facilitation skills. The focus of the training is the use of “here-and-now” processes in managing group interactions and interventions that promote change.

Creative Group Work consists of 6 days face to face training over 2 blocks of 3 days, usually with 4 weeks between blocks.

In addition to attending the training, participants are required to submit a written assessment (8 short answer questions) and to facilitate a 30 minute presentation within block 2 of the program.

10.2 Attends Cognitive Behavioural Therapy (CBT) conducted by the State-wide Programs Team

- The **Introduction to Cognitive Behavioural Training** allows staff to becoming familiar with CBT, which forms the theoretical basis of the programs that they will be delivering.

The training aims to inform staff of the key concepts involved in CBT and give some practical applications and demonstrations of this approach.

10.3 Attends Motivational Interactions conducted by Brush Farm Corrective Services Academy (BFCSA)

- Motivational Interactions is an approach towards strengthening an individual’s own level of motivation. Using the cycle of change model, participants will learn to use ‘change talk’ and other motivational techniques. This course helps to develop skills and techniques designed to assist people towards positive change.

10.4 Undergoes appropriate program content training conducted by the State-wide Programs Team

- Most programs, such as EQUIPS Domestic Abuse, require staff who deliver it to undergo program content training (NB there are some programs which don’t require content training, and the State-wide Programs Team should be consulted for advice).

OFFENDER INTERVENTION PROGRAMS SERVICE DELIVERY, EVALUATION AND STANDARDS MONITORING FRAMEWORK

This framework has been, with permission, adapted from Queensland's Offender Intervention Programs Service Delivery document. The Working Party gratefully acknowledges their contribution.

Site Audit Document

This site-audit document is used for site-based and collaborative auditing of program delivery. Each of the eight program delivery standards describes elements of effective practice. Assessable elements are grouped under each standard, and are used to determine the extent to which standards are met.

Assessment uses a simple scale of four criteria:

- | | | |
|-----|---|---|
| i | 0 | Criteria not met |
| ii | 1 | Criteria not fully met and no system in place to enable compliance |
| iii | 2 | Criteria not fully met but evidence of system in place to enable compliance |
| iv | 3 | Fully meets criteria. |

Evidence of compliance is shown in the column headed **Evidence**. Additional comment or evidence may be appended as considered appropriate for individual programs. Where an element is not assessed as fully compliant (3), except where not applicable (0), then a proposed action will be determined by management following receipt of the completed audit report.

Following completion of a site assessment, a report will be produced that will overview each site monitoring assessment in terms of overall compliance, standard of delivery, program management and administration. This report will provide the basis for continuous improvement and will allow the recognition of strengths and weaknesses and, where necessary, to undertake a process of support that will improve the standard of program delivery.

	STANDARD 1	PROGRAM RESOURCING AND SUPPORT					LOCATION: STATE-WIDE	
	Element	0	1	2	3	N/A	Evidence	Monitoring & Auditing
a	Program rooms are visibly appropriate for delivery and adequately resourced.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facilities, rooms, materials etc. must be adequate for the program to take place. Rooms are of sufficient size to accommodate participants and facilitators. Rooms are well lit and ventilated, with minimal external noise or distraction and provide appropriate levels of privacy. Relevant resources have been provided, such as chairs, tables, desks, whiteboards, OHP, video as appropriate for the program.	Monthly review. Refer to Programs checklist, item P4, EDRMS reference D14/140759
b	Secure storage is available to store relevant program materials and offender work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Secure storage area noted by audit and/or self-assessment	Quarterly review Refer to Programs checklist, item P5, EDRMS reference D14/140759
c	Program sessions are delivered consistent with program schedule and program plan, with minimal disruptions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any session disruptions have been documented in Offender Integrated Management System (OIMS) as lockdown, offender access unavailable, cancelled	Monthly review. Refer to Programs checklist, item P14, EDRMS reference D14/140759
d	Pre- and post-program tasks are completed as per program manual.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pre-Program Suitability Interview, consent form, pre- and post-program assessment and program completion reporting all undertaken and recorded appropriately.	Monthly review. Refer to Programs checklist, item P9, EDRMS reference D14/140759

