

Evaluation of the Custody Notification Service

Final Evaluation Report

National Indigenous Australians Agency

July 2023

Acknowledgement

KPMG acknowledges Aboriginal and Torres Strait Islander peoples as the First Peoples of Australia. We pay our respects to Elders past, present, and future as the Traditional Custodians of the land, water and skies of where we work.

At KPMG, our future is one where all Australians are united by a shared, honest, and complete understanding of our past, present, and future. We are committed to making this future a reality. Our story celebrates and acknowledges that the cultures, histories, rights, and voices of Aboriginal and Torres Strait Islander People are heard, understood, respected, and celebrated.

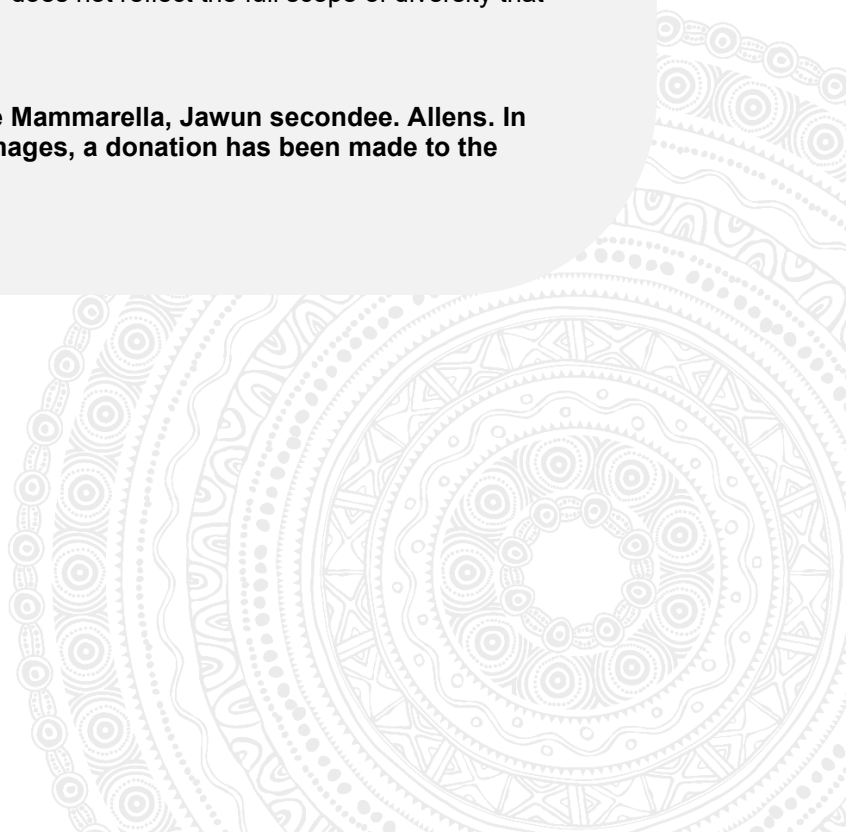
Australia's First Peoples continue to hold distinctive cultural, spiritual, physical and economical relationships with their land, water and skies. We take our obligations to the land and environments in which we operate seriously.

Guided by our purpose to 'Inspire Confidence. Empower Change', we are committed to placing truth-telling, self-determination and cultural safety at the centre of our approach. Driven by our commitment to achieving this, KPMG has implemented mandatory cultural awareness training for all staff as well as our Indigenous Peoples Policy. This sincere and sustained commitment has led to our 2021-2025 Reconciliation Action Plan being acknowledged by Reconciliation Australia as 'Elevate' – our third RAP to receive this highest level of recognition. We continually push ourselves to be more courageous in our actions particularly in advocating for the Uluru Statement from the Heart.

We look forward to making our contribution towards a new future for Aboriginal and Torres Strait Islander peoples so that they can chart a strong future for themselves, their families and communities. We believe we can achieve much more together than we can apart.

KPMG recognises, values, and respects the diversity of histories, cultures, countries, and languages that exist in Aboriginal and Torres Strait Islander communities. Throughout this document, we use the terms 'Indigenous', 'First Peoples', and 'First Nations' interchangeably with 'Aboriginal and/or Torres Strait Islander peoples'. We acknowledge that the term 'Indigenous' does not reflect the full scope of diversity that exists within these communities.

COVER IMAGE: Allens, 2015. Natalie Mammarella, Jawun secondee. Allens. In consideration for the use of these images, a donation has been made to the Yirrkala Arts Centre.



Disclaimer

Inherent Limitations

This Final Evaluation Report has been prepared as outlined with the National Indigenous Australians Agency in the Scope Section of the contract dated 17 August 2022. The services provided in connection with this engagement comprise an advisory engagement, which is not subject to assurance or other standards issued by the Australian Auditing and Assurance Standards Board and, consequently no opinions or conclusions intended to convey assurance have been expressed.

No warranty of completeness, accuracy or reliability is given in relation to the statements and representations made by, and the information and documentation provided by the National Indigenous Australians Agency and stakeholders consulted as part of the process.

KPMG have indicated within this Final Evaluation Report the sources of the information provided. We have not sought to independently verify those sources unless otherwise noted within the report.

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This Final Evaluation Report has been prepared at the request of the National Indigenous Australians Agency in accordance with the terms of KPMG's engagement letter/contract dated 17 August 2022. Other than our responsibility to the National Indigenous Australians Agency, neither KPMG nor any member or employee of KPMG undertakes responsibility arising in any way from reliance placed by a third party on this report. Any reliance placed is that party's sole responsibility.

Accessibility

To comply with the Commonwealth Government's accessibility requirements for publishing on the internet, two versions of this Report are available: a KPMG-branded PDF version and an unbranded Microsoft Word version. The KPMG-branded PDF version of this Report remains the definitive version of this Report.

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Glossary

Acronym or key term	Meaning
ABS	Australian Bureau of Statistics
ACCHO	Aboriginal Community Controlled Health Organisations
ACCO	Aboriginal Community Controlled Organisations
ACT	Australian Capital Territory
ACO	Aboriginal Contact Officer
AHLO	Aboriginal Hospital Liaison Officer
AHC	Aboriginal Health Corporations
AIC	Australian Institute of Criminology
AJA	Aboriginal Justice Agreement
AIATSIS	Australian Institute of Aboriginal and Torres Strait Islander Studies
ATSILS	Aboriginal and Torres Strait Islander Legal Services
ALRC	Australian Law Reform Commission
ALRM	Aboriginal Legal Rights Movement
ALSWA	Aboriginal Legal Service of Western Australia
AMS	Aboriginal Medical Services
CNS	Custody Notification Service
CNOs	Custody Notification Officers
CtG	Closing the Gap
Indigenous Australian	The term Indigenous Australian is used interchangeably with the reference to Aboriginal and Torres Strait Islander people
JAS	Justice Advisory Service
KPI	Key Performance Indicator
MOU	Memorandum of Understanding

Acronym or key term	Meaning
NAAJA	North Australian Aboriginal Justice Agency
NDICP	National Deaths in Custody Program
NHMRC	National Health and Medical Research Council
NIAA	National Indigenous Australians Agency
NSW	New South Wales
NSW/ACT ALS	NSW/ACT Aboriginal Legal Service
NT	Northern Territory
NTP	Northern Territory Police
PM&C	Department of the Prime Minister and Cabinet
QLD	Queensland
RCIADIC	Australian Royal Commission into Aboriginal Deaths in Custody
SA	South Australia
SAPOL	South Australia Police
Tas	Tasmania
UTS	University of Technology Sydney
VALS	Victorian Aboriginal Legal Service
Vic	Victoria
VicPol	Victorian Police
WA	Western Australia

Executive summary

Context and Background

The Custody Notification Service (CNS) is a telephone-based service that is intended to deliver an independent, culturally appropriate health and wellbeing check, along with basic legal information, to any Aboriginal and/or Torres Strait Islander person entering police custody.

This 24 hour telephone service was introduced over time across Australia in response to high rates of Indigenous harm and deaths in custody, and the recommendations of the 1991 Royal Commission into Aboriginal Deaths in Custody (RCIADIC)^{1, 2, 3, 4}.

The drivers of Aboriginal deaths in custody uncovered through RCIADIC include:

- The systemic failure by those owing duty of care to people in custody to provide this care to Indigenous people, particularly in relation to the receiving police officers duty to obtain medical advice
- The barriers of distrust between Aboriginal people and police and the limited level of communications between the two groups at a day-to-day level
- The lack of protocols or processes between the many institutions that play a direct or indirect role in determining the impact of the criminal justice system on Aboriginal people.

These drivers formed the basis for the RCIADIC recommendation for the establishment of the CNS.

Intended outcomes

The CNS is funded by the Commonwealth in 6 states and territories to achieve the following outcomes:

- Reduced rates of Indigenous harm and deaths in police custody
- Protection of legal rights of Aboriginal and Torres Strait Islander people whilst held in police custody
- Improved relationships between police, Indigenous communities and ATSILS
- Improved police capacity to understand and respond to the complex health and wellbeing needs of Indigenous people in custody
- Reduced rates of Indigenous adult incarceration and youth detention (Closing the Gap Targets 10 and 11⁵).

In Tasmania and Queensland, where Commonwealth funding is not in place, CNS programs are delivered through alternative funding sources. Tasmania uses existing Commonwealth funding provided under their National Legal Assistance Partnership (NLAP) agreement, whilst Queensland utilises state government funding for the program. The Western Australian Government co-funds the CNS in that state.

¹ Muirhead, J. (1991). *Royal Commission into Aboriginal Deaths in Custody*. Canberra: Australian Government Publishing Service.

² Cunneen, C. (2007). Reflections in Criminal Justice Policy since the Royal Commission into Aboriginal Deaths in Custody. In N. Gillespie, *Reflections: 40 Years on from the 1967 Referendum, Aboriginal Legal Rights Movement* (pp. 135 - 146). Adelaide: Aboriginal Legal Rights Movement Inc. Retrieved from <https://catalogue.nla.gov.au/Record/4199276>

³ Wooten, H. (1991). *Royal Commission into Aboriginal Deaths in Custody*. Canberra: Australian Government Publishing.

⁴ Department of Prime Minister and Cabinet. (2018). *Review of the implementation of the recommendations of the Royal Commission into Aboriginal Deaths in Custody*. Canberra: Australian Government.

⁵ Closing the Gap. (n.d). *Closing the Gap Targets and Outcomes*. Retrieved from Closing the Gap: [Closing the Gap targets and outcomes | Closing the Gap](#)

Evaluating the CNS

KPMG was engaged by the National Indigenous Australians Agency (NIAA) to conduct an independent evaluation of the CNS. KPMG has conducted a mixed-methods, theory-based evaluation that is intended to evaluate the extent to which the CNS is:

- Appropriately designed to meet client needs
- Implemented and delivered effectively
- Contributing to outcomes
- Efficiently utilising resources
- Leading to benefits to the broader community.

Data available to this evaluation included:

- Stakeholder consultation, through interviews and surveys
- Community engagement in 13 locations representing a mix of metropolitan, regional and remote areas
- CNS program data and performance reporting
- Arrest data
- Longitudinal justice related data sets from the Australian Bureau of Statistics and the Australian Institute of Criminology.

KPMG has applied the following approach to determining the merit of the CNS against each domain of interest and in assessing the strength of the evidence collected:

Merit Determination

Merit ratings have been developed to provide a standard assessment framework against which to evaluate the performance of the CNS in relation to each domain of interest. Through synthesising results from diverse data sources, an overall rating has been provided to assess the program against each domain using the ratings set out in *Table 1*, which provides a description of each standard across the ratings.

Table 1: Merit Ratings

Merit Rating	Standard observed
Excellent	Performance was clearly very strong in relation to the overarching question of the evaluation domain. No significant gaps or weaknesses were identified.
Very Good	Performance was generally strong in relation to the overarching question of the evaluation domain. Some minor gaps or weaknesses were identified.
Good	Performance was generally strong in some areas relating to the overarching question of the evaluation domain. Some gaps or weaknesses were evident.
Adequate	Performance demonstrated some weaknesses in relation to the overarching question of the evaluation domain, however minimum expectations or requirements were met.
Poor	Performance was weak in relation to the overarching question of the evaluation domain. Minimum expectations or requirements were not met.

Strength of evidence

The evaluation has applied the following guide in assessing the strength of evidence in determining the findings for each domain of interest:

Sufficient evidence: where the evidence is sufficient to draw a largely unqualified conclusion regarding the evaluation question because either there is a single source of quality data or multiple sources of data with no major quality issues and which consistently point to the conclusion reached

Some evidence: where the evidence suggests the observation is true but there are data limitations, such that the finding is qualified and further and/or different data (which may have been unavailable to this evaluation) would need to be sourced to be more confident in the conclusion reached

Weak evidence: where the evidence is indicative of a finding but there are major shortcomings in the data such that limited confidence can be placed on the conclusion

No evidence: where no data exists upon which to make any finding.

Summary of key findings and recommendations

A best practice model of the CNS

A detailed best practice model of the CNS has been developed as part of this evaluation, synthesising reflections and insight from multiple perspectives. This sets out the key capabilities and activities central to the successful operation of the CNS. These include the need for CNS operators to demonstrate competencies in trauma informed service delivery, along with an understanding of the need to practice cultural awareness and provide cultural safety to their Indigenous Australian clients. This, in turn, fosters their capability in engaging safely and appropriately with Indigenous Australians and supports efforts to build and sustain connection to Indigenous communities.

This is an essential component of delivering the CNS, supporting an understanding at the local and regional level of Indigenous community relationships and nuances, an understanding of the complex health and wellbeing needs of Indigenous Australians in custody, and supporting a shared understanding of the role of the Indigenous community in the CNS. Through the ongoing efforts of the CNS in these areas, local Indigenous communities can understand and trust the CNS, which in turn supports the take up of CNS assistance by Aboriginal and Torres Strait Islander people when they are brought into police custody.

In parallel with investment in relationships with Indigenous communities, CNS providers must also build strong engagement with police at local and state levels. In practice, this means conducting regular visits to watch houses and stations where there are higher numbers of Aboriginal and Torres Strait Islander people taken into police custody, and building trust and a shared understanding of the role and objectives of the CNS. This investment in a strong, positive relationship with police is an essential enabler of the CNS to deliver effective service to people once they are in police custody.

The objectives of the CNS are further supported by ongoing engagement with service providers in local communities, supporting better, individualised service delivery for Aboriginal and Torres Strait Islander people in police custody.

Appropriateness of the design of the CNS

The appropriateness of the design of the CNS was evaluated with respect to the extent to which it:

- Meets the needs of clients
- Is strengths-based
- Is culturally respectful
- Is collaborative

Meets the needs of clients

Client’s needs were considered to be the social, emotional, physical and wellbeing needs that an individual might have whilst held in police custody. These included the client needing to understand the purpose of the CNS, to trust that the CNS is there to support them, to understand the legal process that they are facing, their physical needs such as food, water and blankets, for their families to be made aware that they are in custody, an interpreter in situations where the police do not speak their language, and additional support in the form of a trusted person to help them during interviews.

Strengths-based

In line with the Commonwealth’s Indigenous Advancement Strategy Evaluation Framework⁶ (IAPEF), this evaluation has examined the extent to which the CNS program ‘builds on strengths to make a positive contribution to the lives of current and future generations of Indigenous Australians’ (p 6).

To do this, the evaluation has reflected on the evidence that the CNS draws on the strengths of the individual Aboriginal and Torres Strait Islander people it supports, such as the strengths they have in their relationships to culture, land and community.

Culturally respectful

The IAPEF⁷ also requires an evaluation of the extent to which Indigenous programs, such as the CNS, demonstrate cultural respect towards Indigenous Australians (p 6). In evaluating the CNS, the concept of cultural respect was explored in broad terms, for example in seeking evidence of the extent to which the program recognises and draws on the cultural authority of Elders, and the extent to which CNS operators are aware of the lore and traditions which apply in Indigenous justice systems relevant to the client, and are able to apply this knowledge to support the client’s wellbeing and long-term outcomes.

Collaborative

The third area required by the IAPEF⁸ in evaluating Indigenous programs is collaborative design. This is defined in the IAPEF as being ‘designed and delivered in collaboration with Indigenous Australians, ensuring diverse voices are heard and respected’ (p 6).

In the context of the CNS, collaborative design is an integral part of the theory of change best practice model (Figure 1: A best practice model of the CNS), requiring the CNS to continuously engage with Elders and Indigenous community representatives in the shared delivery of the service. This aspect of the model also requires collaboration with police and third party service providers in local communities, in order to be able to provide tailored and appropriate support to each client in custody.

The evaluation conclusions regarding these domains of interest are summarised in the following table.

Table 2: Merit rating and strength of evidence relating to the appropriateness of the design of the CNS

Domain	Merit determination	Strength of evidence
Extent to which the design of the CNS meets clients needs	Good – performance was strong in some areas relating to meeting the needs of clients. Some gaps or weaknesses were evident. Overall, evidence suggests that the CNS is well designed to meet client needs, however this depends on the particular circumstances and relationships in place in each case.	Some evidence - There is some evidence to support this finding, however data and reporting regarding the extent to which each CNS provider is working to put in place the factors required to meet client needs is not available, leaving this evaluation to draw conclusions based on a limited sample of interviews, surveys and yarning circles.

⁶ National Indigenous Australians Agency. (2021). *Indigenous Advancement Strategy: Evaluation Framework*. Canberra: Australian Government Publishing.

⁷ Ibid.

⁸ Ibid.

Domain	Merit determination	Strength of evidence
Extent to which the CNS is strengths-based	Good - Overall, the CNS program is intended to provide a strengths-based service to Aboriginal and Torres Strait Islander people in police custody. It is constrained in this due to the telephone based nature of the service, however where the CNS engages with other services, this can help to ensure the client receives a strengths-based approach to meeting their needs, particularly through support delivered in-person.	Weak evidence - There is weak evidence to support this finding, with few clients recalling the details of the CNS telephone call, self-report of success from ATSILS and many police responding that they were unsure whether or not the service is strengths-based.
Extent to which the CNS is culturally respectful	Good - Overall, the CNS program is intended to be culturally respectful and this is supported by the delivery of the service by Indigenous-led ATSILS organisations. The extent to which ongoing deep engagement with Elders and the Indigenous community can continuously support a culturally respectful approach is constrained by the funding and capacity of CNS coordinators.	Weak evidence - There is weak evidence to support this finding, with self-reporting of success from ATSILS and many police responding that they were unsure whether or not the service is culturally respectful .
Extent to which the CNS has a collaborative design	Adequate - The evidence suggests that whilst CNSs undertake engagement with a range of stakeholders, including service providers and police at the local level, this may not be widespread and does not appear to be of a collaborative nature, focusing more on visibility of the service than the design of the model. There is little evidence that the design of the model included Indigenous voices beyond those in ATSILS themselves.	Some evidence - There is some evidence to support this finding, with consultations with a range of service providers, Indigenous community representatives, ATSILS, police and government representatives around Australia indicating that collaboration is not a strong part of the CNS model.

Implementation and delivery

The implementation and delivery of the CNS was evaluated with respect to the extent to which it:

- Meets intended reach
- Delivers expected activities and outputs

The evaluation conclusions regarding these domains of interest are summarised in the following table.

Table 3: Merit rating and strength of evidence relating to the implementation and delivery of the CNS

Domain	Merit determination	Strength of evidence
Reach of the CNS	Adequate - Overall, evidence suggests that the reach of the CNS is adequate at supporting the clients who the service was designed to assist. In most cases, minimum expectations regarding reach were satisfied, however, with greater promotion of the CNS and improved relationships with police, the reach could be improved.	Weak - There is weak evidence to support this finding. There are identified data limitations, such as that there was very limited data supplied on the number of notifications missed by police. It has been heard anecdotally that calls to the CNS are not being made but no data has been supplied to demonstrate this.

Domain	Merit determination	Strength of evidence
Expected activities and outputs	Adequate - Overall, evidence suggests that whilst the majority of expected activities and outputs are being delivered, key enabling activities around collaboration are not being consistently prioritised. At the same time, the provision of legal advice, which is not mentioned in the majority of funding agreements, was identified as a consistent, core practice.	Some evidence - There is some evidence to support this finding. There are data availability and reliability concerns, however, that suggest that further data collection would be required to be more confident in the conclusion reached.

