

EXECUTIVE SUMMARY

Cleveland Youth Detention Centre

March Quarter 2012

The statutory on site inspection of the Cleveland Youth Detention Centre (CYDC) was conducted from 6–10 February 2012 by Principal Inspector Graham Morrison and Acting Principal Inspector Ray Currier. The primary focus and monitored areas for the inspection were drawn from the four year Risk Matrix Schedule which is revised annually by the Inspectorate.

Self harm and suicide risk

Arrangements for Department of Communities' Principal Project Officer Suicide Prevention (PPOSP) Community Mental Health, Leah Tickner to assist the Inspectorate during the inspection were made after mutual benefits were identified through the Inspectorate's participation in the steering group for the project. Leah is a qualified psychologist with a clinical background and extensive experience in the private sector.

Overall, the Inspectorate found that the recording and management practices associated with Self Harm/Suicide Risk for CYDC were well established, embedded, and consistent with expectations. The collaborative and inclusive nature of decision making undertaken regarding the particular young person reviewed, demonstrated the underpinning knowledge of all members present when developing the Suicide Prevention Plan.

Reporting of harm

Inspection reports since March 2008 have detailed the confusion surrounding definitions, responsibilities, and reporting lines in relation to this focus area. The two definitions of harm under s268 of the *Youth Justice Act 1992* (the YJA) and s9 of the *Child Protection Act 1999* (the CPA) contained within chapter eight of the Youth Detention Centre Manual (YDCM) appeared to the Inspectorate in part, to contribute to the reason why confusion and uncertainty of some staff in relation to their identification of and statutory obligation to report harm exists.

Youth detention environments have constant supervision by operational staff, procedures, and dedicated responses for the care and safety of detained young people.

The centres are well resourced with 24-hour medical services, regularly trained staff, and more vigorous mechanisms and specific responses to detect and respond to harm than familial situations allow Child Safety practitioners. The difficulty lies in the standard practices and reporting process of youth detention centres and how they do not necessarily associate the link with obligations to report harm, no matter how the harm was caused.