	STANDARD 1	PROGRAM RESOURCING AND SUPPORT					LOCATION: STATE-WIDE	
	Element	0	1	2	3	N/A	Evidence	Monitoring and Auditing
e	Adequate time is allowed for session preparation and debriefs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facilitators are allowed 30 minutes for session preparation and 30 minutes for program debrief	Quarterly review to be conducted via questionnaire to staff
f	Sufficient safe and secure parking, and safe site exit points, are visibly available for night programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Observation during site visits, reported by staff to Occupational and Health Safety representatives.	Monthly review. Refer to Programs checklist, item P4, EDRMS reference D14/140759
g	All programs staff have safe and secure working environments in group and out.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As observed during site visits, reported by staff to Occupational and Health Safety representatives.	Monthly review. Refer to Programs checklist, item P4, EDRMS reference D14/140759
h	Two facilitators allocated to each program where appropriate.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Number of facilitators outlined in the Compendium of Programs is reflected in the scheduling of program events on OIMS	Monthly review. Refer to Programs checklist, item P9, EDRMS reference D14/140759

	STANDARD 1	PROGRAM RESOURCING AND SUPPORT					LOCATION: STATE-WIDE	
	Element	0	1	2	3	N/A	Evidence	Monitoring and Auditing
i	Difficulties in gaining access to program delivery sites have been documented and reported in OIMS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Session cancellations and instances of 'Offender access unavailable' and 'Lockdown' recorded on OIMS	Monthly review. Where access issues are indicated, report developed to address issues with relevant stakeholders
j	Records of facilitator induction to program delivery sites are maintained at each site.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Attendance at Security Awareness Course and/or participation in <i>Certificate IV in Correctional Practice – Offender Services & Programs</i>	Review participation in/ completion of <i>Certificate IV in Correctional Practice – Offender Services & Programs</i> (Recorded in the Learning Management System)

	STANDARD 2	SCHEDULING OF PROGRAMS					LOCATION: STATE-WIDE	
	Element	0	1	2	3	N/A	Evidence	Monitoring and Auditing
a	Six monthly program schedules developed and maintained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Six monthly program schedule and "intention to run" recorded in OIMS Report generated to show discrepancies between the intention to run a program and scheduling and delivery of the program	Quarterly review - Refer to Programs checklist, items P2, P13, P16, EDRMS reference D14/140759 and Policy for Compendium Program Planning and Scheduling – D14/444958
b	Program completion records are consistent with program delivery schedule.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Programs completion matches the number of sessions attended and recorded	Quarterly review - Refer to Programs checklist, items P14, P16, P17 and P18, EDRMS reference D14/140759
c	Deviations from the program delivery schedule are recorded.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Status of program schedules is available in the Active Scheduled Programs report published weekly and stored in EDRMS 13/262949	RSMs review weekly report and action any issues arising
d	Attendance records are maintained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Program attendances are entered in OIMS	Monthly review - Refer to Programs checklist, items P14, EDRMS reference D14/140759
e	Participant absences and reasons for absences are recorded	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any absences and reasons for absence, are recorded in OIMS	The monthly report of program sessions not conducted is stored in the EDRMS container 15/52135 Reports for Programs Support Team meeting

	STANDARD 2	SCHEDULING OF PROGRAMS					LOCATION: STATE-WIDE	
	Element	0	1	2	3	N/A	Evidence	Monitoring and Auditing
f	Attendance records and case notes indicate reasonable efforts have been made to minimise participant absences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Existing reports show: - unmotivated offenders - offenders suspended and not yet re-allocated within 3 months Case notes document strategies put in place to follow up after absences, including opportunity for catch-up sessions	Quarterly review
g	Case notes indicate absences have been reported to case manager, CCO etc where applicable and in a timely manner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review of case notes indicates that managers have been notified of absences	Quarterly review
h	Attendance records and program file indicate continuity of facilitators as identified in the six monthly schedule	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Report of program attendance identifies facilitators	Quarterly review
i	Confirmation of enrolment is provided to case managers/supervisors/CCO at least two weeks prior to program commencement.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Confirmation of enrolment equates to the allocation of offenders onto a specific program occurrence. Offenders allocated (usually two weeks prior to program start date) are visible to all staff	Quarterly review
j	Attendance records indicate group size meets requirement of program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Allocated offenders report shows group size	Quarterly review

	STANDARD 2	SCHEDULING OF PROGRAMS					LOCATION: STATE-WIDE	
	Element	0	1	2	3	N/A	Evidence	Monitoring and Auditing
k	Attendance records demonstrate weekly frequency and duration are in accordance with program manual.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The schedule builder in OIMS requires that dates and times are nominated The report of program attendances can be compared with program manual to assess compliance	Quarterly review
l	Attendance records demonstrate that total number of sessions is in accordance with program manual.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The report of program attendances can be compared with program manual to assess compliance	Quarterly review
m	Program completion reports indicate that participants have completed the required number of sessions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	'Exceptions' report to show discrepancies between a stated completion and the required number of sessions and also the required number of sessions where a completion has not been recorded	Quarterly review