Outcomes of the CNS

The CNS is in place to drive five core outcomes, as identified by the NIAA:

- 1 Reduced rates of Indigenous harm and deaths in police custody
- 2 Protection of legal rights of Aboriginal and Torres Strait Islander people whilst held in police custody
- 3 Improved relationships between police, Indigenous communities and ATSILS
- 4 Improved police capacity to understand and respond to the complex health and wellbeing needs of Indigenous people in custody
- 5 Reduced rates of Indigenous adult incarceration and youth detention (Closing the Gap Targets 10 and 11.⁹).

The evaluation conclusions regarding these domains of interest are summarised in the following table.

Table 4: Merit rating and strength of evidence relating to the achievement of the intended CNS outcomes

Domain	Merit determination	Strength of evidence
Reducing Indigenous harm or deaths in custody	Good - The CNS is part of a broader system of supports and services to prevent Indigenous harm and deaths in custody. Available national data relevant to this outcome indicates an overall reduction in deaths and harm, and CNS stakeholders, particularly Indigenous community members, consider the CNS to be making an important contribution to this.	Some evidence - There is little direct evidence of the role of the CNS in driving this outcome, and no counterfactual has been possible to demonstrate how the rate of Indigenous harm and deaths in custody would be different if the CNS was not in place.
Protection of legal rights of Aboriginal and Torres Strait Islander people in police custody	Good - The evidence suggests that CNSs provide basic legal advice to clients, supporting their ability to make an informed decision about how best to engage with police. At times, however, this may lead to delays in the client leaving police custody.	Some evidence - There is some evidence to support this finding, with consultations with clients, ATSILS and police indicating that the CNS tends to caution the client in what they say to police, however it is unclear the extent to which this protects the legal rights of the client, and much depends on the details of the individual case.
Improved relationships between police, Indigenous communities and ATSILS	Adequate - The evidence suggests that building and sustaining relationships between these three stakeholders is an ongoing challenge.	Some evidence - There is some evidence to support this finding, and the divergent views from ATSILS and police provides an indication that there are weaknesses in this domain, where if the relationship was strong and positive, both groups would have acknowledged this when asked.

⁹ Closing the Gap. (n.d). *Closing the Gap Targets and Outcomes*. Retrieved from Closing the Gap: [Closing the Gap targets and outcomes | Closing the Gap](#)

Domain	Merit determination	Strength of evidence
Improved understanding by police of the complex health and wellbeing needs of Indigenous people in custody	Poor - The evidence suggests that the CNS has limited scope to influence the understanding of police, without increased time and effort spent engaging with police alongside the local Indigenous communities in their jurisdictions.	Some evidence – There is some evidence to support this finding, with survey results from ATSILS and police indicating this to be an area of challenge.
Reducing rates of Indigenous adult incarceration and youth detention (Closing the Gap Targets 10 and 11)	Adequate - The CNS provides an opportunity to divert clients out of incarceration and detention, supporting the Closing the Gap targets, however it can only do so in limited circumstances.	Weak - There is weak evidence to link CNS activity data to changes in, or progress towards, improvements in Targets 10 and 11 of Closing the Gap. The data available shows mixed results and, with an improvement to CNS activity data, the contribution of the CNS to Targets 10 and 11 could be made evident.

Resource utilisation

The extent to which resources are well utilised by ATSILS delivering the CNS was examined using efficiency measures, combining activity and cost data.

These measures provide some insight into the overall efficiency of the CNS models across jurisdictions, however inconsistencies in data and reporting, along with a lack of benchmarking, prevents a strong conclusion regarding how well resources are utilised by ATSILS in delivering the CNS. More complete and reliable data on CNS funding and activities, including number of calls and call abandonment rates, would enable the calculation of costs per call and other measures of cost efficiency.

The evaluation conclusions regarding this domain of interest are summarised in the following table.

Table 5: Merit rating and strength of evidence relating to the efficiency of CNS resource utilisation

Domain	Merit determination	Strength of evidence
Efficiency of resources used by CNS providers	Good - The evidence suggest that CNS resources are being used relatively efficiently, however the absence of relevant benchmarks and data limitations limit the strength of this finding.	Some evidence - There is some evidence to support this finding. Data limitations relevant to this finding indicate interjurisdictional differences in reporting accuracy and methodology, access to cost data and the lack of appropriate benchmarks for the identified measures of efficiency.

Benefits of the CNS

The extent to which the CNS contributes to broader health system benefits and benefits to the justice system were also examined.

The evaluation conclusions regarding this domain of interest are summarised in the following table.

Table 6: Merit rating and strength of evidence relating to the benefits of the CNS

Domain	Merit determination	Strength of evidence
Benefits derived from the CNS	Adequate - The CNS provides an opportunity to provide clients with early identification and treatment of health issues, and diversion out of the justice system, however these are ancillary to the main activities of the CNS, and are not measured or prioritised through the program.	Weak evidence - There is weak evidence to draw a conclusion in this domain. Insufficient data limited the ability to identify and quantify benefits to the health system through the early intervention and treatment of health issues. Data limitations extended to the benefits that may accrue to the justice system, through diversion or a reduction in custody rates.

Recommendations

A number of recommendations were identified through the course of this evaluation to strengthen the implementation and delivery of the CNS and, over time, to better track the contribution of the service to outcomes for Indigenous Australians and benefits to the Australian community. The following recommendations are made to promote reach and value to clients from the CNS, and to invest in deepening relationships with police and Indigenous communities as a priority activity. Evidence suggests that where the following components are included in a CNS model, outcomes will be supported for Aboriginal and Torres Strait Islander people interacting with the justice system, along with strengthened ongoing monitoring, evaluation and improvement of the CNS.

In summary, emphasis should be placed on strengthening the following aspects of the CNS model:

1 The role of the CNS coordinator.

This role is pivotal to building and maintaining the relationships required with the broad range of CNS stakeholders, in order for the service to engage effectively with Indigenous clients in crisis. This role should prioritise relationships with police, social and legal service providers and Indigenous communities. Activities including face to face introductions, educational visits to share promotional materials and ongoing engagement around community news and sector challenges should be a focus.

2 The wellbeing check provided over the phone.

As a 24 hour telephone service, the CNS is a key triage and referral point in the justice pathway of Aboriginal and Torres Strait Islander people entering police custody. A key aspect of this triage is a wellbeing assessment, which should be consistent with validated tools and standardised across services.

3 The CNS notification system.

A national digital notification system is required. Developing an appropriate data reporting and management system would help to ensure that notifications to the CNS are made, and that situations of non-compliance are recorded and followed up. This would increase accountability for police, assist in identifying reasons for non-compliance, and enable these to be swiftly resolved.

4 The monitoring and evaluation system.

Improved data collection and sharing between key stakeholder groups, data linkage across core national longitudinal data sets and the effective use of key performance measures in managing CNS funding agreements are all required to support the measurement and achievement of outcomes for the CNS.

5 The strategic governance of the CNS.

A strategic advisory council model should be introduced in each jurisdiction to bring together key stakeholders across the CNS and justice and social services sectors, to share insights, learnings and set the direction for the service. This should be comprised of senior police, government agency senior officials, and Aboriginal and Torres Strait Islander peak bodies.

1 Evaluating the CNS

1.1 Evaluation objectives and scope

The Custody Notification Service (CNS) is a telephone-based service that is intended to deliver an independent, culturally appropriate health and wellbeing check, along with basic legal information, to any Aboriginal and/or Torres Strait Islander person entering police custody.

The National Indigenous Australians Agency (NIAA) has commissioned KPMG to evaluate the CNS throughout Australia to:

- Determine the extent to which the CNS contributes to achieving its intended outcomes
- Provide an evidence base for the effectiveness of the CNS
- Identify where there are gaps and opportunities for improvements.

This evaluation examines the appropriateness of the design of the CNS, how well it has been implemented and delivered, its effectiveness in contributing to its intended outcomes, its efficiency and the benefits that flow from the CNS to other sectors across justice, health and social services.

NIAA commissioned this evaluation to identify the components of a CNS model which represent best practice. The extent to which variations in CNS operating models, funding arrangements, legislative frameworks and staffing are evident across each state and territory has also been examined.

The terms of reference underpinning this evaluation are set out at **Appendix A**, and the full set of Key Evaluation Questions and sub-questions identified by NIAA for the project are set out in **Appendix B**.

1.2 Data collection and analytical framework

This is a mixed-methods, theory-based evaluation drawing heavily on Indigenous voices through qualitative data^{10, 11, 12, 13}. The detailed data collection approach to the evaluation is set out at **Appendix C**. This provides a description of the stakeholder groups consulted throughout the evaluation fieldwork, including:

- Aboriginal and Torres Strait Islander Legal Services (ATSILS) delivering the CNS
- Police, both senior and operational members
- Government officials from state and territory justice departments
- CNS clients and Indigenous community members, including Elders and family of people who have been in police custody
- Third party service providers who support Aboriginal and Torres Strait Islander people who have been in police custody.

In line with ethics approval provided by the Australian Institute of Aboriginal and Torres Strait Islander Studies (AIATSIS) and Menzies Human Research Ethics Committees, fieldwork has been conducted in 13 communities in Australia across metropolitan, regional and remote locations (Table 7). For further information on the organisations spoken to and number of clients consulted, refer to **Appendix C**. The communities visited were:

¹⁰ Bazeley, P. (2018). *Integrating Analyses in Mixed Methods Research*. SAGE Publications Ltd.

¹¹ Greene, J. C. (2007). *Mixed Methods in Social Inquiry*. Wiley & Sons.

¹² Teddlie, C. & Yu, F. (2007). Mixed Methods Sampling: A Typology with Examples. *Journal of Mixed Methods Research*, Vol. 1, No.1: 77-100.

¹³ Creswell, J. & Plano Clark, V. (2017). *Designing and Conducting Mixed Methods Research*. Sage.

Table 7: Modified Monash Model (MMM) categories of completed fieldwork locations

Modified Monash Model (MMM) category ¹⁴	Fieldwork locations
MMM 1 – 2 Metropolitan	Adelaide Perth
MMM 2 - 5 Regional/rural	Bairnsdale Circular Head Darwin Dubbo Moree Shepparton Townsville
MMM 6 – 7 Remote	Alice Springs Bourke Kununurra Nhulunbuy

The views of stakeholders have been canvassed through interviews, yarning circles and surveys, with a strong qualitative focus on the need for, and value of, the CNS for Aboriginal and Torres Strait Islander people coming into custody. Drawing on the work of key theorists in qualitative methods, these were thematically analysed to provide insights against the domains of inquiry for this evaluation^{15, 16, 17, 18, 19, 20}

This evaluation has also drawn on program data and performance reporting provided by ATSILS, arrest data from police and longitudinal justice related data sets from the Australian Bureau of Statistics (ABS) and the Australian Institute of Criminology (AIC).

In order to evaluate the CNS, a theory-driven approach has been utilised to bring together insights from across the key stakeholder groups. A theory of change framework has been used to enable a detailed description of how and why desired change is expected to happen as a result of the CNS program²¹. This enables the mechanisms through which the program is thought to work to be examined, tested and refined^{22, 23}. Using this framework, a 'best practice' model of a theory of change for the CNS is presented to describe the design of the program.

¹⁴ Department of Health and Aged Care. (December, 2021). *Monash Modified Model*. Retrieved from Australian Government Department of Health and Aged Care: <https://www.health.gov.au/topics/rural-health-workforce/classifications/mmm>

¹⁵ Castleberry, A. & Nolen, A. (2018). Thematic analysis of qualitative research data: Is it as easy as it sounds? *Currents in Pharmacy Teaching and Learning*, 10, 807–815.

¹⁶ Creswell, J. W. (2013). *Qualitative Inquiry & Research Design: Choosing Among Five Approaches*. Thousand Oaks, CA: SAGE Publications.

¹⁷ Mackenzie, N., and Knipe, S. (2006). Research dilemmas: Paradigms, methods and methodology. *Issues In Educational Research*.

¹⁸ Punch, K. F. (2009). The analysis of qualitative data. *In Introduction to Research Methods in Education* (pp. 169–209).

¹⁹ Verdine, S. and Scagnoli, N. I. (2013). Data display in qualitative research. *International Journal of Qualitative Methods*, 12, 359–381.

²⁰ Willis, J. W. (2007). *Foundations of Qualitative Research: Interpretive and Critical Approaches*. SAGE Publications.

²¹ Allen, Will (2016, April). *Using a theory of change (ToC) to better understand your program*. Retrieved from Learning for Sustainability: <http://learningforsustainability.net/post/theory-of-change/>.

²² Funnell, S.C. & Rogers, P.J. (2012). *Purposeful Program Theory: Effective Use of Logic Models and Theories of Change*. San Francisco. Wiley.

²³ Pawson, R., & Tilley, N. (1994). What works in evaluation research? *British Journal of Criminology*, 291–306.

1.3 Evaluative approach

As discussed above, the key domains of interest to the NIAA for this evaluation of the CNS were:

- Appropriateness of the design of the CNS
- How well it has been implemented and delivered
- Its effectiveness in contributing to its intended outcomes
- Its efficiency in utilising funding; and
- The benefits that flow from the CNS to other sectors across justice, health and social services.

In order to evaluate the CNS against each of these domains of interest, a strength of evidence rubric and a merit determination have been used as a consistent framework throughout this report.

Strength of evidence

The evaluation has applied the following guide in assessing the strength of evidence in determining the findings for each key evaluation question (KEQ):

Sufficient evidence: where the evidence is sufficient to draw a largely unqualified conclusion regarding the evaluation question because either there is a single source of quality data or multiple sources of data with no major quality issues and which consistently point to the conclusion reached

Some evidence: where the evidence suggests the observation is true but there are data limitations, such that the finding is qualified and further and/or different data (which may have been unavailable to this evaluation) would need to be sourced to be more confident in the conclusion reached

Weak evidence: where the evidence is indicative of a finding but there are major shortcomings in the data such that limited confidence can be placed on the conclusion

No evidence: where no data exists upon which to make any finding.

Merit Determination

Merit ratings have been developed to provide a standard assessment framework against which to evaluate the performance of the CNS in relation to each KEQ. Through synthesising results from diverse data sources, an overall rating has been provided to assess the program against each of the KEQs using the ratings set out in *Table 8: Merit ratings*, which provides a description of each standard across the ratings.

Table 8: Merit ratings

Merit Rating	Standard observed
Excellent	Performance was clearly very strong in relation to the overarching question of the evaluation domain. No significant gaps or weaknesses were identified.
Very Good	Performance was generally strong in relation to the overarching question of the evaluation domain. Some minor gaps or weaknesses were identified.
Good	Performance was generally strong in some areas relating to the overarching question of the evaluation domain. Some gaps or weaknesses were evident.
Adequate	Performance demonstrated some weaknesses in relation to the overarching question of the evaluation domain, however minimum expectations or requirements were met.
Poor	Performance was weak in relation to the overarching question of the evaluation domain. Minimum expectations or requirements were not met.

2 The design of the CNS

2.1 CNS program overview

The CNS is a 24 hour telephone service that was introduced over time across Australia in response to high rates of Indigenous harm and deaths in custody, and the recommendations of the 1991 Royal Commission into Aboriginal Deaths in Custody (RCIADIC)^{24, 25, 26, 27}.

The drivers of Aboriginal deaths in custody uncovered through RCIADIC include:

- The systemic failure by those owing duty of care to people in custody to provide this care to Indigenous people, particularly in relation to the receiving police officers duty to obtain medical advice
- The barriers of distrust between Aboriginal people and police and the limited level of communications between the two groups at a day-to-day level
- The lack of protocols or processes between the many institutions that play a direct or indirect role in determining the impact of the criminal justice system on Aboriginal people.

The specific drivers noted above formed the basis for the recommendation pertaining to the CNS²⁸. The concept of the CNS was laid out in Recommendation 224 of the RCIADIC. This recommendation states:

“In jurisdictions where legislation, standing orders or instructions do not already so provide, appropriate steps be taken to make it mandatory for Aboriginal Legal Services to be notified upon the arrest or detention of any Aboriginal person other than such arrests or detentions for which it is agreed between the Aboriginal Legal Services and the Police Services that notification is not required.”

Providing Aboriginal and Torres Strait Islander people with the ability to speak to a highly trained legal professional was thought to alleviate the distress of the individual held in custody and therefore reduce the threat of self-harm or suicide²⁹.

After the CNS was first introduced in NSW in 2000, the Australian Law Reform Commission (ALRC) proposed the following³⁰:

“State and territory governments should introduce a statutory custody notification service that places a duty on police to contact the Aboriginal Legal Service, or equivalent service, immediately on detaining an Aboriginal and Torres Strait Islander person.”

ALRC’s proposal stated that since NSW had set up their CNS in response to RCIADIC, there had been no deaths in custody.

²⁴ Muirhead, J. (1991). *Royal Commission into Aboriginal Deaths in Custody*. Canberra: Australian Government Publishing Service.

²⁵ Cunneen, C. (2007). Reflections in Criminal Justice Policy since the Royal Commission into Aboriginal Deaths in Custody. In N. Gillespie, *Reflections: 40 Years on from the 1967 Referendum, Aboriginal Legal Rights Movement* (pp. 135 - 146). Adelaide: Aboriginal Legal Rights Movement Inc. Retrieved from <https://catalogue.nla.gov.au/Record/4199276>

²⁶ Wooten, H. (1991). *Royal Commission into Aboriginal Deaths in Custody*. Canberra: Australian Government Publishing Service.

²⁷ Department of Prime Minister and Cabinet. (2018). *Review of the implementation of the recommendations of the Royal Commission into Aboriginal Deaths in Custody*. Canberra: Australian Government.

²⁸ Muirhead, J. (1991). *Royal Commission into Aboriginal Deaths in Custody*. Canberra: Australian Government Publishing Service.

²⁹ National Aboriginal and Torres Strait Islander Legal Service. (2020). *Custody Notification Service: an analysis of the operation of this service by each Aboriginal and Torres Strait Islander Legal Service*. Retrieved from National Aboriginal and Torres Strait Islander Legal Service: <https://www.natsils.org.au/wp-content/uploads/2020/12/CNS-Table-for-website-policy-and-advocacyab37-1.pdf>

³⁰ Australian Law Reform Commission. (2017). *Incarceration Rates of Aboriginal and Torres Strait Islander Peoples (DP 84): Custody Notification Service*. Retrieved from Australian Law Reform Commission: [Custody Notification Service | ALRC](#)

Intended outcomes

In response to this recommendation, the CNS was established to achieve the following outcomes:

- Reduced rates of Indigenous harm and deaths in police custody
- Protection of legal rights of Aboriginal and Torres Strait Islander people whilst held in police custody
- Improved relationships between police, Indigenous communities and ATSILS
- Improved police capacity to understand and respond to the complex health and wellbeing needs of Indigenous people in custody
- Reduced rates of Indigenous adult incarceration and youth detention (Closing the Gap Targets 10 and 11^{24, 31}).

In driving these outcomes, providers of the CNS are funded to achieve the following funded activities as outlined in Table 9 below³²:

Table 9: Funded activities of the CNS

Activity	Commonwealth funded CNSs
Develop and implement appropriate age, gender and culturally sensitive protocols in relation to client care, including trauma-informed protocols	All
Ensure that service delivery is accessible, responsive and safe for Aboriginal and Torres Strait Islander persons, and cultural values, strengths and differences are recognised and incorporated into the governance, management and delivery of the CNS	All
Ensure good practice principles relevant to the service underpin service delivery to achieve the objectives of the CNS, and that the service operates within relevant evidence-based guidelines and continuous improvement principles	All
Ensure that appropriately trained and culturally competent staff are employed to deliver the CNS	All
Prepare a CNS manual to assist lawyers and support staff in the delivery of the CNS	SA
Support staff to fulfil the responsibility and requirements of the CNS	All
Ensure that collaborative partnerships are in place to support the CNS	All
Ensure client privacy and confidentiality at all times, in accordance with the <i>Privacy Act 1988</i> and subsequent amendment, and the organisation's own policies	All
As far as possible, answer all telephone calls rather than diverting them to a message bank service	All
Respond to notifications by police within one hour of notification	All except for Vic
Provide a holistic wellbeing check, including conducting an 'R U OK' or similar check to assess the client's immediate wellbeing needs with the physical and emotional welfare of the person of paramount importance	All
Provide fundamental legal advice	NSW/ACT and Vic
Provide immediate links with family and appropriate referrals to other related or professional support services as required	NT
Follow up on the client as required	All
Keep appropriate records regarding the operation and use of the service, to ensure appropriate referrals are required and to inform agreed performance indicators, including but not limited to recording gender, age, location, whether or not the client was charged, if charged, what was the type of charge, wellbeing issues identified, and wellbeing issues addressed.	All

³¹ Closing the Gap. (n.d). *Closing the Gap Targets and Outcomes*. Retrieved from Closing the Gap: [Closing the Gap targets and outcomes | Closing the Gap](#)

³² National Indigenous Australians Agency Project Schedule – General Grants Safety and Wellbeing Programme Custody Notification Service Project Schedules with legislated ATSILS (2019-2022).