	STANDARD 3	PROGRAM PARTICIPANT ENROLMENT					LOCATION: STATE-WIDE	
	Element	0	1	2	3	N/A	Evidence	Monitoring and Auditing
a	Participants enrolled in programs based on assessment of risk, need and responsivity, including specialised assessment where relevant.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enrolments follow identification of medium to high risk of re-offending, appropriate need and relevant specialised assessments. In addition, sentence length and current suitability for program have been considered	Quarterly review of program participation against LSI-R risk levels, appropriate needs domains, length of time to serve or supervision end
b	Participant enrolments are based on: - EQUIPS candidates lists (see notes for EDRMS references) - Inmate and Offender Needs Analyses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Inmate/offender reports generated to show participants' LSI-R risk levels and need domain scores Candidates show eligible offenders – sentenced, medium to high risk, between 3 and 24 months to EPRD or to end of supervision and relevant offence/need to/for specific program	Quarterly review of program participation against LSI-R risk levels, appropriate needs domains, length of time to serve or supervision end
c	Pre-program interviews conducted for all participants prior to program commencement.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1) Pre-Program Suitability Interviews conducted to differentiate eligibility and suitability 2) Pre-program interviews conducted for EQUIPS program suite	1) Report generated and distributed to stakeholders 2) Program design for each program incorporates pre- and post interviews
d	Participants must provide informed consent prior to commencing a program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Participants must provide informed consent only for the High Intensity Programs (SOP, VOTP, IDATP) and the EQUIPS Domestic Abuse Program	Review of referral packages demonstrates that participants have signed consent

	STANDARD 4	PROGRAM FACILITATOR ACCREDITATION					LOCATION: STATE-WIDE	
	Element	0	1	2	3	N/A	Evidence	Monitoring and Auditing
a	Facilitators are accredited in delivery of programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Training records held by the State-wide Programs Team and in the Learning Management System	Quarterly review Refer to Programs checklist, items P3, EDRMS reference D14/140759
b	Inexperienced but accredited facilitators should be paired with more experienced facilitators.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Program schedules should reflect effective pairing of facilitators. First time facilitators are paired with more experienced facilitators.	Quarterly review Interviews with staff Refer to Programs checklist, items P24, EDRMS reference D14/140759

	STANDARD 5	SUPERVISION OF FACILITATION PRACTICE					LOCATION: STATE-WIDE	
	Element	0	1	2	3	N/A	Evidence	Monitoring and Auditing
a	Professional Supervisors are identified for each staff member facilitating group programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The organisational structure reflects appropriate supervisory relationships and deviations to this are known to (and managed by) the Cluster MOSP and Regional Support Managers.	Quarterly review Records of supervision sessions available for auditing
b	Supervisors must be recognised by the branch as having sufficient professional knowledge of program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Supervisors will have sufficient experience to provide program facilitator practice supervision and should have attended any training deemed compulsory by State-wide Programs.	Quarterly review Records of supervision sessions available for auditing
c	Supervision records indicate sessions have been observed by clinical supervisor (where program is facilitated by a psychologist) or State-wide Programs Team on a regular basis.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No less than 5% of program observed by supervisor over duration of program. The frequency of live supervision should be monitored by the nominated professional or clinical supervisor.	Quarterly review Records of supervision sessions available for auditing
d	Facilitators of intensive sexual and violent offending programs attend individual supervision or peer consultation at least every 6 weeks.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	For facilitators of sexual/violent offending programs, 1 x personal supervision or peer consultation session at least every six weeks. Confidential supervision logs are kept by participants.	Quarterly review Records of supervision sessions available for auditing

	STANDARD 5	SUPERVISION OF FACILITATION PRACTICE					LOCATION: STATE-WIDE	
	Element	0	1	2	3	N/A	Evidence	Monitoring and Auditing
e	Program Development Workshops (practice supervision) must be minuted with an established documentation process.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Minutes of supervision should reflect an established documentation process and that the frequency has been in accordance with program requirements. This is reflected on restricted group facilitator EDRMS file.	Quarterly review Records of supervision sessions available for auditing