CNS operational context

There are seven CNS programs in operation in Australia. The Commonwealth has five funding agreements in place with ATSILS to provide the CNS in the Northern Territory (NT), Western Australia (WA), Victoria (VIC), South Australia (SA), and in New South Wales (NSW) and the Australian Capital Territory (ACT) combined. Queensland and Tasmania have CNS programs delivered through state government funding, and the Western Australian Government co-funds the CNS in that state.

Each state and territory has its own regulatory or legislative framework underpinning the CNS, setting out the requirement of police to notify the CNS upon taking an Aboriginal and/or Torres Strait Islander person into custody.

2.2 The design of the CNS and how it can drive outcomes

The following theory of change for the CNS draws on the insights gathered from across stakeholder groups, and describes key enablers of the outcomes CNS is intended to achieve, in the implementation of the program by those who provide it, as well as in the delivery of the service to its clients when they enter police custody. The theory of change diagram at Figure 1: A best practice model of the CNS, and accompanying narrative, are set out below as a comprehensive summary of a best practice CNS model which could be applied in any state or territory in Australia. The following narrative describes Figure 1, with bolded text referring directly to a box or boxes on the figure.

A best practice model of the CNS – a theory of change narrative

In order for the CNS to support its key objectives, enabling settings must be in place for police services as well as for the ATSILS providing the CNS. The objectives of the CNS are broad ranging and have multiple drivers, requiring the active contribution of a range of stakeholders.

Police service enabling settings

Police focus and activity is driven by the **legislative regime** in place setting out the requirements of officers when an Aboriginal and/or Torres Strait Islander person is taken into custody. The legislation, operational guidelines and memoranda of understanding (MOU) in place guides police activities. At the same time, the outcomes for individual Indigenous Australians in police custody are directly impacted by the attitudes, behaviour and decisions of individual police members. These are driven by **recruitment and screening, mentoring and training** and ongoing investment from senior and mid-level leaders in police **organisational culture**. Through ongoing **performance monitoring and improvement**, police members can be supported to continuously reflect on and strengthen their contribution to strong justice outcomes for individuals in custody.

The timely **sharing of data** about **performance**, lessons learnt and aggregate level trends in delivery against legislative requirements supports ongoing **improvement** and positive impacts on community justice outcomes.

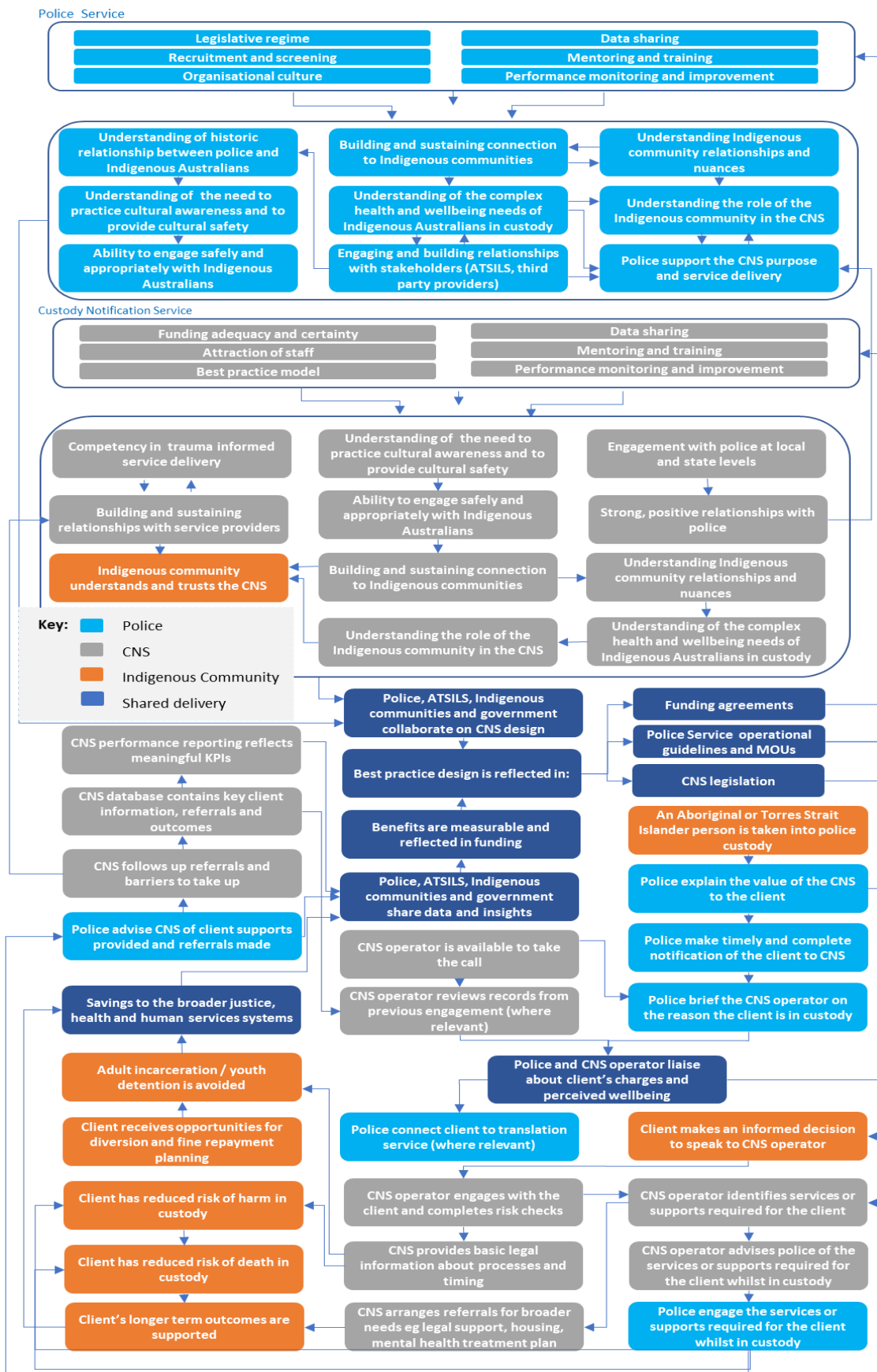
Police member capabilities and engagement

With strong enabling factors in place, a range of positive capabilities and attitudes support police understanding and engagement with Indigenous Australians, supporting positive justice outcomes for Aboriginal and Torres Strait Islander people. In practice, the enabling settings in place at the police service level support police members to develop an **understanding of the historic relationships between police and Indigenous Australians**, in turn supporting understanding of the need for each police member to **practice cultural awareness and provide cultural safety**.

Through a deepening understanding of the culture of the Indigenous community in the location where the police member serves, their **ability to engage safely and appropriately with Indigenous Australians** in the course of their daily roles is supported. Drawing on knowledge of cultural traditions, relationships, lore and obligations, and many other nuances relevant to the people, history and country of the place in which the member serves, enables them to **build and sustain connection to Indigenous communities**.

This knowledge and connection supports the member to develop a deep **understanding of the complex health and wellbeing needs of Indigenous Australians in custody**, enabling them to

Figure 1: A best practice model of the CNS



Source: KPMG 2023

better support the intended outcomes of the CNS, including reduced risk of harm and death in custody.

At the same time, each of these capabilities supports, and is supported by, police members **engaging and building effective relationships with stakeholders, including ATSILS and service providers** in their community who support Indigenous Australians. These capabilities also support a deep **understanding of Indigenous community relationships and nuances**, and an understanding for police members of the **role of the Indigenous community in the CNS**, supporting positive outcomes for Aboriginal or Torres Strait Islander people when they are first taken into police custody.

Combined, these ongoing activities, relationships, capabilities and attitudes from individual police members enable police to **understand and support the purpose of the CNS and to actively contribute to its delivery** to people in their custody.

Custody Notification Service enabling settings

The successful delivery of the CNS by ATSILS requires **funding adequacy and certainty** in order to **attract, mentor and train staff**, and meet the demand of the volume of notifications made by police as well as the requirements to engage and collaborate on continuous improvement of the CNS **best practice model**. Through a **shared electronic data exchange with police**, and ongoing **performance monitoring and improvement**, key activities to support the ongoing delivery of the CNS can be undertaken.

CNS capabilities and engagement

Where these enabling settings are in place for the CNS provider, a range of capabilities and activities are then supported. Through the best practice model and mentoring and training of staff, CNS operators develop important competencies in **trauma informed service delivery**, along with an **understanding of the need to practice cultural awareness and provide cultural safety** to their Indigenous Australian clients. This, in turn, fosters their capability in **engaging safely and appropriately with Indigenous Australians** and supports efforts to **build and sustain connection to Indigenous communities**.

This is an essential component of delivering the CNS, supporting an **understanding at the local and regional level of Indigenous community relationships and nuances**, an **understanding of the complex health and wellbeing needs of Indigenous Australians in custody**, and supporting a shared **understanding of the role of the Indigenous community in the CNS**. Through the ongoing efforts of the CNS in these areas, local **Indigenous communities can understand and trust the CNS**.

In parallel with investment in relationships with Indigenous communities, CNS providers must also build strong **engagement with police at local and state levels**. In practice, this means conducting regular visits to watch houses and stations where there are higher numbers of Aboriginal and Torres Strait Islander people taken into police custody, and building trust and a shared understanding of the role and objectives of the CNS. This investment in a **strong, positive relationship with police** is an essential enabler of the CNS to deliver effective service to people once they are in police custody.

The objectives of the CNS are further supported by ongoing **engagement with service providers in local communities**, supporting better, individualised service delivery for Aboriginal and Torres Strait Islander people in police custody.

Shared delivery model

Whilst the CNS is funded directly for delivery through ATSILS, in order for it to contribute to its objectives, a shared delivery model is required. As described in the capabilities and engagement of police and CNS providers, ongoing work must be undertaken to engage, understand and build respect for each stakeholder group with an important role in the justice and wellbeing outcomes of Aboriginal and Torres Strait Islander people in police custody. This includes police members serving in the community, CNS operators and Indigenous community Elders and Traditional Owners. It also includes the local providers serving the Indigenous community.

Alongside these operational and delivery focused relationships, collaboration is required at the strategic and regional levels. In these instances, senior police, CNS coordinators and policy areas in state and territory government departments have an ongoing role in monitoring the performance and **measuring the benefits** and outcomes associated with the CNS.

In order to drive strong, positive outcomes and enable the CNS to meet its objectives, these **stakeholders must collaborate** to share lessons learned and **data and insights** to continuously improve the design and delivery of the CNS model, **reflecting best practice in funding agreements, operational guidelines, MOUs and legislation.**

Notification of the CNS

When an **Aboriginal and/or Torres Strait Islander person is taken into police custody** in Australia, it is the role of the police to **explain the value of the CNS to the client**, and to then make a **timely and complete notification to the CNS** that the client has come into custody. Whilst there are variations in the timeframes by which the police must notify the CNS, based on the legislation, guidelines or MOUs in place, this must be done soon after the person's arrival into custody. Both written and verbal notification should be made, including details of the reason for the person being brought into custody and relevant information that can help the CNS identify the person where previous contact has been made.

The **CNS operator must be available to take the telephone call**, and the CNS telephone line must be operational 24 hours a day, seven days a week. Where the line is busy due to the operator supporting other clients, police must leave a message and then be available for the CNS to call back as soon as practicable.

The police then **brief the CNS operator on the reason the client is in custody**, and the **CNS operator reviews the CNS database records of previous engagement with that client. The police and CNS operator then liaise about the client's charges and the client's perceived wellbeing.** As soon as possible, **police also connect the client to translation services where required.**

Based on the extent to which the person knows and trusts the CNS, and how the police describe the CNS to them, the person then **makes an informed decision whether or not to speak to the CNS operator.** The work done on a day-to-day basis by CNS coordinators with police and Indigenous communities has a direct impact in these instances, where visibility and trust in the community about the service provided by the CNS, and how police describe the CNS to the client, influence the extent to which the client is willing to engage with the service.

Other factors also come into effect in these instances, determining the extent to which the CNS is taken up as a service. These include the client's state of mind at the time of the telephone call, including possible intoxication, which requires postponement of the offer of the call to the client until a time when they can properly judge whether they wish to use the service. In other instances, clients may decline the service if they feel it is likely to lead to delays in their processing and release from custody on that occasion. In both of these circumstances, police must work with the person to ensure they are able to make an informed decision about whether or not to speak to the CNS.

Supports and advice provided by the CNS

Irrespective of whether the client elects to speak to the CNS, the CNS and police have a shared duty of care to minimise the risk of harm or death in custody for that person. If the client wishes to engage with the CNS, the **CNS operator will speak to the client and complete socio-emotional and physical risk checks and a legal assessment**, and will, on the basis of this, identify whether the person needs services or supports whilst in custody.

Where the person declines the telephone call, the CNS operator may use previous records and knowledge of the community and service sector to advise police of any needs the person may have, such as an ongoing medical condition noted from a previous episode in custody which may require medication. The CNS operator will advise police of these needs and it then becomes a police decision what measures should be taken to meet them, and to **engage services or supports for the client whilst in custody.**

In practice, supports can vary from arranging for an Elder, family member or trusted service provider to be present with the person during police questioning; providing the person with access to medication, medical assessment and care; contacting their family to arrange alternative care for the person's children; or to arrange for their employer to be advised of their absence.

At the same time, whilst police are responsible for the immediate physical and psychological needs of the person in custody, the CNS operator may also **arrange referrals for the person's broader needs**, such as to a solicitor for legal representation, or to a service provider for case management of mental health, housing or other longer-term needs.

Such socio-emotional and physical supports can have a direct effect in **reducing the risk of harm and death for the person in custody** as they reduce the person's health risks and also improve their socio-emotional functioning and state of mind.

Early identification and intervention to meet the person's needs whilst in custody, as well as their broader needs, can also have **flow-on benefits to the broader service system**, which can be measured over time through effective **data and insight sharing arrangements across police, ATSILS, Indigenous communities and government**.

Whilst still in custody, through the telephone call with the **CNS, the operator also provides the person with basic legal information about processes and timing**. This can assist the person to make informed decisions about participating in police interviews, or may support the person to apply for bail. It is also a key point at which the person may be **diverted out of the justice system** into community work programs or, in many cases, into **payment plans for unpaid fines** which, if left unpaid, could result in the person facing incarceration for what may have been relatively minor transgressions.

The provision of legal information through the CNS, when done by an appropriately expert operator, can lead to an immediate improvement in the person's state of mind, **reducing the risk of harm to them whilst in custody**. Through the potential to improve justice and bail outcomes, and to support people into diversionary programs, **adult incarceration and youth detention can be avoided**, thereby supporting the Closing the Gap targets to reduce these numbers for Indigenous Australians.

Post-notification follow-up

Once the call is finalised, the CNS retains an interest in the wellbeing of the person in custody, and **police should update and advise the CNS as to the supports provided to the person and any referrals made by police**. This enables the **CNS to keep accurate records** for reference on future occasions if the person is taken into custody again.

The **CNS coordinator then follows up any referrals made** by police or the CNS operator, to understand barriers to take up or other factors affecting the person's longer-term outcomes. At this point, the CNS operator liaises with service providers and Indigenous community contacts to follow up the referral pathway for the client, and consider opportunities to improve service responses in similar cases.

CNS performance reporting must reflect meaningful metrics, including client information, referrals and outcomes, to feed into **data and insights sharing** and **benefits measurement** conducted by police, ATSILS, Indigenous communities and government, which also **feed back into the ongoing continuous improvement of the best practice design of the CNS model**.

Reflections from the CNS theory of change

The theory of change for a better practice model of the CNS (Figure 1: A best practice model of the CNS), described above, distils the input of the full range of stakeholders consulted in the course of this project. The model provides a holistic view of how the work of the CNS, combined with efforts of police and input from Indigenous communities, can drive the intended outcomes of the program.

Setting each element of the program out as a results chain of causal mechanisms in this way also helps to demonstrate the importance of the work of police at the senior service level, and of the CNS at the coordinator level, to drive the essential conditions for the effective delivery of the service to individuals in custody. Without constant efforts to build trust, understanding and collaboration using data and insights, the CNS is constrained in how much it can achieve.

With these factors in mind, this evaluation considers the evidence that the CNS is:

- Appropriately designed to meet client needs
- Implemented and delivered effectively
- Contributing to outcomes
- Efficiently utilising resources
- Leading to benefits to the broader community.

3 Appropriateness of the CNS

3.1 Meeting the needs of CNS clients

KEQ 1: How appropriate is the design of the CNS to meet the needs of stakeholders?

Sub-questions:

- 1 1a. What support do Aboriginal and Torres Strait Islander people need upon entering custody, and how does this compare to what they receive?
- 2 1b. To what extent is the CNS strengths-based, culturally respectful and collaborative?

In order to understand the needs of the clients of the CNS, this evaluation drew on voices of Aboriginal and Torres Strait Islander Elders, community members and individuals with direct experience of being taken into police custody.

Clients need to understand what is happening to them and they need immediate assistance with their socio-emotional, physical and legal needs

Consistent themes emerged from client survey responses, yarning circles, and individual discussions across the 13 fieldwork sites of this project. The Aboriginal and Torres Strait Islander people consulted through these activities provided the following key insights into the needs of Indigenous Australians coming into police custody:

- They need to know what the CNS is there to do, in order for them to agree to take the telephone call from the CNS when it is offered to them by police.
- They need to trust that the CNS is on their side, and that it will help them with their medical or psychological needs if they tell the CNS operator how they are really feeling.
- They need to understand the legal process they are facing, how long things are likely to take and what to expect.
- Their physical needs, such as for food, water, blankets, are front of mind. The supports needed can vary depending on the person and their circumstance, and can include medication, sanitary products, arrangements for breastfeeding or pregnancy related support, and the person may not feel comfortable speaking to someone of the opposite gender.
- Their priority is to get out of custody as quickly as possible, with minimal delays.
- They need to know their families are told of their having been brought into custody.
- They may need an interpreter, where police do not speak the person's language.
- They may need additional support, in the form of a trusted person, to sit with them during interviews, particularly where they have a cognitive impairment or are under the age of 18.

These themes were reiterated by ATSILS, third party service providers and police.

The CNS provides access to the supports clients need, but much depends on the individual circumstances of each case

Police and CNS staff were asked in the survey to what extent they felt that the CNS, as a telephone service staffed by ATSILS in metropolitan and regional centres in each state and territory, is able to

offer support to the person in custody in line with their needs, but this is constrained by a number of factors.

Key factors affecting the likelihood of the person to accept the CNS telephone call include:

- The attitude of the police towards the CNS when offering the CNS to the person in custody
- The psychological state of the person at the time of being offered the telephone call, for example they may be distressed or traumatised, reducing their ability to engage
- The beliefs of the person about the CNS, particularly if they think the telephone call is likely to delay their release
- The level of confidentiality available when taking the telephone call, where they are less likely to engage if police are present
- The extent to which their community is aware of and trusts the CNS, as this is likely to affect how much they themselves see benefit in engaging with the service.

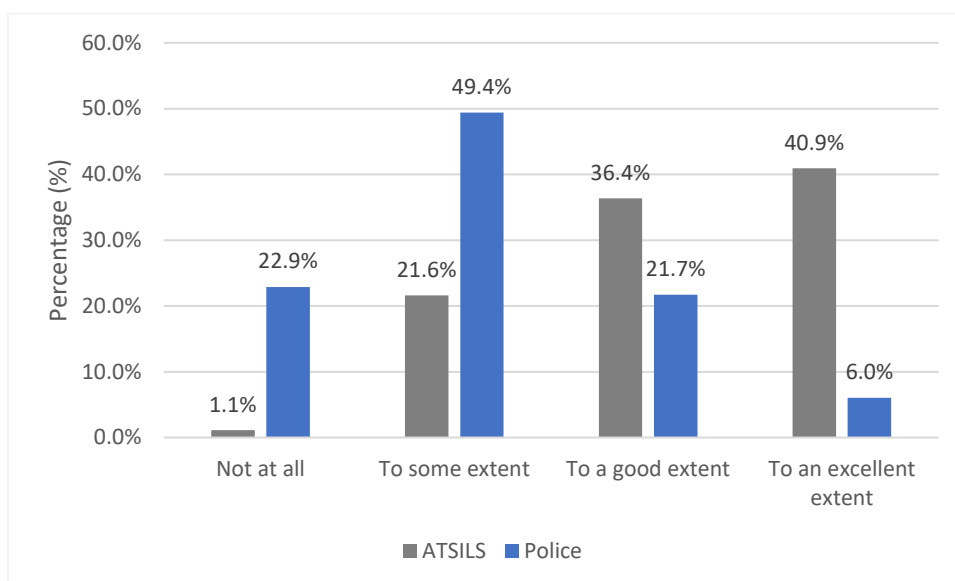
Key factors affecting how well the CNS is able to meet the needs of clients, once the telephone call is taken, include:

- The extent to which the CNS operator is able to engage the person with effective questions regarding their physical, psychological and legal needs
- The extent to which the CNS operator has knowledge of relationships and nuances in the person's local Indigenous community
- The extent to which the CNS operator has knowledge of the local service system, where trusted providers could be brought in to support the person, or warm referrals could be made to services to meet the person's presenting needs
- The extent to which the CNS has a strong positive relationship with police in the watch house or station where the person is held affects how likely the CNS is to be successful in obtaining the support of the police to arrange the services required to meet the person's needs.

In exploring the needs of community for the CNS, clients, Elders and Indigenous community members were generally of the view that a telephone call from the CNS was a very important service which could make a difference for someone in custody, particularly where the person was confused, isolated or distressed, or where it was their first time in custody. However, as described in the best practice model for the CNS theory of change diagram and narrative, these needs require active engagement from stakeholders across police, ATSILS, Indigenous communities, service providers and governments. They require actions to be undertaken at both the regional and local levels, as well as in a national context where ATSILS can learn from each other and share insights and lessons learned.

When asked in the survey to what extent the CNS provides supports that meet the presenting needs of the Indigenous person in custody, police and ATSILS had differing perspectives (Figure 2). Whilst ATSILS overwhelmingly indicated they thought that the service did so to a good or excellent extent (77.3 per cent of 88 responses), police reflected that they thought this happened to some extent or not at all (72.3 per cent of 83 responses).

Figure 2 - Survey responses - To what extent does the CNS meet the presenting needs of the Indigenous person in custody? ³³



Source: KPMG 2023

It is important to note that there is a high risk of bias in this data, with ATSILS providing a self-review of their own performance. At the same time, differences between police and ATSILS responses may be seen to reflect their divergent perspectives and roles in the legal system, in which the custody notification service operates. In cases where police have detained the person in relation to a criminal matter, they are focused on gathering evidence to prosecute the case in order to achieve an appropriate justice outcome. The ATSILS are responsible for providing support to the person through the CNS and, in some cases, go on to provide defence counsel to the person, which may be seen to be in direct opposition to the role of police.

In this context, a strong positive relationship between ATSILS and police, as described in the CNS theory of change best practice model, can be challenging to achieve. Ongoing efforts to build and maintain relationships between CNS coordinators and police in watch houses and local stations is required, and regular changes to police postings in some areas means this is a time consuming activity for ATSILS to undertake. Nonetheless, where evidence of this was found in particular locations, the CNS was considered to be successful by the majority of stakeholders.

Impact of effective relationship building between key CNS stakeholders

Relationship building between CNS providers and other key stakeholders is pivotal to strong service delivery of the CNS. A strong example of this is seen in the NT, when CNS Co-ordinators proactively visit police officers in stations and watch houses across the Territory to introduce themselves to establish a working relationship, and then maintain this over time with ongoing engagement. The value of this relationship building activity was evident in consultations with NT police, where an ongoing, active dialogue with NAAJA was evident.

Table 10: Overall conclusions regarding the extent to which the design of the CNS meets client needs

Evaluation finding	Evaluation reasoning
<p>Merit determination:</p> <p>Good - Performance was generally strong in some areas relating to the overarching question of the evaluation domain. Some gaps or weaknesses were evident.</p>	<p>Performance was strong in some areas relating to meeting the needs of clients. Some gaps or weaknesses were evident. Overall, evidence suggests that the CNS is well designed to meet client needs, however this depends on the particular circumstances and relationships in place in each case.</p>

³³ This chart combines responses to similar questions in the police and ATSILS surveys, merging results across scales. For the results to each question see **Appendix G**.

Evaluation finding	Evaluation reasoning
<p>Strength of evidence: Some evidence - where the evidence suggests the observation is true but there are data limitations, such that the finding is qualified and further and/or different data (which may have been unavailable to this evaluation) would need to be sourced to be more confident in the conclusion reached.</p>	<p>There is some evidence to support this finding, however data and reporting regarding the extent to which each CNS provider is working to put in place the factors required to meet client needs is not available, leaving this evaluation to draw conclusions based on a limited sample of interviews, surveys and yarning circles.</p>

3.2 Strength-based design

In line with the Commonwealth’s Indigenous Advancement Strategy Evaluation Framework³⁴, this evaluation has examined the extent to which the CNS program ‘builds on strengths to make a positive contribution to the lives of current and future generations of Indigenous Australians’ (p 6).

To do this, the evaluation has reflected on the evidence that the CNS draws on the strengths of the individual Aboriginal and Torres Strait Islander people it supports, such as the strengths they have in their relationships to culture, land and community.

Drawing on the strengths of clients is challenging over the telephone

The key source of data to explore this aspect of the evaluation was the survey of police and ATSILS. Yarning circles and discussions with Indigenous stakeholders were also used, however most clients were unable to recall specific aspects of the telephone call from the CNS. This meant they were unable to comment on the extent to which the CNS draws on clients’ individual strengths and relationships in supporting them.

The extent to which the ATSILS delivering the CNS consider the program to be designed to draw on the strengths of individual clients was also discussed in consultations with ATSILS coordinators and staff. These stakeholders were generally confident that the service is intended to be delivered from a strengths-based approach, however the telephone based delivery of the service is seen as a key barrier to how deeply the CNS operator is able to understand and draw on the individual strengths of the client.

Drawing on local delivery partners

Whilst drawing directly on the strengths and relationships of clients can be challenging for the CNS over the telephone, some ATSILS successfully draw on local services to support the individual from a strengths-based perspective. A strong example of this is found in the partnership between ATSILS Queensland and Murri Watch, an Aboriginal Corporation that provides a cell visitors service across key areas in Queensland. When the police notify the ATSILS of an Aboriginal or Torres Strait Islander person coming into custody, Murri Watch is also engaged to provide in-person support during the time the client is in custody. This might involve visiting the person to prevent them feeling isolated, or attending police interviews with them to help them be calm whilst engaging with the legal process. An in-person service such as this can draw on the strengths of the individual and support their wellbeing and justice outcomes. By ensuring that such a service is engaged, the CNS is helping to support strengths-based service delivery for their shared client.

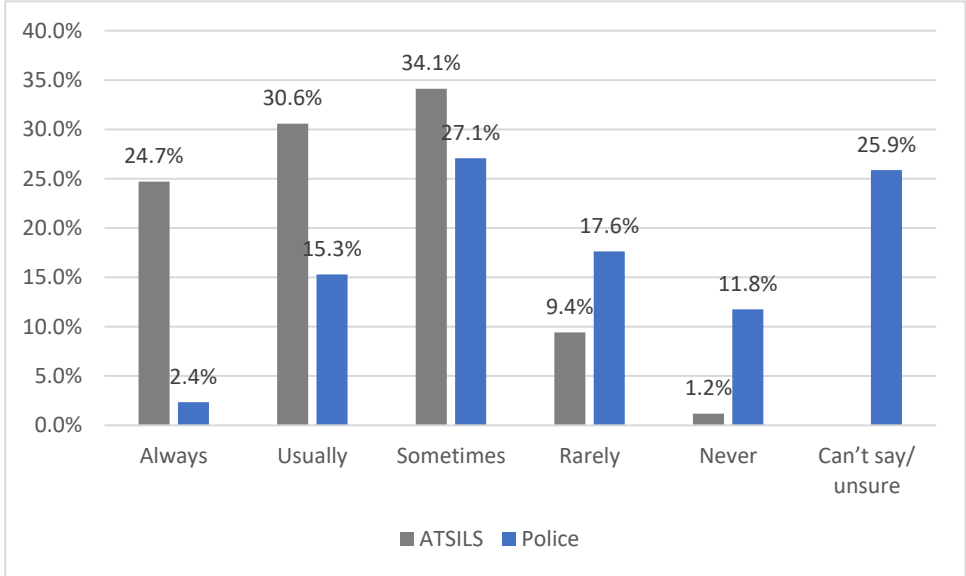
In relation to the strengths-based design of the CNS, the results of the police and ATSILS survey once again present divergent views and insight into the differing roles and relationships of the two groups (Figure 3). Where the majority of ATSILS staff responding to the survey indicated that the service they provide always or usually focuses on individual client strengths (combining to 55.3 per cent of 88 responses), police responses were much lower (17.7 per cent of 86 responses indicated ‘always’ or ‘usually’) and a high proportion indicated that they ‘can’t say’ (25.9 per cent of 86 responses). These

³⁴ National Indigenous Australians Agency. (2021). *Indigenous Advancement Strategy: Evaluation Framework*. Canberra: Australian Government Publishing.

results indicate that police perception of the extent to which the CNS is strengths-based is much lower than that of ATSILS delivering the service.

The high risk of bias in this data, with ATSILS providing a self-review of their own performance, must again be considered in interpreting these results. At the same time, these results provide insight into the relationship between police and ATSILS and show that many police who may be expected to have insight into the nature of the support offered by ATSILS cannot confidently comment on this aspect of the program.

Figure 3 - Survey responses - To what extent does the CNS deliver strengths-based services?



Source: KPMG 2023

Table 11: Overall Conclusions regarding the extent to which the CNS is strengths-based

Evaluation finding	Evaluation reasoning
<p>Merit determination: Good - Performance was generally strong in some areas relating to the overarching question of the evaluation domain. Some gaps or weaknesses were evident.</p>	<p>Overall, the CNS program is intended to provide a strengths-based service to Aboriginal and Torres Strait Islander people in police custody. It is constrained in this due to the telephone-based nature of the service, however where the CNS engages with other services, this can help to ensure the client receives a strengths-based approach to meeting their needs, particularly through support delivered in-person.</p>
<p>Strength of evidence: Weak evidence – where the evidence is indicative of a finding but there are major shortcomings in the data such that limited confidence can be placed on the conclusion.</p>	<p>There is weak evidence to support this finding, with few clients recalling the details of the CNS telephone call, self-report of success from ATSILS and many police responding that they were unsure whether or not the service is strengths-based.</p>

3.3 Culturally respectful design

The IAPEF³⁵ also requires an evaluation of the extent to which Indigenous programs, such as the CNS, demonstrate cultural respect towards Indigenous Australians (p 6). In evaluating the CNS, the concept of cultural respect was explored in broad terms, for example in seeking evidence of the extent to which the program recognises and draws on the cultural authority of Elders, and the extent to which CNS operators are aware of the lore and traditions which apply in Indigenous justice systems relevant

³⁵ National Indigenous Australians Agency. (2021). *Indigenous Advancement Strategy: Evaluation Framework*. Canberra: Australian Government Publishing.

to the client, and are able to apply this knowledge to support the client's wellbeing and long-term outcomes.

Broadly respectful of culture with limitations in delivering the CNS

These concepts of cultural respect were explored with Elders, clients and community members, along with service providers in the broader local context in each fieldwork location and with government policy officers across states and territories. In general, these stakeholders indicated that they had positive attitudes towards, and respect for, the CNS and the ATSILS delivering it. This view was driven by the perception that the ATSILS are Indigenous led and therefore able to draw on knowledge and insight into cultural nuances and relationships, and use this knowledge to respectfully engage with clients and with Indigenous community stakeholders in each location where a client is in custody.

The extent to which this translates to culturally respectful engagement with Elders and community members in supporting the needs of clients is unclear. Again, a telephone-based service such as the CNS is limited in the extent to which it can apply local lore and knowledge of kinship relationships in supporting a client without extensive engagement and ongoing relationships with the many diverse Indigenous communities in the jurisdiction within which the service operates.

Impact of community engagement in understanding community nuances

Most state and territory CNS providers run their service through a remote "hub" model where the staff answering the CNS call work remotely to support clients across their jurisdiction. This model presents issues when ensuring that the nuances of the client's community are captured and considered to deliver appropriate support.

This challenge has been effectively mitigated by some state and territory providers. An example of this is Tasmania, where the ATSILS delivering the state funded CNS visit communities across their jurisdiction, including more rural locations such as Circular Head. This activity ensures that the CNS provider understands the nuances of the communities from which their clients are coming in order to provide them with appropriate support. This also helps members of the community to become more familiar with their state or territory CNS provider which helps to build trust with the service. Fieldwork in North West Tasmania showed a strong relationship between the CNS provider and local Aboriginal corporations and police, with this attributed to ongoing, in person efforts to support these relationships from all parties.

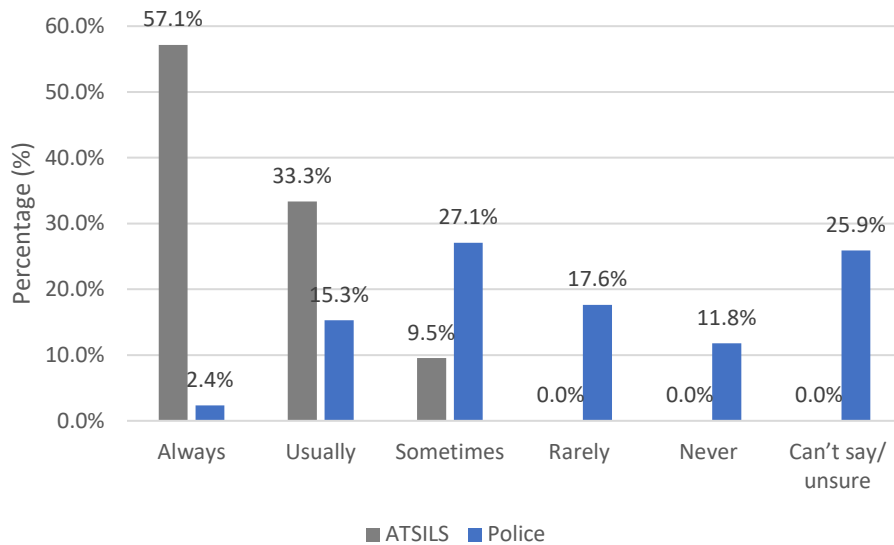
Limitations in funding and staffing were cited as barriers to the capacity of individual CNSs to meaningfully engage with local Indigenous Elders and communities across the state or territory. However, where evidence of this engagement was shown, the reputation of the service was positive amongst Indigenous stakeholders. As illustrated in the theory of change for a better practice model of the CNS (Figure 1: A best practice model of the CNS), the extent to which the Indigenous community understands and trusts the CNS is likely to have a direct effect on the likelihood of the Aboriginal or Torres Strait Islander person in custody deciding to take the telephone call with the CNS, and therefore the extent to which the CNS can support that individual's socio-emotional and legal needs.

A comparison of survey responses from ATSILS and police about the extent to which respondents believed the CNS demonstrated cultural respect (Figure 4) again shows diverging views from these groups. Results demonstrated strong support from within ATSILS that they feel the CNS 'always' delivers culturally respectful services (57.1 per cent of 91 responses). This contrasts with police responses where a high rate of respondents stated they 'couldn't say' whether the service delivers culturally respectful services (25.9 per cent of 86 responses³⁶).

As discussed above, this may be an indication that police have poor visibility of the nature of the service provided by the CNS, and may reflect a need for deeper engagement with police from CNS coordinators. As discussed in the theory of change, the relationship with police is another key factor in determining whether the person in custody engages with the CNS, with police comments and attitudes toward the CNS having the potential to influence whether the person sees value in taking the telephone call.

³⁶ Both Figure 4 - Survey responses - **To what extent does the CNS deliver culturally respectful services?** and Figure 3 - Survey responses - **To what extent does the CNS deliver strengths-based services?** present results from police survey question 4, which asked about both culturally appropriate and strength-based delivery.

Figure 4 - Survey responses - To what extent does the CNS deliver culturally respectful services?



Source: KPMG 2023

Table 12: Overall conclusions regarding the extent to which the CNS is culturally respectful

Evaluation finding	Evaluation reasoning
<p>Merit determination: Good - Performance was generally strong in some areas relating to the overarching question of the evaluation domain. Some gaps or weaknesses were evident.</p>	<p>Overall, the CNS program is intended to be culturally respectful and this is supported by the delivery of the service by Indigenous led ATSILS organisations. The extent to which ongoing deep engagement with Elders and the Indigenous community can continuously support a culturally respectful approach is constrained by the funding and capacity of CNS coordinators.</p>
<p>Strength of evidence: Weak evidence— where the evidence is indicative of a finding but there are major shortcomings in the data such that limited confidence can be placed on the conclusion.</p>	<p>There is weak evidence to support this finding, with self-reporting of success from ATSILS and many police responding that they were unsure whether or not the service is culturally respectful .</p>

3.4 Collaborative design

The third area required by the IAPEF³⁷ in evaluating Indigenous programs is collaborative design. This is defined in the IAPEF as being ‘designed and delivered in collaboration with Indigenous Australians, ensuring diverse voices are heard and respected’ (p 6).

In the context of the CNS, collaborative design is an integral part of the theory of change best practice model (Figure 1: A best practice model of the CNS), requiring the CNS to continuously engage with Elders and Indigenous community representatives in the shared delivery of the service. This aspect of the model also requires collaboration with police and third party service providers in local communities, in order to be able to provide tailored and appropriate support to each client in custody.

Limited collaboration in the design of the CNS

In consultation with ATSILS and government policy areas in state and territory departments, it was evident that the design of the CNS had been ‘inherited’ by those currently in key stakeholder roles for the service. There were few people who could describe the process of designing the service in most states and territories, with the exception of WA, where the state government provides additional

³⁷ National Indigenous Australians Agency. (2021). *Indigenous Advancement Strategy: Evaluation Framework*. Canberra: Australian Government Publishing.

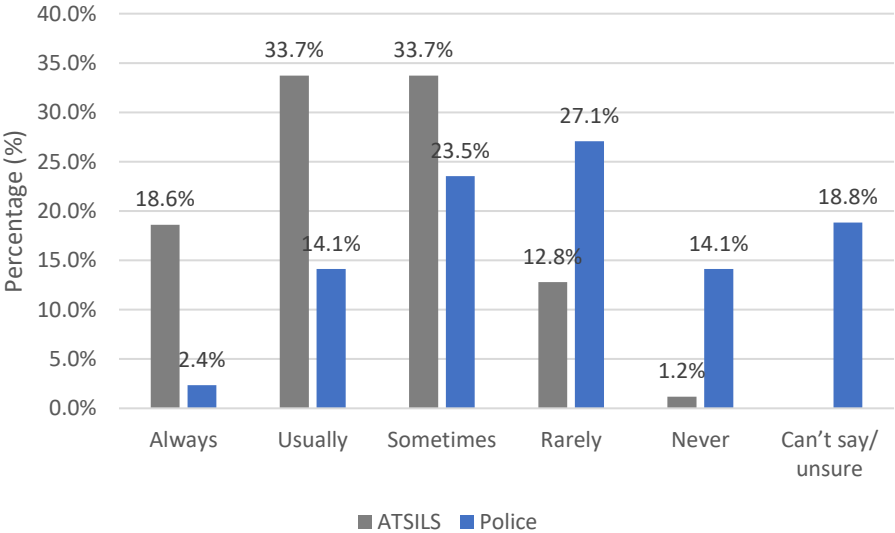
funding to the CNS to ensure diversion and fine payment schemes are enacted as part of the CNS delivery model.