	STANDARD 6	PROGRAM INTEGRITY AND EFFECTIVENESS					LOCATION: STATE-WIDE	
	Element	0	1	2	3	N/A	Evidence	Monitoring and Auditing
a	A review of program completion reports, offenders' plans to address offending behaviour and pre/post program assessment indicate positive change.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review of program completion reports, and pre- and post-program assessment data to measure positive change.	Quarterly review of completions and pre/post assessment results of participants of the EQUIPS suite of programs. Audit of case plans to determine linkage between program participation, completion and case plan factors
b	Plans to address offending behaviour, developed by participants, are located on offender EDRMS case files. The plans are realistic in nature.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Safety plans are developed by participants and located on offender EDRMS case file. Plans are realistic in nature.	Quarterly audit of safety plans to assess compliance
c	Session observation notes and Program Development Workshop minutes reflect regular monitoring of professional behaviour and conduct.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<i>Program Observation & Support Form (Individual)</i> and Program Development Workshop Minutes to be completed and kept on a restricted group facilitator EDRMS file. Also records of regular Program Development Workshops	"Restricted access" quarterly audit of supervision minutes and reports generated from direct and video observation to determine whether monitoring of professional behaviour and conduct is being regularly maintained.

	STANDARD 6	PROGRAM INTEGRITY AND EFFECTIVENESS					LOCATION: STATE-WIDE	
	Element	0	1	2	3	N/A	Evidence	Monitoring and Auditing
d	Session observation notes and notes from Program Development Workshop minutes indicate facilitation methods are effective and consistent with program manual guidelines.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Program Development Workshop minutes and <i>Program Observation & Support Form (Individual)</i> kept on restricted EDRMS file indicate program delivery methods are effective and consistent with manual guidelines.	“Restricted access” quarterly audit of supervision minutes and reports generated from direct and video observation to determine whether facilitation methods are effective and consistent.
e	Program completion reports indicate reasons for any non-completions are not due to organisational, delivery or group mix issues.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Completion summary in a case note for EQUIPS; discharge summary saved on case management file or psychology file for intensive programs	This is an integral part of high intensity residential programs suite and needs to become standardised for other compendium programs
f	Efforts to retain participants in a program are noted in offender case notes and program completion report.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Completion summary in a case note for EQUIPS; discharge summary saved on case management file or psychology file for intensive programs	

STANDARD 7		PROGRAM REPORTING					LOCATION: STATE-WIDE	
Element		0	1	2	3	N/A	Evidence	Monitoring and Auditing
a	Program completion/exit reports and any plan developed by the offender are placed on the offender case file within eight weeks of program completion or cessation.	<input type="checkbox"/>	Program completion/exit reports are prepared for all participants whether completing or non-completing and provided in a timely manner (Case note summary within four weeks of completion and full report within 8 weeks).	Quarterly sample audit of case files conducted to assess compliance				
b	Recommendations from a program completion report are noted on an offender's management plan.	<input type="checkbox"/>	Offender management processes are informed by program completion reports. OIMS Utilities Summary Participation Reports and completions are available for case management processes. (Menu Path: Utilities>>Report Submission>>PROG/SERV>>Operational Programs/Services Report>>OIRPSPIO)	Quarterly sample audit of case plans conducted to assess compliance				
c	A case note on file indicates that the contents of completion reports are explained to participants.	<input type="checkbox"/>	Case note in OIMS (Menu path: Case Management>> Case Notes) and in case file	Quarterly sample audit of case files conducted to assess compliance				
d	Pre-program testing is completed (as per programs documentation) before commencement of a program.	<input type="checkbox"/>	Pre testing is completed prior to the program commencing and recorded in OIMS	Reports to be developed to draw results and to assist monitoring compliance				

STANDARD 7		PROGRAM REPORTING					LOCATION: STATE-WIDE	
Element		0	1	2	3	N/A	Evidence	Monitoring and Auditing
e	Post program testing has been completed on the last day of the program.	<input type="checkbox"/>	Post program testing is recorded in OIMS (Menu Path: Case Management>> Assessment/ Approval)	Reports to be developed to draw results and to assist monitoring compliance				
f	Pre- and post-program testing are recorded as per programs documentation	<input type="checkbox"/>	Pre- and post testing is delivered and recorded as per programs documentation					
g	Program records are maintained in accordance with departmental guidelines and procedures.	<input type="checkbox"/>	Program records maintained in OIMS (Menu path: Programs & Services Maintenance>> Maintain Accredited Programs) Monthly directives are sent to each manager for data remediation	Monthly audit reports determine compliance in: - recording the correct session - recording a session attendance outcome - recording individual program completions - deactivating completed program occurrences				
h	Program lines are reviewed for currency three-monthly with key stakeholders	<input type="checkbox"/>	Quarterly meetings review issue of currency and complete program data sets					

STANDARD 8		PROGRAM FILE MANAGEMENT					LOCATION: STATE-WIDE	
Element	0	1	2	3	N/A	Evidence	Monitoring and Auditing	
a	Review of OIMS data entry shows attendance records, program progress log.	<input type="checkbox"/>	<p>Offender management processes are informed by program completion reports. OIMS Utilities Summary Participation Reports and completions are available for case management processes.</p> <p>(Menu Path: Utilities>>Report Submission>>PROG/SERV>>Operational Programs/Services Report>>OIRPSPIO)</p>	<p>Monthly audit reports determine compliance in:</p> <ul style="list-style-type: none"> - recording the correct session - recording a session attendance outcome - recording individual program completions - deactivating completed program occurrences 				
b	Case file review shows (where relevant and as per CSNSW program policies) the pre-program interview checklist, signed consent form, progress reports, participant case notes, copy of any plan developed by the offender, program completion report	<input type="checkbox"/>	Direct review of participant case files.	Sample audit of case files conducted quarterly to assess compliance				

APPENDIX A – CSNSW SUPERVISION FRAMEWORK

Overview

This Appendix should be read in conjunction with the *Professional Supervision Policy for Offender Services & Programs Staff* ([D14/444944](#)). It includes supervision arrangements for OS&P staff, Reflective Practice in Supervision, Peer Group Supervision, Self-Assessment and Video Observation.

CSNSW Offender Services & Programs are committed to providing offender behaviour change programs with integrity. To support this, there is a need for a supervision framework that promotes reflective practice and professional development, and in which a quality assurance tool can be applied. The processes arising from this framework will give greater clarity regarding best practice standards to all staff involved in the implementation of programs. The primary objectives of this are:

- (a) to ensure program integrity and delivery standards are met; and
- (b) to measure this through the development and use of these Standards as a quality assurance measurement tool.

There are a number of fundamental components that enhance program delivery and effectiveness. An important factor of any supervision framework is that it considers what characteristics are essential in achieving and sustaining what is commonly viewed as best practice. One example is that, when delivering offender intervention programs, facilitators should base their interactions with group participants on research and evaluation findings (evidence-based practice) and a high level of proficiency and skill.

Supervision arrangements for Offender Services and Programs staff

- 1) Professional supervision groups are to be arranged by Cluster MOSPs and should normally be arranged within the cluster where the staff members operate. In exceptional cases or with the approval of the relevant Regional Support Manager OS&P, inter-cluster arrangements can be made where staff may attend a supervision group outside of their cluster. Such arrangements should not incur any financial or work time cost to CSNSW.
- 2) Cluster MOSPs are to ensure that all OS&P staff are able to attend a professional supervision session each month and that allocation to a professional supervision group occurs in a consultative manner.
- 3) Senior SAPOs are to deliver professional supervision to their team of SAPOs, Alcohol & Drug workers and Welfare Officers once a month for a maximum of 2 hours per session.
- 4) Senior SAPOs, in turn, are to receive professional supervision from a CSNSW Senior Psychologist once a month in a group setting for a maximum of 2 hours per session.
- 5) Supervision will occur within the work place within work time.
- 6) The group size will differ in locations, but there should be no more than six supervisees.
- 7) Regular individual professional supervision sessions should only occur in exceptional circumstances, following the approval of the relevant Regional Support Manager OS&P.
- 8) Professional supervision is not mandatory; however, all Alcohol and Drug Workers, Welfare Officers and SAPOs are strongly encouraged to attend.
- 9) The mode of delivery should be chosen to maximise consistent access for staff. Options include face to face, telephone, and videoconferencing delivery.

- 10) It is acknowledged that personally arranged supervision can be seen as an acceptable alternative to the professional supervision described in this document. However, personally arranged supervision must be taken in staff members' own time and at their own expense.