Government stakeholders in other jurisdictions described the importance of collaboration with Indigenous community representatives in the ongoing delivery of a service such as the CNS, however there was little evidence of this. Government stakeholders also described the value of drawing on the data and insights they see across justice sector programs in their jurisdictions as part of a shared delivery model of the CNS, but with the exception of WA, this was not evident.

Consultation with community Elders, Traditional Owners and service providers in fieldwork regions uncovered mixed results in terms of the extent to which the CNS is seen by these stakeholders as collaborative. In some jurisdictions, such as the NT, CNS coordinators were noted as having visited and explained the service to them, and this was viewed very favourably. It is unclear the extent to which this could be considered to be 'collaboration on service design', however it may instead be seen to be a separate, but still vital, aspect of the model, building and sustaining connection to Indigenous communities to support an understanding and trust of the CNS at the local and regional level of Indigenous community. As discussed in the theory of change, this is key to ensuring the person in police custody is able to make an informed decision about whether to trust and engage with the CNS.

When ATSILS were asked to what extent the CNS provides collaborative service delivery amongst key delivery stakeholders, responses tended to be lower than for previous questions, indicating that they 'usually' and 'sometimes' saw this (67.4 per cent of 90 responses said this). Police, when asked to what extent the CNS is easy to access, collaborate with and build positive relationships with, answered 'rarely' and 'never' in 41.2 per cent of the time, whilst 18.8 per cent responded that they couldn't say. The responses are illustrated in Figure 5 below.

Figure 5 - Survey responses - To what extent does the CNS collaborate with key stakeholders?



Source: KPMG 2023

Table 13: Overall conclusions regarding the extent to which the CNS has a collaborative design

Evaluation finding	Evaluation reasoning
<p>Merit determination: Adequate - Performance demonstrated some weaknesses in relation to the overarching question of the evaluation domain, however minimum expectations or requirements were met.</p>	<p>The evidence suggests that, whilst CNSs undertake engagement with a range of stakeholders, including service providers and police at the local level, this may not be widespread and does not appear to be of a collaborative nature, focusing more on visibility of the service than the design of the model. There is little evidence that the design of the model included Indigenous voices beyond those in ATSILS themselves.</p>
<p>Strength of evidence: Some evidence - where the evidence suggests the observation is true but there are data limitations, such that the</p>	<p>There is some evidence to support this finding, with consultations with a range of service providers, Indigenous community representatives, ATSILS, police and government representatives</p>

Evaluation finding	Evaluation reasoning
finding is qualified and further and/or different data (which may have been unavailable to this evaluation) would need to be sourced to be more confident in the conclusion reached.	around Australia indicating that collaboration is not a strong part of the CNS model.

4 Implementation and delivery of the CNS

KEQ 2: How well has the CNS been implemented and delivered?

Sub-questions:

- 2a. Who does the CNS reach?
- 2b. What quality of services do clients receive (fidelity/dose) (urban versus remote clients; children and youth versus adult clients)?
- 2c. To what extent are expected activities and outputs delivered?
- 2d. What is working well/less well and why?
- 2e. What are the enablers/barriers to the effective implementation and delivery of the program?
- 2f. What are the similarities and differences in CNS operating models?

4.1 Intended reach of the program

The CNS has been designed to support Aboriginal and Torres Strait Islander people who have been detained in police custody³⁸. The eligibility for access to the CNS varies between jurisdictions and is summarised below in Table 14.

Table 14: Eligibility rules for the CNS

State	Eligibility
NSW/ACT	In NSW and the ACT, the CNS is to be contacted for all Aboriginal and Torres Strait Islander people detained or protected in police custody ³⁹ .
NT	The CNS is to be contacted for all Aboriginal and Torres Strait Islander people who have been arrested and are detained in either a police station or watch house. The requirement to notify the CNS does not apply if the Aboriginal and/or Torres Strait Islander person has been apprehended without an arrest (ie. brought into protective custody if they are believed to be intoxicated) ⁴⁰ .
QLD	QLD ATSILS are to be contacted for any Aboriginal and/or Torres Strait Islander person who has been arrested or is held in custody ⁴¹ .

³⁸ Australian Law Reform Commission (2017). *Incarceration Rates of Aboriginal and Torres Strait Islander Peoples (DP 84): Custody Notification Service*. Retrieved from Australian Law Reform Commission: [Custody Notification Service | ALRC](https://www.alrc.gov.au/publications/custody-notification-service/)

³⁹ New South Wales Government. (2016). *Law Enforcement (Powers and Responsibilities) Regulation 2016 – REG 37*. Retrieved from New South Wales Consolidated Regulations: http://classic.austlii.edu.au/au/legis/nsw/consol_reg/learr2016542/s37.html

⁴⁰ Northern Territory Government. (2019). *Police Administration Amendment Regulations 2019*. Retrieved from Northern Territory Legislation: <https://legislation.nt.gov.au/en/Subordinate-Legislation/Police-Administration-Amendment-Regulations-2019-SL-17>

⁴¹ Queensland Police Service. (2023). *Operational Procedures Manual: Chapter 16 Custody*. Retrieved from Queensland Police Service: <https://www.police.qld.gov.au/qps-corporate-documents/operational-policies/operational-procedures-manual>

State	Eligibility
SA	Aboriginal Legal Rights Movement (ALRM) are to be notified as soon as is reasonably practical after an Aboriginal and/or Torres Strait Islander person is arrested and detained in a police facility ⁴² .
Tas	TALS are to be notified if an Aboriginal and/or Torres Strait Islander person is required to be detained or interviewed by Tasmania Police ⁴³ .
Vic	The CNS is to be contacted for all Aboriginal and Torres Strait Islander people who have been taken into police custody ⁴⁴ .
WA	The CNS is made available to all Aboriginal and Torres Strait Islander people, both adults and children, whenever they have been: <ul style="list-style-type: none"> • arrested (for an offence or warrant) • apprehended (for protective reasons such as intoxication) • detained in a police facility (for the purpose of being served with an order or for the purpose of undergoing a mandatory infectious disease test)⁴⁵.

Table 14: Eligibility rules for the CNS, above, outlines the eligibility in each jurisdiction for an Aboriginal and/or Torres Strait Islander person to access support through the CNS. This determines whether or not police must notify the CNS of the person entering their custody. Where police are required to notify the CNS, the CNS must then respond to the police within one hour (except in Victoria where the time frame is not specified) and offer support to the person in custody.

The CNS responds to a high volume of calls each week

Performance reporting from Commonwealth funded CNS providers demonstrates the number of notifications made by police each year, as set out in Table 15.

Table 15: ATSILS CNS Notifications

ATSILS	2019/20	2020/21	2021/22
NSW/ACT	22,670	23,215	25,054
NT	8,237	9,343	13,919
SA	-	-	8,745
Vic	-	11,879	11,836
WA	24,422	29,203	30,685
National Total	55,329	73,640	90,239

CNS notification data was not available for Tasmania and Queensland as they do not have Commonwealth funded CNSs.

Data is not sufficient to enable an evaluation of the reach of the CNS

In order to evaluate the reach of the CNS, there are three key data points to examine. First, the extent to which police are notifying the CNS when an eligible person has been taken into custody; second, the extent to which the CNS is available to provide support to that person; and thirdly, the extent to

⁴² South Australia Government. (2020). *South Australia Summary Offences (Custody Notification Service) Variation Regulations 2020 under the Summary Offences Act 1953*. Retrieved from South Australia Legislation: [https://www.legislation.sa.gov.au/_/legislation/lz/v/r/2020/summary%20offences%20\(custody%20notification%20service\)%20variation%20regulations%202020_228/2020.228.un.pdf](https://www.legislation.sa.gov.au/_/legislation/lz/v/r/2020/summary%20offences%20(custody%20notification%20service)%20variation%20regulations%202020_228/2020.228.un.pdf)

⁴³ Tasmania Police. (2018). *Tasmania Police Manual*. Retrieved from Tasmania Police: <https://www.police.tas.gov.au/uploads/TPM-RTI-18-December-2018.pdf>

⁴⁴ Victorian Government. (1958). *Victorian Crimes Act 1958 Section 464FA*. Retrieved from Victorian Legislation: <https://www.legislation.vic.gov.au/in-force/acts/crimes-act-1958/297>

⁴⁵ Aboriginal Legal Service of Western Australia Limited. *Custody Notification Service (CNS)*. Retrieved from Aboriginal Legal Service of Western Australia Limited: <https://www.als.org.au/about/cns/>

which the person accepts the support of the CNS by agreeing to speak to the CNS operator over the telephone.



The extent to which police have notified CNS providers of eligible Aboriginal and Torres Strait Islander persons entering custody requires access to police arrest data, held by state and territory police services. Minimal data has been made available to this evaluation, preventing a conclusion from being made regarding this aspect of the reach of the program. Police CNS notification data provided by Western Australia Police, is broadly in line with the data provided by ALSWA. The small variation in notifications in this data may be explained by the differing reporting periods, with police data covering calendar years as opposed to the financial year reporting provided for ATSILs (see Table 15 above).

The extent to which the CNS is available to offer support once notified by police, and client engagement with the telephone call on offer, are measured through CNS activity reporting in annual performance reports. These were made available to the evaluation, however there are a number of inconsistencies in the data, both within datasets collected by services as well as in types and frequency of data collected across services. These data quality issues prevent this evaluation from drawing a conclusion regarding the extent to which the CNS is reaching its intended target cohort.

Impact of a shared electronic data management system on CNS reach

ALSWA and WA Police currently use a shared electronic data management system called the eCNS. The eCNS is updated by police to reflect when an Aboriginal and/or Torres Strait Islander person has been brought into custody, and allows ALSWA to see this even before a telephone notification has been made by WA Police. This shared system effectively contributes towards the ability of WA’s CNS to reach its intended clients as there are fewer instances of missed notifications given the increased transparency and collaboration between the two organisations.

Investment in consistent and comprehensive data reporting would support ongoing monitoring of the reach of the program, and enable non-compliance on the part of police, or insufficient availability on the part of CNS operators to be identified and solutions tested.

Consultation insights indicate more stakeholder engagement would support the reach of the CNS

Given that the reach of this service is dependent on the connection of clients to the CNS by police members, engagement with police on an ongoing basis by CNS coordinators is a key enabler of the service, supporting the person in custody to be able to make an informed decision about whether to engage with the CNS. Ongoing engagement with the broader Indigenous community to ensure the service is known and understood is also key to this.

Table 16: Overall conclusions regarding the reach of the CNS

Evaluation finding	Evaluation reasoning
<p>Merit determination:</p> <p>Adequate - Performance demonstrated some weaknesses in relation to the overarching question of the evaluation domain, however minimum expectations or requirements were met.</p>	<p>Overall, evidence suggests that the reach of the CNS is adequate at supporting the clients who the service was designed to assist. In most cases, minimum expectations regarding reach were satisfied, however, with greater promotion of the CNS and improved relationships with police, the reach could be improved.</p>
<p>Strength of evidence:</p>	<p>There is weak evidence to support this finding. There are identified data limitations, such as that there was very limited data supplied on</p>

Evaluation finding	Evaluation reasoning
Weak evidence - Where the evidence is indicative of a finding but there are major shortcomings in the data such that limited confidence can be placed on the conclusion.	the number of notifications missed by police. It has been heard anecdotally that calls to the CNS are not being made but no data has been supplied to demonstrate this.

4.2 Expected activities and outputs of the CNS

The CNS has been designed as a mechanism to assess the welfare of Aboriginal and Torres Strait Islander people in police custody and to provide them with legal advice to support them whilst in police custody.

The focus of the CNS funding is on wellbeing, not providing legal advice

The 'General Grants Safety and Wellbeing Programme' project funding agreement held between the National Indigenous Australians Agency and legislated CNS providers outlines the key activities that ATSILS are funded to deliver through the CNS. The agreements held with WA, SA and NT CNSs are absent of any requirement to deliver legal advice or legal information to their clients. The focus is primarily on providing a holistic wellbeing check, including conducting an 'R U OK' or similar check to assess the client's immediate welfare needs. Funding agreements held with VIC and NSW/ACT CNSs were only to mention the requirement of providing "fundamental legal advice"⁴⁶ or the need to "rotate on-call solicitors from currently employed legal staff to provide legal advice"⁴⁷ which implies the provision of legal advice.

Where a requirement, the CNS is to provide 'fundamental' legal advice

Whilst the provision of legal advice is providing tailored guidance for clients based on their situation and delivered by a lawyer or solicitor, 'fundamental legal advice', as required in VIC, implies a more generic form of information, advising the client of the legal processes that the client might experience. Legal information can be provided by administrative staff, Aboriginal Liaison Officers (ALOs), field officers or anyone else taking the CNS telephone call, with no requirement that the operator is a lawyer.

Despite only two states' funding agreements mentioning the provision of "legal advice", all ATSILS noted that they were delivering "legal advice" to their clients.

Performing a holistic wellbeing check

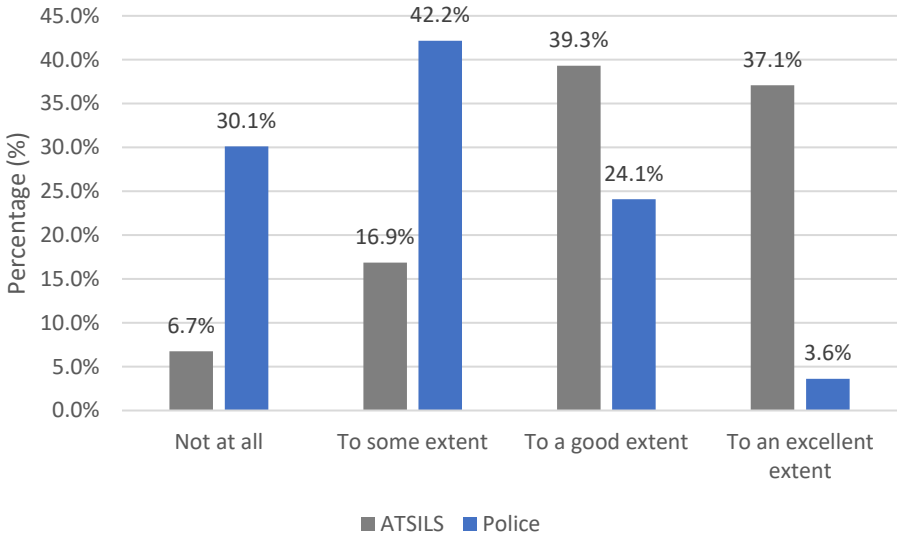
All funding agreements with legislated ATSILS include the requirement to perform holistic wellbeing checks with each Aboriginal and Torres Strait Islander client in police custody. Survey results in Figure 6 below indicate that 76.4 per cent of ATSILS who completed the survey felt that they were able to complete a comprehensive and culturally safe welfare assessment "to a good extent" or "to an excellent extent". At the same time, only 27.7 per cent of police thought this was the case.

However, consultation with key stakeholders indicated that, for some, it was unclear who was to perform this wellbeing check. Some jurisdictions felt that this was the role of local Aboriginal Medical Services (AMS) or the role of the Local Justice Workers, and without the distinction of clear roles and responsibilities, the result was that clients reported that welfare and wellbeing checks were not consistently being completed.

⁴⁶ Department of the Prime Minister and Cabinet Project Schedule – General Grants Safety and Wellbeing Programme Custody Notification Service Project Schedule NSW/ACT (2019).

⁴⁷ National Indigenous Australians Agency Project Schedule – General Grants Safety and Wellbeing Programme Custody Notification Service Project Schedule Victoria (2019).

Figure 6 - Survey responses - To what extent is the CNS able to conduct a comprehensive and culturally safe welfare assessment?



Source: KPMG 2023

CNSs are funded to provide holistic wellbeing checks and to ensure collaborative partnerships are in place, however these activities are difficult for services to deliver

Another activity specified in the funding agreements for the CNSs is to “ensure that collaborative partnerships are in place to support the CNS”. Through consultation with key stakeholders including ATSILS, community organisations, police and state and territory relevant government policy units, it was apparent that some jurisdictions did not have collaborative relationships with one another. As discussed in the theory of change for the CNS, collaboration and engagement between key stakeholders is a critical enabler to effective delivery of the CNS.

In response to questions regarding the delivery of key activities in the ATSILS survey, the fostering of collaborative service delivery amongst key delivery stakeholders was consistently rated as difficult for CNS staff to achieve with the skills, capabilities, time and capacity of their current staff.

As illustrated in Table 17, ATSILS consistently reflected that they usually provide preliminary legal advice, arrange ongoing legal support, and notify the individual’s relatives, guardians, family or friends. They consistently reflected that fostering collaboration, arranging case management support and long term support were only able to be done ‘usually’, as was the provision of a holistic wellbeing check.

These results indicate that whilst providing a holistic welfare check is the main priority in the funding agreements governing the CNS, the provision of fundamental legal information is something CNS operators are doing more consistently, despite it not being included in their current funding agreements.

Discussions with stakeholders explored the barriers to providing holistic wellbeing checks, and noted that this can be difficult to deliver over the telephone with a client who may be distressed or mistrustful of the CNS service.

Table 17: The extent to which CNS staff feel that they have the skills and capability, and time and capacity to deliver services that meet the needs of Aboriginal and Torres Strait Islander people in police custody

	Skills and Capability	Time and Capacity
Have both the skills/capability and time/capacity	Notify the relevant Aboriginal and Torres Strait Islander Legal Service (ATSILS), to initiate ongoing legal support? Provide preliminary legal advice? Deliver culturally respectful services? Notify the individual's relatives, guardians, carers, and/or friends?	Provide preliminary legal advice? Notify the relevant Aboriginal and Torres Strait Islander Legal Service (ATSILS), to initiate ongoing legal support? Deliver culturally respectful services? Notify the individual's relatives, guardians, carers, and/or friends?
Have a mix of skills/capability and time/capacity	Conduct a comprehensive welfare assessment of every Indigenous person entering custody? Deliver services which focus on client's individual strengths? Refer to additional services or support where required (for example, medical support, interpreter services etc.)? Provide appropriately tailored services? Provide flexible services?	Provide appropriately tailored services? Refer to additional services or support where required (for example, medical support, interpreter services etc.)? Conduct a comprehensive welfare assessment of every Indigenous person entering custody? Provide flexible services? Deliver services which focus on client's individual strengths?
Have neither the skills/capability or time/capacity	Foster collaborative service delivery amongst key delivery stakeholders? Provide holistic wellbeing support? Arrange case management support? Arrange long-term post release services?	Foster collaborative service delivery amongst key delivery stakeholders? Provide holistic wellbeing support? Arrange case management support? Arrange long-term post release services?

Source: KPMG 2023

Table 18: Overall conclusions regarding the expected activities and outputs of the CNS

Evaluation finding	Evaluation reasoning
Merit determination: Adequate - Performance demonstrated some weaknesses in relation to the overarching question of the evaluation domain, however minimum expectations or requirements were met.	Overall, evidence suggests that whilst the majority of expected activities and outputs are being delivered, key enabling activities around collaboration are not being consistently prioritised. At the same time, the provision of legal advice, which is not mentioned in the majority of funding agreements, was identified as a consistent, core practice.
Strength of evidence: Some evidence - where the evidence suggests the observation is true but there are data limitations, such that the finding is qualified and further and/or different data (which may have been unavailable to this evaluation) would need to be sourced to be more confident in the conclusion reached.	There is some evidence to support this finding. There are data availability and reliability concerns, however, that suggest that further data collection would be required to be more confident in the conclusion reached.