It is fundamental to the supervision process that the supervisor and facilitator have an agreement in place that highlights key principles of supervision. The rationale for a supervision agreement is:

- an agreement can create a foundation for both the facilitator and supervisor to feel safe, respected and supported
- an agreement ensures the style of working in supervision is structured, collaborative and helps to direct supervision to process, content and relationship
- professional boundaries can be established through making explicit the developmental, professional and organisational functions of supervision
- an agreement is designed to avoid a situation where the facilitator and supervisor have different expectations of supervision that might damage the normal supervisory relationship
- the amicable negotiation of mutual expectations at the formative stages of supervision helps avoid problems later in supervision

Key points to consider when developing a supervision agreement are:

- Rules and policy regarding confidentiality
- The methods and techniques that will be used during supervision
- Goals, aims and objectives of supervision
- Discussion of prior experiences of supervision, so that supervision can be promoted as a positive developmental experience

The rights and responsibilities of both the program facilitator and supervisor

- How the effectiveness of supervision will be measured/evaluated
- How any problems within the supervisory alliance will be handled from both the facilitator and supervisor perspective
- How issues that are outside the competence of the supervisor will be handled
- How the development of competencies will be addressed from both a facilitator and supervisor perspective
- The method of reviewing or renegotiating the supervision agreement if necessary

Reflective practice in supervision

Adopting a reflective practice model within supervision enables the supervisor to focus on the clinical interactions of the supervisee in a treatment setting. This mechanism will allow for the promotion of reflective practice by the facilitator under the guidance of the supervisor. *Reflective practice* involves thoughtful consideration of one's own experiences in applying knowledge to practice while being coached and guided by professionals or 'experts' in the discipline such as a program supervisor. Reflective practice is associated with learning from experience, and is viewed as an important strategy for program facilitators for ongoing learning. The act of reflection is seen as a way of promoting the development of autonomous, qualified and self-directed professionals. Engaging in reflective practice is associated with the improvement of the quality of services, stimulating personal and professional growth and closing the gap between theory and practice (Jasper, 2003).

Reflective practice requires the staff member to reflect on activities and integrate new information where it is relevant, in order to improve practice. It may include:

- Self-assessment of practice/competence in a given situation to identify areas for development and ultimately improve competence
- Looking for learning points within the scenario or situation on which to reflect and consider how that learning might be applied in other situations to further enhance performance
- Identifying learning/development needs and planning to meet these in order to improve practice
- Changing or modifying practice in response to the learning undertaken

Structured reflection involves systematically moving through one or all of the following questions for reflection with the assistance of a supervisor:

- What happened?
- What were the Identifying significant events/incidents?
- What were the feelings, thoughts and actions?
- What assumptions, beliefs, customs, or values underlie the event?
- What were the environmental demands?
- What are the implications for future practice?
- What was learned?
- What could be changed or done differently?
- What concepts/assumptions could be challenged?

Peer Group Supervision

Peer group supervision utilises a structured process that allows a group of facilitators or clinicians to provide professional support to each other as part of their day to day work practice. This model allows members of the group to collaboratively contribute to the learning and development of each group member. The process enables members, individually and as a group, to engage in clinical problem solving using reflective practice techniques. The process can distribute information, promote learning, discuss ethical boundaries and practice and explore difficult clinical and professional situations that may have arisen during the course of program facilitation.

This model can be especially beneficial to participants when there is a frequent absence of a professional supervisor or 'expert' to take on a support role. Some of the advantages include:

- increased access/frequency of supervision
- reciprocal learning through the sharing of experiences
- increased skills and responsibility for self-assessment through reflective practice
- decreased dependency on expert supervisors
- increased self-ownership of professional development

This model requires supervisees to be self-directed learners, determining their own supervision needs, choosing methods and tools that will meet them and using the group as a resource for learning and practice development.

Self-assessment

The responsibility of maintaining program integrity falls heavily on facilitators delivering the treatment program. To assist in achieving this, facilitators should undertake self-assessment (or with a co-facilitator) following every session delivered to determine the extent to which they have optimised the group members' engagement in the program and minimised problems associated with program drift, reversal and non-compliance. Peer Group Supervision sessions are a forum where these issues can be aired and explored.

Video observation

Peer/Program Supervisor assessment of videos can be used to measure the quality of program delivery and to provide facilitators with feedback on practice strengths and areas for further development. The facilitator should be provided with the opportunity to monitor at least one session from each program they deliver. In addition, the facilitator should adopt the practice of completing detailed case notes specific to program delivery, where required, on the Offender Information Management System (OIMS) for the supervisor to review as part of the supervision and quality assurance process.