4.3 Similarities and differences in CNS operating models

The models adopted by each jurisdiction that has a Commonwealth funded CNS, or equivalent service, are largely the same however, there are key differences in the delivery of the model that distinguish each state and territory. Noting that ATSILS are funded for different amounts, the details of staffing requirements are set out in funding agreements. These are summarised in the following table:

Differences identified within the funding agreements

Staffing requirements

Staffing requirements include the numbers and particular roles, and portion of identified positions as featured in funding agreements with legislated ATSILS. The details of these requirements in each jurisdiction are outlined below in Table 19:

Table 19: Staffing requirements by state or territory that have a legislated CNS

State or Territory	Staffing requirements
NSW/ACT	Staff must be able to demonstrate cultural competency Aboriginal and Torres Strait Islander staff must be employed
NT	Specific roles must be filled (ie. CNS Coordinator, lawyers and support workers) Staff must have appropriate qualifications and experience Aboriginal and Torres Strait Islander staff must be employed Staff must be able to demonstrate cultural competency
SA	Staff must have appropriate training to deliver the services Aboriginal and Torres Strait Islander staff must be employed Staff must be able to demonstrate cultural competency
Vic	Specific roles must be filled (ie. CNS Coordinator, lawyers and support workers)
WA	Specific roles must be filled (ie. CNS Coordinator, lawyers and support workers) Aboriginal and Torres Strait Islander staff must be employed

The staffing requirements in the table above illustrate a variation between jurisdictions on the staffing composition. Best practice in this area would ensure ATSILS and their funding provider, currently NIAA, are able to collaborate effectively to develop an appropriate staffing mix. Performance reporting and KPI data are important inputs to guide this, however, it currently has some limitations.

Operational requirements

The funding agreements held with ATSILS also detail partnerships that are required to be held by each jurisdiction. These partnerships are to be established and maintained through service level agreements (including MOUs or other agreements). Partnerships are required in **all** legislated jurisdictions to be held with the state or territory police force, relevant justice or community department and relevant state and territory departments and agencies.

The **Northern Territory, South Australia, Victoria, and Western Australia** agreements also require partnerships to be established and maintained with mental health services, such as psychiatrists, psychologists and mental health nurses, other health providers and allied health services including ACCHOs, and justice and legal agencies (including prisons, child protection and other agencies such as housing, employment, etc).

The agreement with the **Northern Territory** identifies partnerships in addition to this Traditional Owners, AMS' and Aboriginal Community Controlled Organisations (ACCOs).

The agreements with **VIC and WA** also reference additional partnerships. VIC is required to engage with Aboriginal Community Justice Panels, the Victorian Aboriginal Child Care Agency, Aboriginal Community Controlled Organisations and other organisations that provide welfare services to Aboriginal persons in custody. WA's agreement also specifically called out the need to partner with the WA Department of Health and Mental Health Commission of WA.

The funding agreement held with **NSW/ACT ALS** does not specify additional partnerships to support the CNS.

Differences identified within the delivery of the service

The delivery of the welfare check

It was identified through consultation with ATSILS that there was a variation in the consistency of welfare checks being completed, and the degree to which they are done. Some states and territories understood the purpose of the CNS to be an opportunity to complete a comprehensive, holistic welfare check for Aboriginal and Torres Strait Islander clients held in police custody. This understanding was directly linked to the achievement of the desired outcome of the CNS, to reduce harm and Indigenous deaths in custody. Other jurisdictions felt that the welfare check was the responsibility of other parties such as the local AMS or Local Justice Worker and therefore the degree to which it was completed during the CNS call varied.

Provision of legal advice versus legal information

The extent to which legal advice versus legal information was provided to clients also varied between jurisdictions. Only the NSW/ACT and Victorian funding agreements referred to the provision of “legal advice” whilst others were only required to provide a “holistic welfare check”. The misalignment of what is detailed in funding agreements and the outcomes that the CNS is intended to achieve, “protection of legal rights”, has resulted in a variation in the service provided between jurisdictions.

Some state and territories are able to formally distinguish the difference between the general legal information provided to clients regarding the justice process that they will be required to follow, and legal advice based on their situation. Documents such as the ALRM CNS Manual⁴⁸ distinguish the difference between legal information and legal advice as “legal advice can only be provided by lawyers”, whilst legal information is to be provided by “non-lawyers and Contact Officers”.

Staffing mix

The staffing mix varied by jurisdiction and as captured in the January-June 2022 progress reports supplied by the legislated ATSILS, the staffing breakdown by gender and indigeneity is captured below in Table 20.

Table 20: Staffing mix by jurisdiction

Staffing type	Jurisdiction	Result (Jan-Jun 22) %
Staffing mix by gender	NSW/ACT	80 per cent of CNS staff are female 20 per cent of CNS staff are male
	NT	73 per cent of CNS staff are female 27 per cent of CNS staff are male
	SA	79 per cent of CNS staff are female 21 per cent of CNS staff are male
	Vic	80 per cent of CNS staff are female 15 per cent of CNS staff are male 5 per cent of CNS staff identify as an indeterminate/intersex/unspecified person
	WA	81 per cent of CNS staff are female 19 per cent of CNS staff are male
Staffing mix by Indigeneity	NSW/ACT	10 per cent of CNS staff are Indigenous
	NT	45 per cent of CNS staff are Indigenous
	SA	53 per cent of CNS staff are Indigenous
	Vic	95 per cent of CNS staff are Indigenous
	WA	31 per cent of CNS staff are Indigenous

⁴⁸ Aboriginal Legal Rights Movement. (2021). *Custody Notification Service Manual*. Provided by ALRM.

Overall, with consideration to the known similarities and differences, there was no evidence from the consultations and engagement undertaken in this evaluation to distinguish individual jurisdiction performance from the evaluative conclusions drawn at the national level.

4.4 How the service differs in different contexts

The delivery of the CNS differs slightly depending on level of rurality and the age of the client. Areas of the service that differ are a result of the availability of services and the unique needs of clients under the age of 18 in comparison to adult clients.

More sensitive communication is required in providing wellbeing checks for clients under the age of 18, and the eligibility for diversionary programs is greater

The role of the CNS is consistent irrespective of the age of the client; however, when the person in custody is under the age of 18, a range of legislative requirements and police commissioner orders require them to be given in-person support during interview (further detail of the requirements for police where the person in custody is under 18 is in).

From the perspective of the CNS operator, if the person is under the age of 18, this adds to the challenge of providing a holistic welfare check. Where the person is confused or distressed, a welfare check can be more challenging, and this is more likely to be the case when the person is still a child. Select ATSILS have however, recorded throughout the consultation process that they felt that clients under the age of 18 were given more comprehensive welfare checks than adult clients due to their known vulnerability. As a result of this known vulnerability, clients under the age of 18 were also noted as being eligible for a range of additional diversionary programs that were not otherwise available to adult clients. It was noted that the combination of a more comprehensive welfare check and access to diversionary programs led to greater support through the CNS for clients under the age of 18.

Physical needs of clients may differ based on the client's gender or sex

ATSILS consistently stated that the service itself did not differ depending on the gender of the client they were supporting. It was identified that the client's needs differed depending on their gender and that the CNS staff would provide tailored support to address these needs. Examples of this included the provision of appropriate medication if the client identified through the welfare check that they were undertaking a medical gender-affirmation, or for women who identified that they were breastfeeding or that needed sanitary products.

Service provision is more impersonal and less collaborative for clients in metropolitan locations compared to clients in rural or remote communities

Relationships between ATSILS, police and community

A majority of senior ATSILS and police staff reported that there was no existing relationship between the two organisations at a metropolitan level and that this had an impact on the level of collaboration and the quality of the service provided to clients. With the absence of a working relationship between the two organisations, there were flow-on effects for clients, including distrust of either party and a lack of understanding of the purpose and support available through the CNS. The ATSILS did however state that police officers who work in rural and remote communities generally have better relationships with ATSILS than their metropolitan colleagues.

Similarly, community members and organisations in more rural and remote locations also mentioned the increased level of police engagement in community, and the more positive relationships held with police in comparison to the community members in more metropolitan or regional locations.

Some regional police stations also employ Community Constables who have established relationships and connections to the community in which they are working. A working relationship between police

and the community, and the existence of Community Constables allows for a greater understanding of the needs of Aboriginal and Torres Strait Islander clients, including which family to contact if someone is brought into police custody. This is also likely to reduce delays associated with identifying and locating the right parent, guardian or responsible adult and has flow-on impacts on timeframes for the client in applying for bail, particularly where a responsible adult or family member must first be identified.

Lack of availability of required infrastructure in rural and remote locations

A significant challenge for rural and remote communities is the availability of appropriate infrastructure to enable access to the CNS. This includes functional telephones and spare telephones in case they are damaged or faulty, appropriate interview rooms, appropriate heating and cooling within the holding cells and sufficient food and water for the client. A number of communities in rural and remote locations were given as examples where there are insufficient interview rooms for their clients. Metropolitan stations were reported to have access to appropriate facilities and often had close proximity to another station if they had to utilise another location.

Insufficient infrastructure in rural and remote communities

The infrastructure available to police is an area of challenge for the CNS model, particularly in remote locations. For example, ATSILS and police both reported that Kununurra in WA had limited police infrastructure available to support effective delivery of the CNS. This included limited access to interview rooms for clients, often resulting in portable spaces being used. Such spaces often do not protect the client from the elements such as excessive heat, or provide the client with a private space where police cannot overhear their conversation with the CNS representative.

Some regional watch houses also have insufficient telephones available for clients to use for their call to the CNS. Often, if the primary telephone has been damaged or is faulty then the ability for the CNS to be contacted is restricted. Some clients are provided with the responsible officer's own personal telephone; however, officers have been recorded being present with the client at the time of the call to monitor use of their device which affects the client's privacy. Given the remoteness of some of the police stations, it can be challenging to purchase a replacement telephone in a timely manner which is often not a challenge faced by metropolitan stations.

Availability of support services is greater in regional and metropolitan areas

The availability and range of support services that are able to be provided to clients of the CNS vary depending on the client's location. In the majority of cases, clients located in metropolitan or regional areas had a greater range of services available to be referred to whilst those in more rural or remote areas had less support available without being required to travel considerable distances which can act as a barrier to accessing the service.

4.5 Barriers and enablers to effective implementation

A range of barriers and enablers were identified within the current delivery of the CNS in each state and territory, through consultations and surveys of key stakeholders.

Barriers to the effective delivery of the CNS

A number of barriers to the effective delivery of the CNS were identified through stakeholder consultation, engagement with community and from survey responses. The following themes were observed from stakeholders regarding barriers to the delivery of effective support to Aboriginal and Torres Strait Islander people in police custody:

Reluctance to identify as Aboriginal and/or Torres Strait Islander

It was reported in some cases that clients were hesitant to identify as Aboriginal and/or Torres Strait Islander for several reasons. The first reason was that they felt that identifying as an Indigenous Australian and accessing support services that were Indigenous-specific would result in delays to the processing of their cases, rather than supporting them.

The second reason was that some clients did not wish to identify as they felt that their indigeneity would be questioned by local Aboriginal corporations that were responsible for providing the letters of Aboriginality that most AMS require. Again, they felt that this confusion and disagreement of their indigeneity would add unnecessary delays to the processing of their case and would hinder their ability to exit police custody in a timely manner.

Finally, clients also did not feel safe in some circumstances disclosing that they were Aboriginal and/or Torres Strait Islander as they felt they may be harmed or treated worse as a result of their heritage. As a result, clients who did not wish to share that they identified as an Indigenous Australian were not provided access to the CNS or to the tailored support intended for Aboriginal and Torres Strait Islander people who came into police custody.

Limited access to interpreters

Language was identified as a consistent barrier to effective delivery of the CNS by each stakeholder group consulted. For many Aboriginal and Torres Strait Islander clients, English is often not their first language and therefore they may require an interpreter to understand what is being told to them. This barrier is worsened by the limited number of interpreters available in each of the individual's native languages. This presents as a significant barrier for all involved as the CNS cannot communicate with the client and ensure that they understand the legal advice given, their rights or the justice process that they are going to go through. This can also further exacerbate the feelings of confusion and distress that the client is experiencing.

Limitations of telephone based service delivery

The current mode of delivering the CNS entirely over the telephone has been identified as a barrier to effective delivery of the CNS. Clients were reported to be declining the offer of the CNS whilst in police custody and would opt to use their own solicitor as they did not wish to speak to someone over the telephone. The ability to build trust between parties, enabling a genuine and holistic health and wellbeing check of the person in custody, is more challenging over the telephone.

Provision of generic legal advice

The provision of generic legal advice, including the instruction to clients to “say nothing to police”, “do not participate or agree to an interview” and “do not partake in providing a DNA sample”, was reported as acting as a barrier to the implementation and delivery of the CNS. In some situations, this advice is beneficial and prevents the client from engaging with police where the matter is serious or complex and where professional legal advice is required. In other situations, this advice given to clients hinders their ability to move through the justice system and access the diversionary programs available. In NSW, the Protected Admissions Scheme⁴⁹ provides individuals under the age of 18 with the opportunity to admit to committing an offence and receive a formal caution rather than a further conviction. This scheme is only able to be enacted if the individual admits to committing the offence for which they have been taken into custody and, if they are advised by the ATSILS to “say nothing, admit to nothing” then they are unable to access diversionary options through this scheme.

Barriers to effective implementation of the CNS

At the same time, a number of barriers to the effective implementation of the CNS were also identified. These related to the ongoing role of CNS coordinators and the relationships between ATSILS, police, community and government stakeholders:

Lack of community awareness of the CNS

Another significant barrier identified was the lack of community awareness regarding the CNS. Stakeholders consistently argued that there needs to be greater awareness in the community regarding the purpose of the CNS and what it offers Aboriginal and Torres Strait Islander people in police custody. Lack of awareness of the program often results in clients declining access to the

⁴⁹ NSW Police. (n.d). *Information for Young People*. Retrieved from NSW Police: https://www.police.nsw.gov.au/__data/assets/pdf_file/0007/531718/YouthInfo_Brochure.pdf

service as they do not understand what support is available and perceive it as adding unnecessary delays to them exiting police custody.

Strained working relationship between ATSILS and police

As described in the theory of change for the CNS, a strong working relationship between ATSILS and state and territory police services is an essential precursor of the effective delivery of the CNS to people in custody.

Through consultations with ATSILS and police, the need for ongoing investment in this relationship was evident, along with a mixture of attitudes from police in both interview and survey results. Some police described a sense that involving the CNS can introduce delays and hindrance to investigations, whilst others embraced the CNS as a valuable partner in managing the wellbeing of those in their custody.

At the same time, another theme from stakeholders consulted was that the CNS has the strong potential to facilitate the building of trust between community, ATSILS and police. The CNS is considered by some as a mechanism to demonstrate the willingness of ATSILS and police to help the client. The service was referred to as “a way to help clients trust police” and assists clients to “recognise that [police] want to help and provide them access to support”.

Limitations in data sharing

Data management systems in most states and territories (except WA) are not shared between police and ATSILS, which has been identified as a barrier to effective implementation of the CNS. This introduces the risk that information is often missed and insufficiently reported, including notifications of drug use, injury during arrest and medical needs.

ATSILS and police in some states and territories reported that they share their data with each other to identify discrepancies between notifications, however both parties have identified themselves as time poor and understaffed, and this process of manually identifying non-compliance is time consuming.

A shared data management system like the eCNS would help to address these risks, along with reducing unnecessary delays for the client associated with non-timely police notifications. Typically, notifications are to be made within the hour however, some police identified that, as long as the notification was made before the end of their shift then they believed this was sufficient.

Funding uncertainty and the impact on resourcing

The absence of secure, long-term funding was identified by ATSILS as a barrier to ensuring that there were sufficient staff to support the delivery of the CNS. The ability to attract and retain staff is dependent on the ability to offer competitive salaries and the assurance of job security. This was described as an area of tension in the current funding arrangements.

A lack of appropriate and sufficient resourcing has a direct impact on the ability of ATSILS to answer CNS notifications from police services. Police across jurisdictions reflected that at times when notifications were made to the CNS of an Aboriginal and/or Torres Strait Islander person being held in custody, they would be unable to get through or receive a timely call back.

Inconsistent performance reporting

ATSILS are required to provide bi-annual progress reports outlining their achievement of key performance indicators (KPIs) as set by the funding provider. These indicators are inconsistent between ATSILS, however they generally relate to Indigenous employment numbers, general employment numbers (including gender), hours worked for Indigenous staff, hours worked for all staff, core activities being delivered and whether they meet or exceed the expected activities, number of client referrals by gender, juvenile/adult status, custody status, number of telephone calls received, calls answered, calls missed and rates of stakeholder satisfaction. The output provided by ATSILS is a bi-annual progress report which is shared with their funding provider (currently NIAA) which is then to be used for monitoring and evaluation purposes in accordance with the funding agreement.

An investment into the data collection and reporting mechanisms underpinning the CNS would enable effective monitoring and improvement of the program. Performance reporting could be improved and

better enable sharing of insights and lessons learned through a review of the activity-focused KPIs used across ATSILS. The introduction of a shared set of definitions and measurement standards would enable NIAA to hold a complete and comparable picture of activities across jurisdictions. Introduction of outcome-related KPIs could enable the identification of areas of activity where further investment could assist in driving improved results for services, for example in regular reflection of the strengths of the service in achieving the five intended outcomes of the CNS, and how well core enabling functions are contributing to this. The introduction of a shared technology platform would automate key aspects of this process and bring real time insight and reliable metrics to enable ongoing continuous improvement of client outcomes.

Enablers to effective implementation and delivery of the CNS

Alongside the areas of challenge highlighted above, consultation and engagement with key stakeholders also identified a number of areas where the CNS is well served, providing useful examples of how the best practice model in the theory of change can operate.

Shared data management and reporting

The shared digital notification (eCNS) and data management system used by ALSWA and WA Police is seen as a key enabler to effective collaboration between both key stakeholders in the delivery of the CNS. This system encourages engagement between both parties and provides shared accountability to notify, take CNS calls and act within the legislation. Through use of this system, ALSWA felt that they were able to easily identify the client’s needs based on information collected and shared through prior encounters. All state and territory ATSILS referenced the use of this system as best practice and identified merit in adopting a similar system.

Positive attitudes between key stakeholders

Where attitudes held by ATSILS and police staff promote a positive environment and greater collaboration between ATSILS, police and clients of the CNS, this was cited as a key enabler of effective service delivery. For police, positive, supportive attitudes towards the use of the CNS, and towards Indigenous Australian clients, is a key enabler to help ensure clients can make an informed decision about whether they engage with the service on offer from the CNS. Positive police attitudes were apparent when consulting with key stakeholders, with some stating that “they [Aboriginal and Torres Strait Islander people] aren’t prisoners, they’re my clients” which demonstrated a level of commitment to supporting the individual, rather than a mindset focused on charging and prosecuting.

Effective working relationships between ATSILS, police services and community

In some jurisdictions, the working relationships established between ATSILS, police and the community are seen as highly effective and critical for the delivery of the CNS. These strong working partnerships are dependent on the individuals working within the organisations. Where ATSILS staff proactively make trips to the watch houses and stations within their jurisdiction to introduce themselves to the police officers, this has positive benefits for the effective delivery of the CNS. This allows staff from both organisations to have a level of familiarity with one another and encourages a more collaborative delivery of support for the person in custody.

<p>Demonstration of collaborative partnerships</p> <p>Whilst ATSILS are contracted to ensure that collaborative partnerships are established to facilitate the delivery of the CNS, police at senior levels can make a strong contribution. An example of this in practice is in WA, where the ALSWA’s CNS voicemail message features a senior WA Police Inspector reading out the legislative requirements for police officers to contact the CNS and notify every time that an Aboriginal and Torres Strait Islander person is held in police custody. This has been an effective tool in demonstrating a working partnership between ALSWA and WA Police in the delivery of the CNS and helps police officer compliance as they recognise that the service is promoted and encouraged by their superiors.</p>

Barriers and enablers to effective implementation of the CNS can be ameliorated by efforts at the police service and CNS coordinator level

In summary, the key barriers and enablers of the CNS are as follows in Table 21:

Table 21: Key enablers and barriers of the CNS

Type	Key enablers/barriers
Barriers to delivery	<ul style="list-style-type: none"> • Reluctance to identify as Aboriginal and/or Torres Strait Islander • Limited access to interpreters • Limitations of telephone based service delivery • Provision of generic legal advice
Barriers to implementation	<ul style="list-style-type: none"> • Lack of community awareness of the CNS • Poor working relationship between ATSILS and police • Funding uncertainty and the impact on resourcing • Lack of understanding of, and connection to community • Limitations in data sharing • Inconsistent performance reporting
Enablers of effective service	<ul style="list-style-type: none"> • Shared data management and reporting • Positive attitudes between key stakeholders • Effective working relationships between ATSILS, police services and community

Whilst some of the barriers described above are outside of the direct scope of the CNS, for example the first three barriers to delivery, others are the domain of the CNS coordinator role, where continued efforts to implement the shared delivery model set out in the theory of change are needed.

5 Outcomes of the CNS

KEQ 3: To what extent have the expected outcomes been achieved?

Sub-questions:

3a. In what context(s) has the program been more/less successful?

3b. Are there unintended outcomes/consequences?

3c. To what extent does the CNS contribute to Closing the Gap?

5.1 To what extent have the expected outcomes of the CNS been achieved?

The CNS is in place to drive five core outcomes, as identified by the NIAA:

- 1 Reduced rates of Indigenous harm and deaths in police custody
- 2 Protection of legal rights of Aboriginal and Torres Strait Islander people whilst held in police custody
- 3 Improved relationships between police, Indigenous communities and ATSILS
- 4 Improved police capacity to understand and respond to the complex health and wellbeing needs of Indigenous people in custody, and
- 5 Reduced rates of Indigenous adult incarceration and youth detention (Closing the Gap Targets 10 and 11⁵⁰).

Each of these outcomes was the focus of stakeholder engagement, interviews and surveys as part of data collection for this evaluation and, where possible, external data from national longitudinal datasets have also been considered.

Overall, it is difficult to see a direct relationship between the work of the CNS and these outcomes, however the views of the majority of stakeholders is that the CNS is a necessary, but not sufficient, driver of these improved justice outcomes for Indigenous Australians.

Reduce Indigenous harm and deaths in police custody

The National Deaths in Custody Program (NDICP) was established by the AIC in 1992 in response to Recommendation 41 of the RCIADIC. The NDICP collects data on both deaths in police custody and prison custody from a range of quantitative sources, including state and territory police services, correctional departments and coronial records. It should be noted that qualitative analysis of coronial reports sits outside the scope of the NDICP and are not routinely included in NDICP data⁵¹.

Definition

Deaths in police custody can be separated into two categories and is based on a resolution from the 1994 Australasian Police Ministers Council. The categories are outlined in Table 19 below.

⁵⁰ Closing the Gap. (n.d.). *Closing the Gap Targets and Outcomes*. Retrieved from Closing the Gap: <https://www.closingthegap.gov.au/national-agreement/targets>

⁵¹ McAlister M & Bricknell S 2022. *Deaths in custody in Australia 2021-22*. Statistical Report no. 41. Canberra: Australian Institute of Criminology. <https://doi.org/10.52922/sr78849>

Table 22: Deaths in police custody, categories⁵²

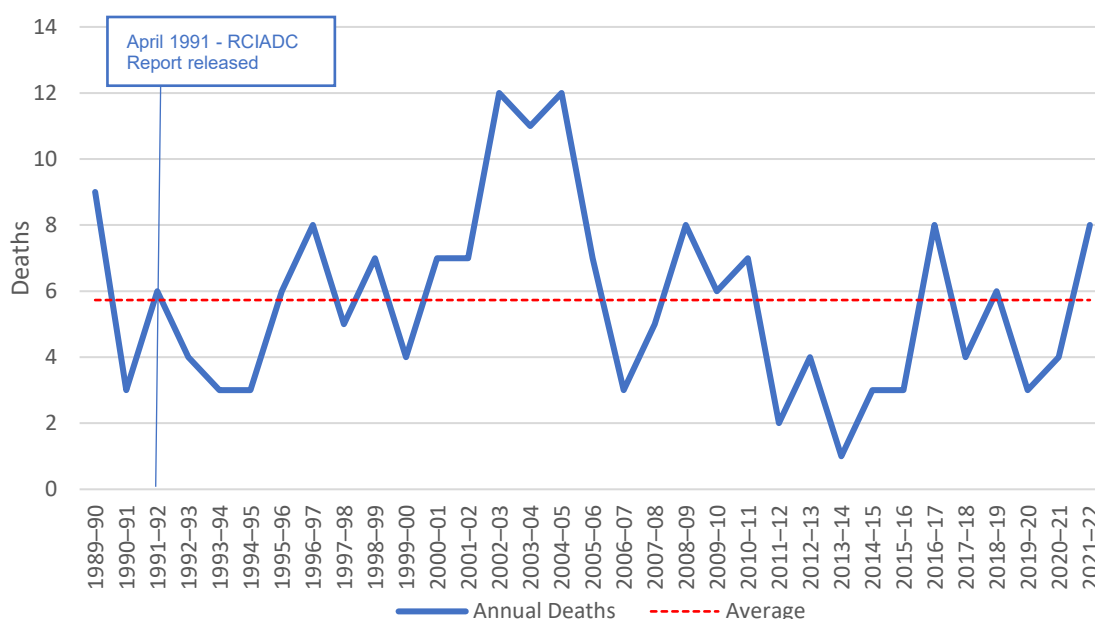
Category 1	Category 2
<p>Deaths in an institutional setting. This includes deaths in police stations, lockups, during transfer to or from an institution or in a hospital following transfer from an institution.</p> <p>Other deaths in police operations where officers were in close contact with the deceased. Category 1b deaths include most raids and police shootings and is based on officers not being close enough to influence or control an individual's behaviour.</p>	<p>Other deaths that occur during custody-related police operations. This category covers deaths where officers were not in close contact with the deceased and not able to influence or control an individual's behaviour. This category would include most sieges and most cases where police were attempting to detain an individual.</p>

Source: KPMG 2023

Indigenous deaths in police custody

Since the release of the RCIADC report in April 1991, there have been 177 Indigenous deaths in police custody and custody operations, which includes all deaths across Categories 1 and 2. Figure 7 below illustrates the variation in the annual number of Indigenous deaths in police custody and custody operations. Over the 33 years of data, there has been, on average, 5.73 deaths per year with a minimum of one (2013-14) and a maximum of 12 (2002-03 and 2004-05). There were eight Indigenous deaths in police custody in the 2021-22 period (Figure 7).

Figure 7 - Indigenous deaths in police custody and custody-related operations, 1989-90 to 2021-22

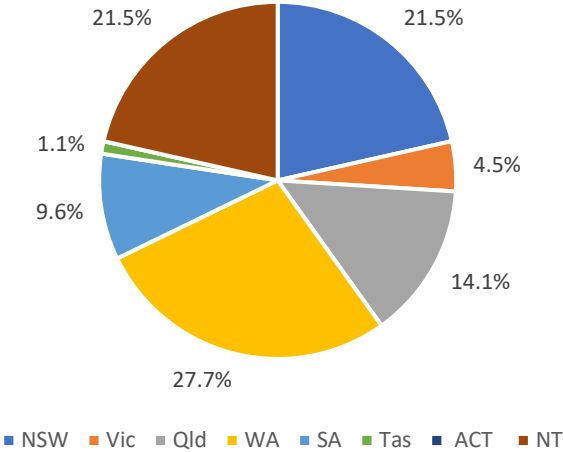


Source: AIC NDICP 1989-2022, KPMG

Since the release of the RCIADC report in 1991, WA has recorded 27.7 per cent of deaths (n=49), followed by the NT (21.5 per cent, n=38), NSW (21.5 per cent, n=38), QLD (14.1 per cent, n=25), with the remaining 15.3 per cent of deaths spread across SA, VIC and TAS as outlined below in Figure 8. There have been no Indigenous deaths in police custody recorded in the ACT.

⁵² Ibid.

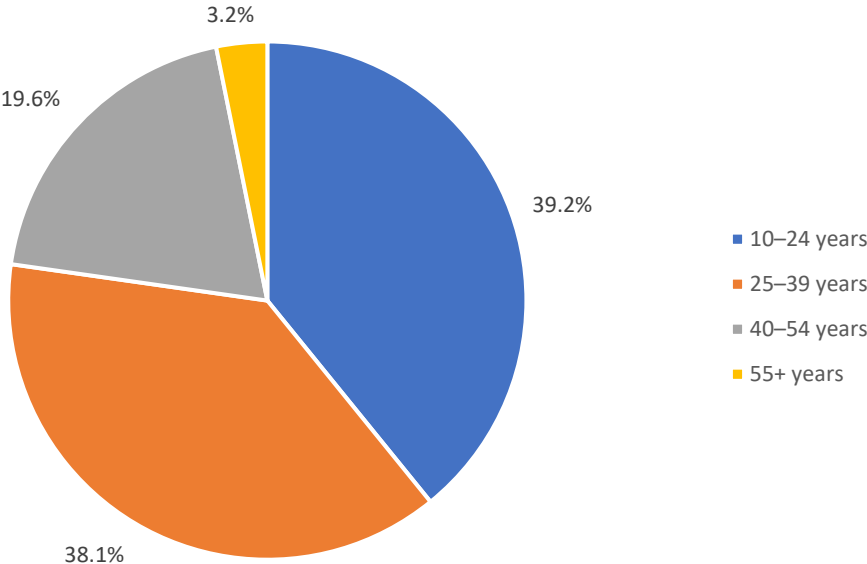
Figure 8 - Indigenous deaths in police custody, proportion by state



Source: AIC NDICP 1989–2022, KPMG

Further analyses show that males make up 86.4 per cent of deaths in police custody. Figure 9 below illustrates that more than three-quarters of Indigenous deaths in police custody are in younger cohorts, with the 10-24 years age bracket accounting for 39.2 per cent of deaths, followed by the 25-39 years age bracket with 38.1 per cent of deaths. It is interesting to note that deaths in the 10-24 years age bracket is approximately 15 percentage points lower in the non-Indigenous cohort.

Figure 9 - Indigenous deaths in police custody and custody-related operations by age category



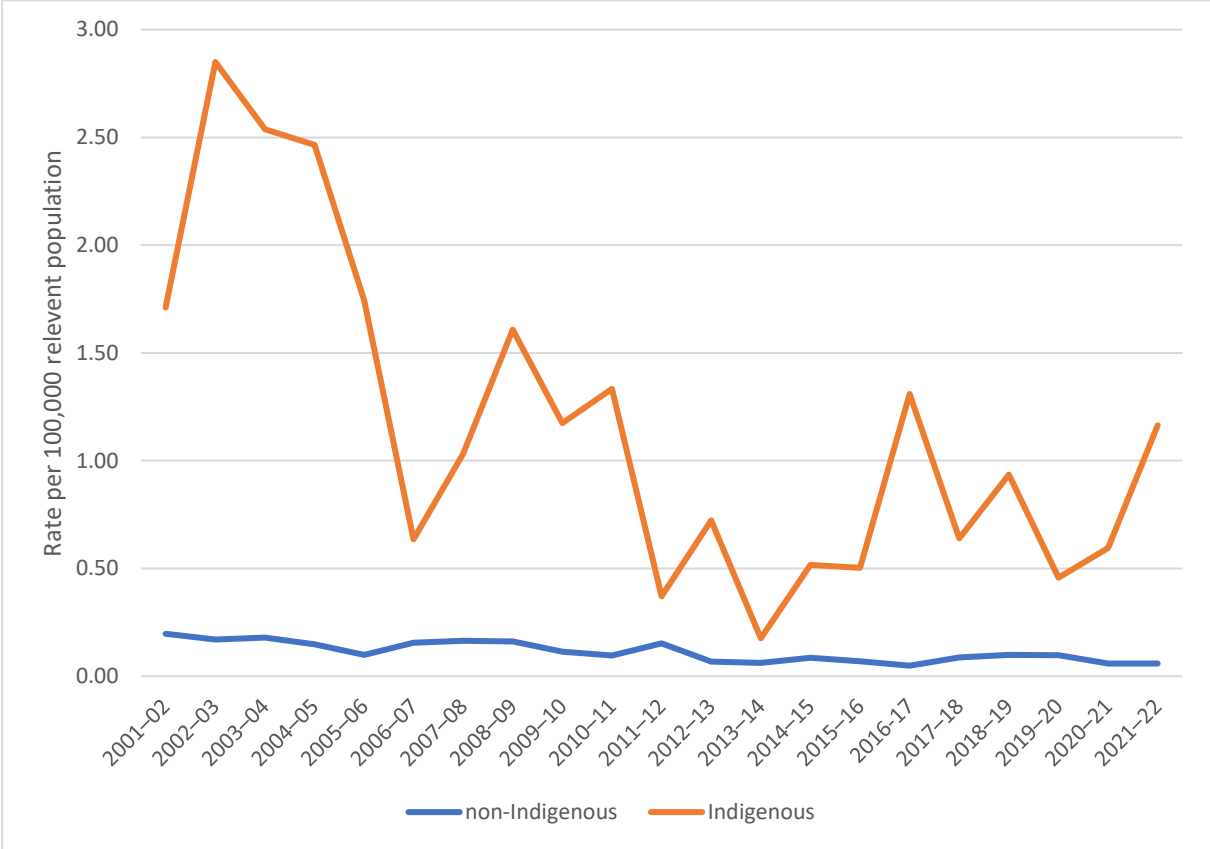
Source: AIC NDICP 1989–2022, KPMG

The NDIPC data also shows that, on a population basis, an Aboriginal and/or Torres Strait Islander person is much more likely to die in police custody than a non-Indigenous person. Figure 10 below illustrates Indigenous and non-Indigenous deaths per 100,000 people. For the 2021-22 period, the data shows that the rate of Indigenous deaths in police custody was 1.16 per 100,000 people. In

comparison, the rate of deaths in police custody for non-Indigenous people was 0.06 per 100,000 people. This indicates that for 2021-22, an Indigenous person (independent of age or gender) was 19.6 times more likely to die in police custody than a non-Indigenous person. Since 2001-02, and noting the volatility in the number of deaths, this rate has varied between a low of 2.4 times (2011-12) and the most recent figure of 26.8 times (2016-17).

It should also be noted that there has been a significant growth in the Aboriginal and Torres Strait Islander population over time. Data from the ABS shows that between the 2016 and 2021 Census, the Indigenous population grew by 25.2 per cent (649,171 to 812,728)⁵³. The ABS also estimated the Indigenous population to be as high as 984,002 in 2021⁵⁴. The ABS has noted that increases in the Aboriginal and Torres Strait Islander population is not wholly explained by demographic factors. When considering the population size, Indigenous and non-Indigenous deaths per 100,000 people are moderately correlated (coefficient = 0.56) as outlined below in Figure 10. When compared to the raw data, this relationship is much weaker (coefficient = 0.36) over the same time period of time, and strongly inversely related in more recent years (coefficient = -0.63, 2016-17 to 2021-22).

Figure 10 - Deaths in police custody, 2001-02 to 2021-22 (rate per 100,000 relevant population)



Source: AIC NDICP 1989–2022, KPMG

Deaths in police custody and the CNS

As identified above, there are two categories within the deaths in police custody definition. Category 1 deaths are more often in an institutional setting, whilst Category 2 deaths are more likely to be classed as occurring during custody-related operations. It is important to distinguish which deaths have occurred in which category in order to understand the potential impact of the CNS.

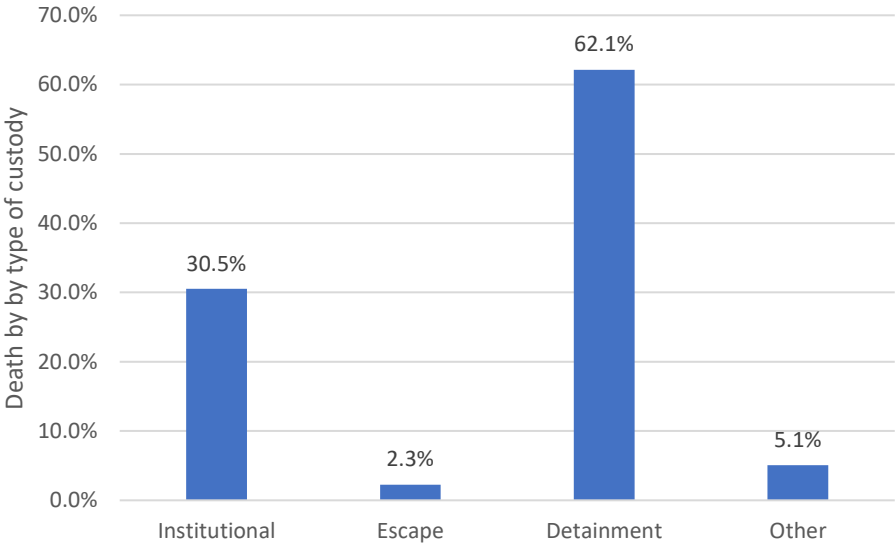
⁵³ Australian Bureau of Statistics (2021), Census of Population and Housing - Counts of Aboriginal and Torres Strait Islander Australians, ABS Website, accessed 8 March 2023

⁵⁴ Australian Bureau of Statistics (June 2021), Estimates of Aboriginal and Torres Strait Islander Australians, ABS Website, accessed 8 March 2023.

Based on the definition above, it is assumed that the CNS would have no impact on deaths that are within Category 1B and Category 2. This is based on the proximity of police to influence the individual's behaviour and the type of custody-related operations described in these categories. However, the data available does not have the granularity to determine which deaths occurred in each of Categories 1A and 1B. For the 2021-22 year, there were five deaths in Category 1 and three deaths in Category 2.

As a proxy for determining which deaths the CNS would impact, the type of custody has been used. Figure 11 below identifies that 62.1 per cent of deaths in police custody were whilst police were attempting to detain the individual. Based on the definition provided above, these fall in either Category 1B or Category 2. This data also shows that 30.5 per cent of deaths occurred in an institutional setting. This includes in police stations, cells, lock-up, and whilst individuals are being transferred between institutional settings, including hospitals and health facilities. The data suggests that deaths that the CNS may have a potential impact on is the 30.5 per cent of deaths that occur in institutional settings.

Figure 11 - Indigenous deaths in police custody and custody-related operations by type of custody, 1991-92 to 2021-22



Source: AIC NDICP 1989-2022, KPMG

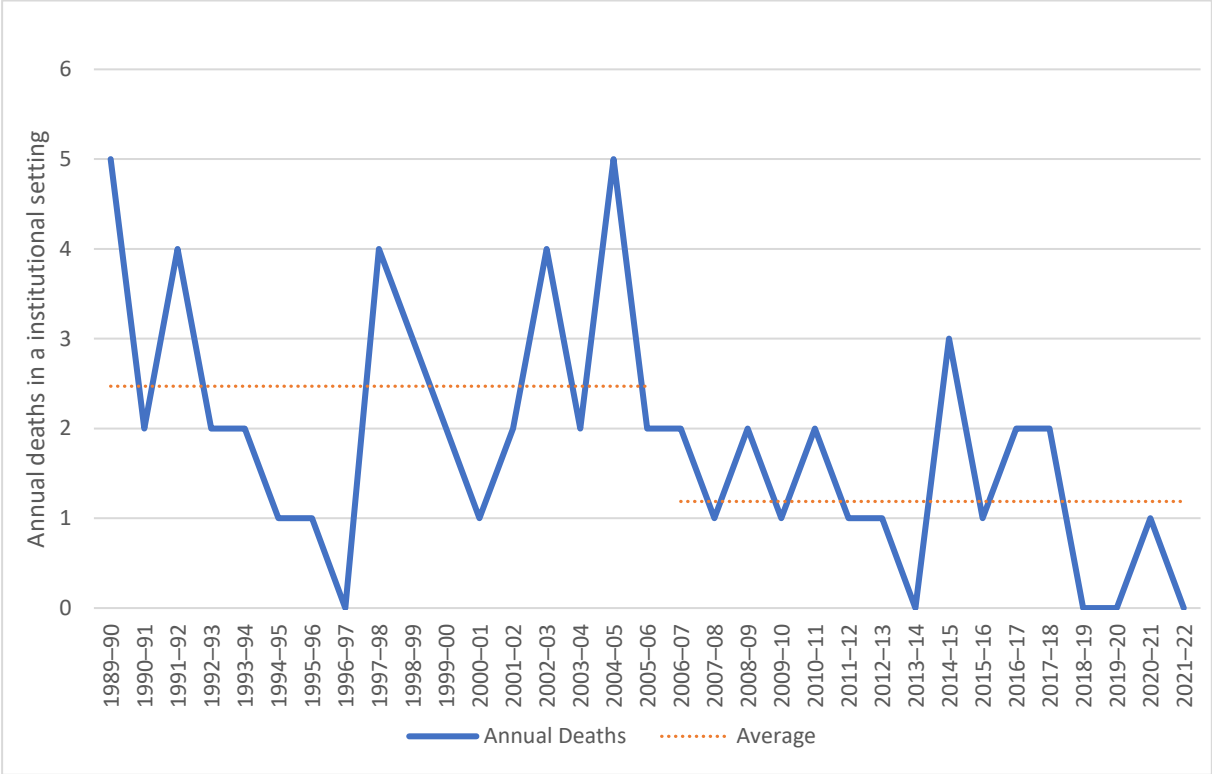
The extent of the NDICP data (1989-90 to 2021-22) shows that there have been 61 Indigenous deaths in institutional settings, whilst in police custody. Figure 12 below illustrates the annual deaths of Indigenous people in institutional settings. Across all years of data, the average number of annual deaths in institutional settings was 1.85, however there are two clear phases in the data. The years 1989-90 to 2005-06 had, on average, 2.47 deaths per year (range: 0 to 5 deaths per year). This contrasts with more recent data (2006-07 onward), where there is a reduction in the average number of annual deaths, with the average falling to 1.19 deaths (range: 0 to 3 deaths per year). It is also worth noting that in the four most recent years of data (2018-19 to 2021-22), there has been one death in an institutional setting, with no deaths recorded in this setting in three of the four years.