APPENDIX B - Recommended Competencies for Supervisors and Supervisees (staff facilitating programs)

This section relates to the Professional Practice Standards (see Page 13) which are comprised of ten core areas of practice in the program facilitators' role:

Element	Competency	Competency Explained
Supervisee - group facilitation	<ul style="list-style-type: none"> • Facilitation of group learning (Area 2) and Staff Training (Area 10) 	<ul style="list-style-type: none"> • Through course attendance, gains understanding of the key principles that underpin Cognitive Behavioural Therapy (CBT), Group Facilitation and Motivational Interactions (MI) • Understanding of the key principles of the Stages of Change (Prochaska and DiClemente, 1984) and Adult Learning Cycle (Kolb 1984) • To achieve this without being confrontational, but by enhancing the participant's motivation to address these topics and to remain focussed on positive change • Demonstrated confidence in facilitating a group session and using creative group work skills • Maintaining objectivity and being non-judgemental, non-discriminatory and not placing their own values or beliefs onto the offenders • Displaying qualities of an effective group facilitator to enhance the therapeutic alliance including having warmth, empathy, respect, openness and genuineness • Reframing information and asking questions to generate continued learning by participants

		<ul style="list-style-type: none"> Effectively engaging group participants in experiential learning exercises including roles plays Working with conflict within a group using appropriate strategies and techniques while applying specific tools such as the Focal Conflict Model (Whittaker 1985) Discussing topics that are difficult and uncomfortable for the participants.
	<ul style="list-style-type: none"> Delivery of programs as prescribed (Area 3); Program Organisation (Area 9) 	<ul style="list-style-type: none"> Knowledge of session content and program materials Ability to facilitate learning of participants in a group setting and engage participants in all aspects of the group process Ability to guide the participants through the program material, taking into consideration differences in learning styles, educational and literacy levels and cognitive ability
	<ul style="list-style-type: none"> Application of theoretical concepts (Area 4) 	<ul style="list-style-type: none"> Ability to explain core concepts and engage the group in cognitive behaviour therapy principles
	<ul style="list-style-type: none"> Working with indigenous and CALD concepts (Area 5 and Area 6) 	<ul style="list-style-type: none"> Ability to facilitate learning of participants in a group setting and engage participants in all aspects of the group process Ability to guide the participants through the program material, taking into consideration differences in learning styles, educational and literacy levels and cognitive ability

Supervisee - team member	<ul style="list-style-type: none"> • Co-facilitation (Area 7); Management of Program Relationships (Area 8) 	<ul style="list-style-type: none"> • Maintains an honest and open relationship with co-facilitator about program related issues and self • Takes personal responsibility for own thoughts, feelings and behaviour • Attempts problem resolution with co-facilitator or, if necessary, supervisor. • Utilises a solution focused problem solving process before escalating issues. • Gives and receives open and responsive feedback
	<ul style="list-style-type: none"> • Self-management (Area 1) 	<ul style="list-style-type: none"> • Actively participates in practice supervision on both an individual and group basis as detailed in the Program Manuals and Standards • Listens to feedback provided, incorporating it into work practice. • Maintains an honest, open and respectful relationship with supervisor • Raises difficult issues sensitively; willingly discusses positive and negative experiences; accepts feedback and incorporates into practice; provides constructive feedback. • Discusses a range of work-related and professional issues with a view to enhancing skills, knowledge and capacity to work effectively, ensuring self-care. • Functions autonomously in the role

		<ul style="list-style-type: none"> • Willingly supports and develops less experienced officers • Proactively identifies opportunities for supporting colleagues in the delivery of effective programs • Proactively seeks opportunities for related professional development
Supervisor –	<ul style="list-style-type: none"> • Self-management (Area 1); Facilitation of group learning (Area 2); Application of theoretical concepts (Area 4); Management of program relationships (Area 8); and Program organisation (Area 9) 	<ul style="list-style-type: none"> • Displays an understanding of the CSNSW program supervision model • Maintains a high level of theoretical, technical and procedural knowledge • Displays a sound understanding of the theory underpinning and techniques required for effective supervision i.e. reflective practice, communication, adult learning and developmental frameworks • Displays understanding and implements models for reflective practice within program supervision e.g. Kolb's Adult Learning styles (1984) and Daphne Hewson (2004) Supervision Triangle • Displays the skills and qualities required for the development and maintenance of effective supervisory relationships including being respectful; collegial; non-patronising; non-judgmental; empathic; and has the ability to gain trust of supervisee so the supervisee feels safe to disclose and explore. • Uses coaching to assist others in problem solving, rather than directing to answers

		<ul style="list-style-type: none">• Maintains balance of supervisory functions around supervisee's opportunities for experiential learning dependent upon supervisee's needs and experience.• Able to objectively evaluate supervisees• Able to identify and manage challenging attitudes and behaviours• Able to use appropriate strategies for dealing with emotional responses to complex situations
--	--	--

APPENDIX C - RELEVANT LEGISLATION AND OPERATIONAL INSTRUCTIONS

Legislation by which CSNSW operates

The main legislation that applies to NSW public service employees is the Government Sector Employment (GSE) Act 2013 (replacing the Public Sector Employment and Management Act 2002) and the Public Finance and Audit Act 1983. A number of provisions of the Crimes (Administration of Sentences) Act 1999 and Regulation apply to all employees of CSNSW. The principal Acts and Regulations relevant to employees of CSNSW are listed below. It should be noted this list is not exhaustive, may change from time to time and all amendments will appear on the Intranet.

There are also Guidelines relating to Ethical Practice which can be found in EDRMS D10/733771.

By clicking on this link <http://www.legislation.nsw.gov.au/maintop/search/inforce> a search page will appear which will allow you to search for and view any Act in full.

Anti-Discrimination Act 1977

Bail Act 1978

Child Protection (Offenders Registration) Act 2000

Children (Detention Centres) Act 1987

Commission for Children & Young People Act 1998

Coroners Act 2009

Crimes Act 1900

Crimes (Administration of Sentences) Act 1999

Crimes (Administration of Sentences) Regulation 2008

Crimes (Domestic and Personal Violence) Act 2007

Crimes (Forensic Procedures) Act 2000

Crimes (Interstate Transfer of Community based Sentences) Act 2004

Crimes (Interstate Transfer of Community based Sentences) Regulation 2004

Crimes (Sentencing Procedures) Act 1999

Crimes (Serious Sex Offenders) Act 2006

Criminal Procedure Act 1986

Criminal Records Act 1991

Drug Court Act 1998

Evidence (Audio & Audio Visual Links) Act 1998

Fines Act 1996

Freedom of Information Act 1989 (replaced by the Government Information (Public Access) Act 2009)

Government Sector Employment Act 2013 (replacing the Public Sector Employment and Management Act 2002)

Health Records and Information Privacy Act 2002

Human Rights & Equal Opportunity Commission Act 1986 (Federal)

Independent Commission Against Corruption Act 1988

Industrial Relations Act 1996

International Transfer of Prisoners (NSW) Act 1997

Mental Health Act 2007

Mental Health (Forensic Provisions) Act 1990

Occupational Health and Safety Act 2000

Ombudsman Act 1974

Parole Orders (Transfer) Act 1983

Prisoners (Interstate Transfer) Act 1982

Prisoners (Interstate Transfer) Regulation 2009

Privacy and Personal Information Protection Act 1998

Protected Disclosures Act 1994
Public Finance and Audit Act 1983
Public Sector Employment and Management Act 2002 (replaced by the Government Sector Employment Act 2013)
Public Sector Employment and Management (General) Regulation 2009
Road Transport (Driver Licensing) Act 1998
Road Transport (Safety and Traffic Management) Act 1999
Sheriff Act 2005
State Records Act 1998
Summary Offences Act 1988
Terrorism (Police Powers) Act 2002
Workers Compensation Act (1987)

CSNSW Policy and Procedures documents

Alcohol and Other Drugs Policy
Commissioner's Instructions (in accordance with Section 235B of the Crimes (Administration of Sentences) Act 1999)
Commissioner's Memoranda
Community Policy & Procedures Manual
Community Supervision Guidelines
Conflicts of Interest Policy
Contact with Offenders Policy
Corporate Wardrobe and Dress Code for Non-Custodial Staff Policy
Corrective Services Academy Staff Code of Practice
CSI Code of Conduct
CSI Policy Manual
Electronic Mail Policy
Gifts and Benefits Policy
Good Working Relationships Policy
Information Classification and Ownership Policy
Inmate Classification & Case Management Procedures
Intellectual Property (IP) Management Policy
Internal Reporting Policy
Management of Professional Conduct Policy
Managing Bullying and Harassment Policy
Operations Procedures Manual
Parole Policy & Procedures Manual
Privacy Code of Practice (when completed)
Privacy Management Plan (when completed)
Protected Disclosures Policy
Reportable Conduct Policy
Staff Development Policy and Guidelines
Working Where Close Personal Relationships Exist Policy