From 21 June 2023, all deaths in custody will be reported in real-time by the AIC⁵⁵. Announced as part of the First Nations Justice Package in the 2022-23 Federal Budget, the dashboard will provide preliminary, up-to-date aggregate data on deaths in police and prison custody, including information on Indigenous status, age, and gender. Verified information will continue to be provided on a quarterly and annual basis.

⁵⁵ The Hon Mark Dreyfus KC MP, Attorney-General's Department Real time reporting of Deaths in Custody media release (2023). Retrieved from [Real time reporting of Deaths in Custody | Our ministers – Attorney-General's portfolio \(ag.gov.au\)](https://www.ag.gov.au/our-ministers)

Based on the data available through the real-time dashboard, there have been two Indigenous deaths in police custody during 2023. Data is not provided on the dashboard to identify to which category these deaths are attributable.

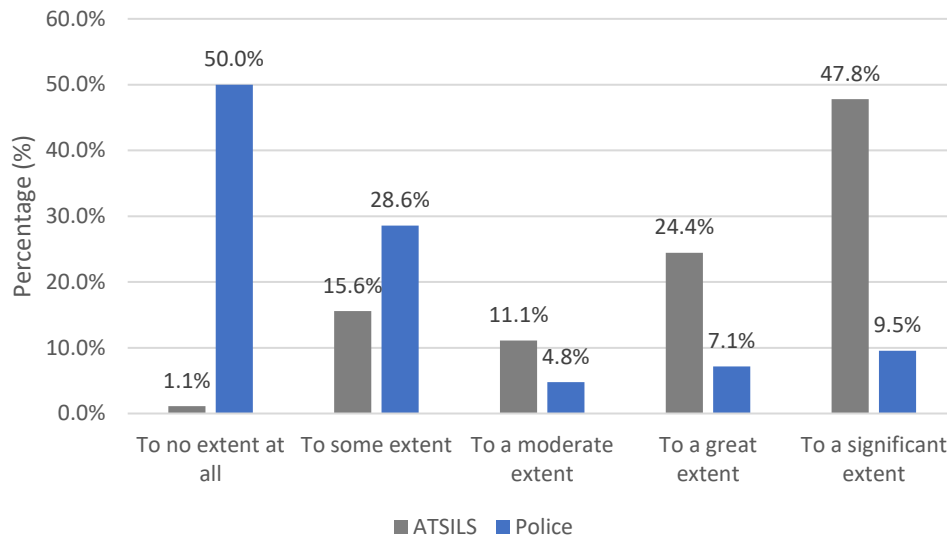
Figure 12 - Annual deaths in institutional settings (1989-90 to 2021-22)



Source: AIC NDICP 1989-2022, KPMG

Survey results from ATSILS and police have provided a mixed response to this outcome measure. Figure 13 illustrates that 50 per cent of police survey respondents felt that the CNS reduced deaths in police custody ‘To no extent at all’, whilst 47.8 per cent of ATSILS survey respondents felt that the CNS reduced deaths in police custody ‘To a significant extent’.

Figure 13 - Survey responses - To what extent has the CNS contributed to reduced deaths in custody?



Source: KPMG 2023

Overall, the data shows a reduction in the number of Aboriginal and Torres Strait Islander people dying in institutional settings whilst in police custody. However, when considering all of the data, Indigenous Australians are still at a significantly higher risk than non-Indigenous people of dying in police custody. The data currently available does not allow for the comparison of deaths in an institutional setting based on jurisdictions. Furthermore, and based on the data available to date, it is not possible to identify the number of deaths in police custody that have been prevented through the CNS.

Table 23: Overall conclusions regarding the extent to which the CNS has contributed to reducing Indigenous harm or deaths in police custody

Evaluation finding	Evaluation reasoning
<p>Merit determination: Good - Performance was generally strong in some areas relating to the overarching question of the evaluation domain. Some gaps or weaknesses were evident.</p>	<p>The CNS is part of a broader system of supports and services to prevent Indigenous harm and deaths in custody. Available national data relevant to this outcome indicates an overall reduction in deaths and harm, and CNS stakeholders, particularly Indigenous community members, consider the CNS to be making an important contribution to this.</p>
<p>Strength of evidence: Some evidence - where the evidence suggests the observation is true but there are data limitations, such that the finding is qualified and further and/or different data (which may have been unavailable to this evaluation) would need to be sourced to be more confident in the conclusion reached.</p>	<p>There is little direct evidence of the role of the CNS in driving this outcome, and no counterfactual has been possible to demonstrate how the rate of Indigenous harm and deaths in custody would be different if the CNS was not in place.</p>

Protection of the legal rights of Aboriginal and Torres Strait Islander people

One of the intended outcomes of the CNS is that the service provides protection of the legal rights of Aboriginal and Torres Strait Islander people in police custody. In practice, as set out in Figure 1: A best practice model of the CNS, protection of legal rights occurs when the person is able to make an informed decision about how to engage with police whilst they are in custody. This could be a decision

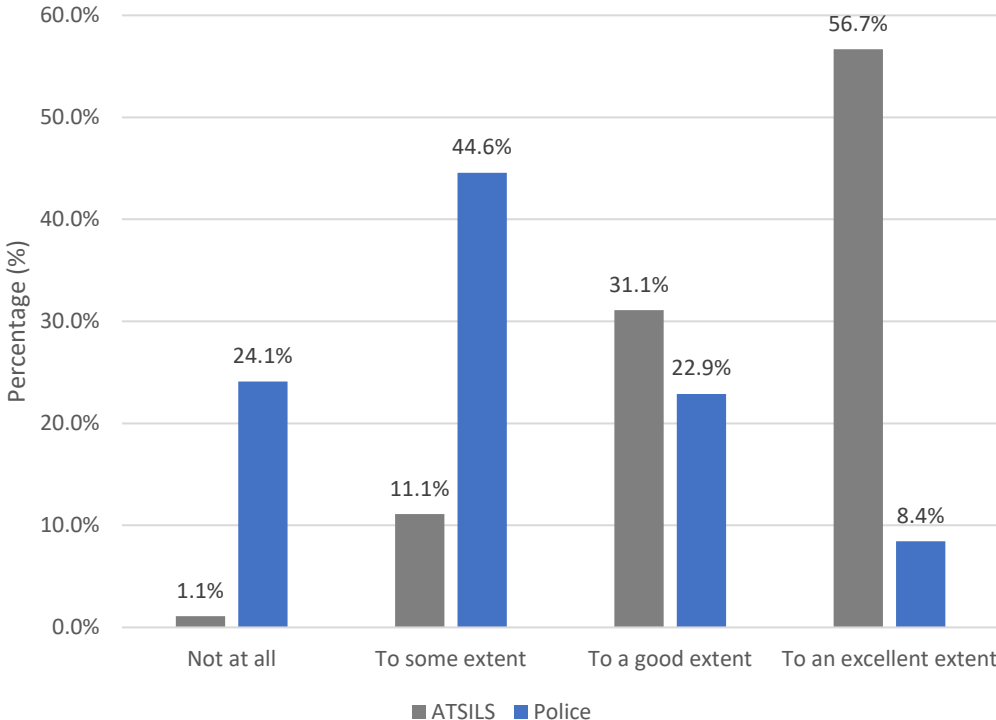
around whether to answer police questions fully, whether to consent to be interviewed and whether they should request legal counsel to be present during their interview.

When examining the extent to which the CNS is protecting the legal rights of Aboriginal and Torres Strait Islander people in custody, it is also important to be clear about the role and scope of the CNS in assisting the person. The CNS is a key triage and referral point in the person’s justice pathway, providing information and access to the services they may need, including the services of a lawyer where charges are serious. Whilst ATSILS may later represent the person in court and provide detailed legal advice and advocacy, at the point in time when delivering the CNS, the ATSILS are required to provide basic legal advice and information.

As a telephone service, the CNS is able to review the facts of the matter as presented to them by the notifying police officer, and then discuss with the person in custody what their options are, the likely timing, actions and potential outcomes associated with the decisions they make regarding the legal process.

In response to survey questions, police and ATSILS again demonstrated divergent views as to the extent to which the CNS has supported this outcome. Figure 14 shows that whilst the majority of ATSILS consider that the service contributed to this to an excellent extent (56.7 per cent of 89 responses), only a small number of police shared this view (8.4 per cent of 83 responses).

Figure 14 - Survey responses - To what extent has the CNS contributed to protecting the legal rights of Aboriginal and Torres Strait Islander people in police custody?



Source: KPMG 2023

Consultation with police and ATSILS provided insight into these divergent views, where police describe the role of the CNS as, at times, leading to delays in releasing the person from custody, where the CNS provides ‘generic’ advice to ‘say nothing’. Police described instances where a matter may be easily cleared up through open dialogue with the person, and discouraging them to be open can instead lead to their spending a longer period of time in custody, at further risk of distress and harm, than if they were encouraged to explain the situation in full.

At the same time, however, ATSILS view the CNS as a key step in protecting the client’s legal rights, giving them access to a supportive and well informed listener who can give them helpful information about the timing and process for the matter at hand, thus helping them to reflect more calmly about how best to approach their engagement with police.

When asked what supports they were given, some clients remembered the CNS telling them to be careful what they say to police.

Although discussions with third party referral services and government policy areas indicated that they see value in the CNS being available to provide legal advice, they were unable to provide direct insight into the extent to which the CNS contributes to this outcome.

Overall, it is unclear from the data available to this evaluation the extent to which CNS operators are providing nuanced legal information and supporting clients to make informed decisions, thereby protecting their legal rights.

In practice, the quality and value of the advice provided by the CNS is likely to vary depending on a number of factors. The extent to which the CNS operator is able to ascertain the full facts of the matter requires the person in custody to trust them, and to be in a setting where they can speak openly, without police overhearing the conversation. As described above, the physical setting is a potential barrier to the quality of support the CNS can provide. At the same time, the extent to which the person is aware of the support and value provided by the CNS can determine their willingness to engage and explore their options with the CNS. As discussed in the theory of change for the CNS, this level of visibility and trust of the program is driven by ongoing engagement of ATSILS with Indigenous communities in their jurisdiction.

Table 24: Overall conclusions regarding the extent to which the CNS protects the legal rights of Aboriginal and Torres Strait Islander people in police custody

Evaluation finding	Evaluation reasoning
<p>Merit determination: Good - Performance was generally strong in some areas relating to the overarching question of the evaluation domain. Some gaps or weaknesses were evident.</p>	<p>The evidence suggests that CNSs provide basic legal advice to clients, supporting their ability to make an informed decision about how best to engage with police. At times, however, this may lead to delays in the client leaving police custody.</p>
<p>Strength of evidence: Some evidence - where the evidence suggests the observation is true but there are data limitations, such that the finding is qualified and further and/or different data (which may have been unavailable to this evaluation) would need to be sourced to be more confident in the conclusion reached.</p>	<p>There is some evidence to support this finding, with consultations with clients, ATSILS and police indicating that the CNS tends to caution the client in what they say to police, however it is unclear the extent to which this protects the legal rights of the client, and much depends on the details of the individual case.</p>

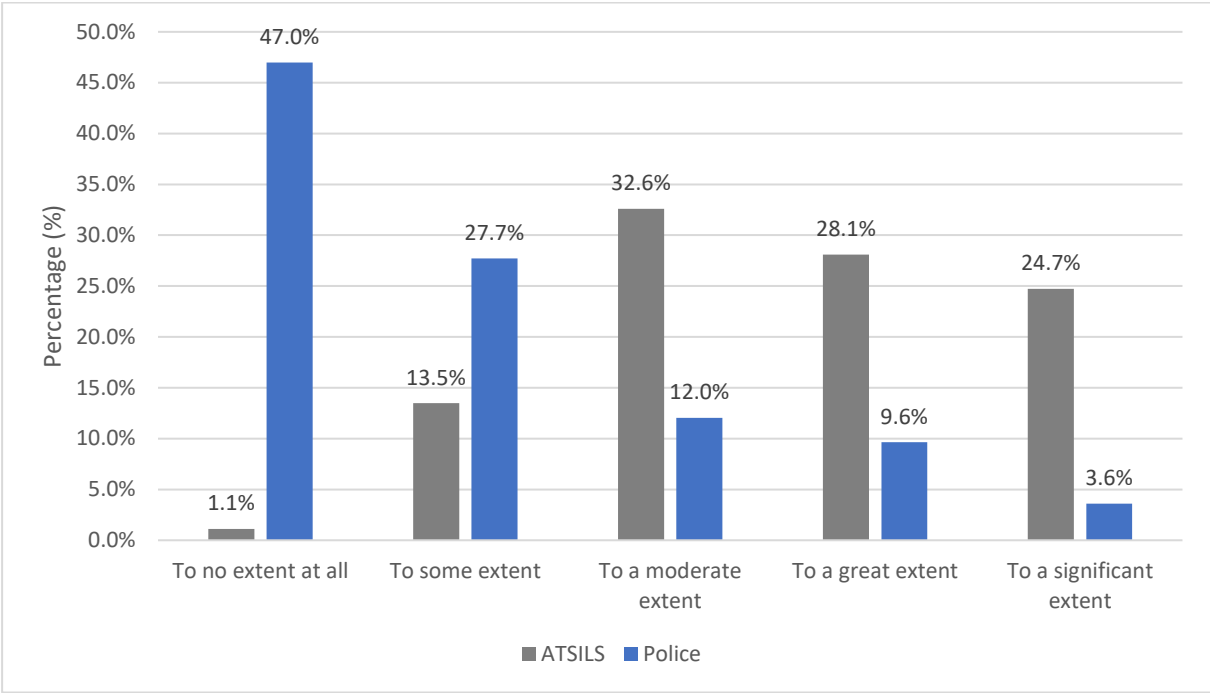
Improve relationships between police, Indigenous communities and Aboriginal and Torres Strait Islander Legal Services

Another intended outcome of the CNS is to improve the relationships between police, the Indigenous communities they serve, and the ATSILS who deliver the CNS. As set out in the theory of change, this is a pivotal set of relationships, underpinning broader, long-term outcomes for the Indigenous community.

Where these relationships are strong and positive, the CNS is supported in providing services to clients, through police attitudes in explaining the CNS to clients, and in clients’ understanding of the service from its visibility in the community. At the same time, positive relationships between police and Indigenous communities may reduce the likelihood of community members being taken into custody over minor issues.

The evidence suggests that the CNS supports these improved relationships to some extent, however this is an ongoing activity requirement for CNS coordinators that requires a high investment of time. It also requires regular renewal and initiation of relationships with police, as terms of members’ postings end and new police take on roles in the community. As discussed, data suggests this activity is an area where the CNS could invest more heavily in order to serve clients and drive positive outcomes.

Figure 15 - Survey responses - To what extent has the CNS contributed to improved relationships between police, Indigenous communities and ATSILS?



Source: KPMG 2023

As shown in Figure 15 above, whilst ATSILS self report that this is an area of strength, police were less positive about the extent to which the CNS contributes to this outcome. In a follow-up question asked only of ATSILS, the survey results indicate that this is an outcome in which the CNS has limited ability to influence change.

Table 25: Overall conclusions regarding the extent to which the CNS contributes to improved relationships between police, Indigenous communities and ATSILS

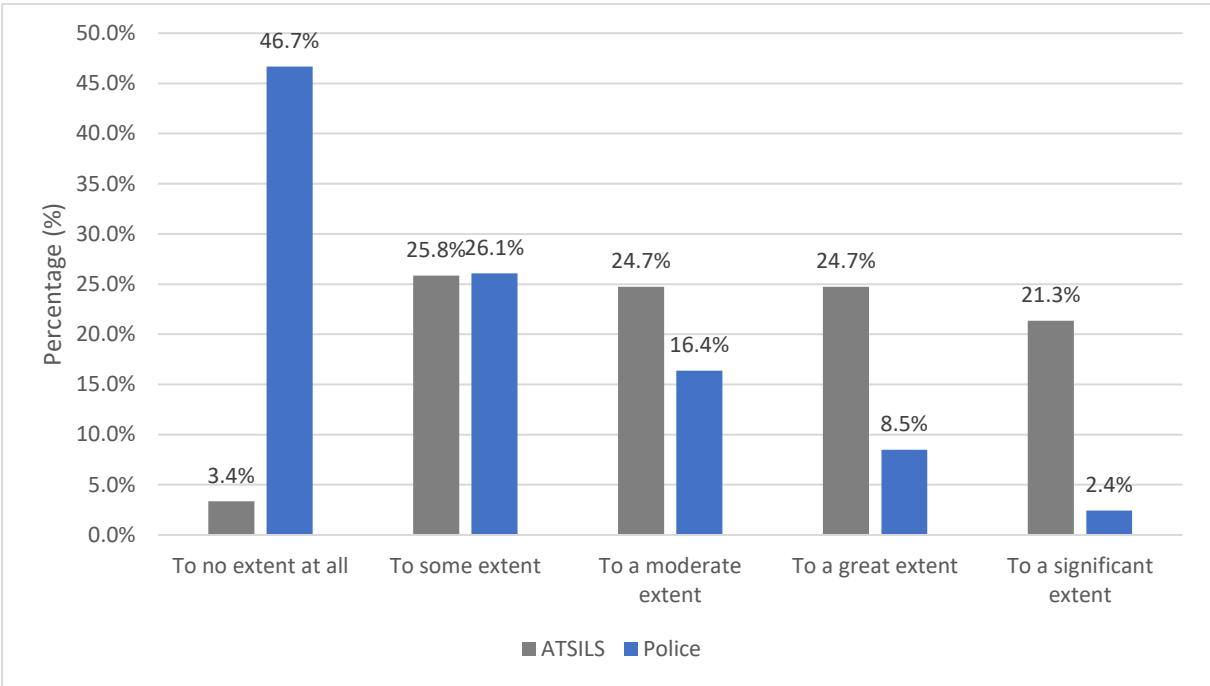
Evaluation finding	Evaluation reasoning
<p>Merit determination: Adequate - Performance demonstrated some weaknesses in relation to the overarching question of the evaluation domain, however minimum expectations or requirements were met.</p>	<p>The evidence suggests that building and sustaining relationships between these three stakeholders is an ongoing challenge.</p>
<p>Strength of evidence: Some evidence - where the evidence suggests the observation is true but there are data limitations, such that the finding is qualified and further and/or different data (which may have been unavailable to this evaluation) would need to be sourced to be more confident in the conclusion reached.</p>	<p>There is some evidence to support this finding, and the divergent views from ATSILS and police provides an indication that there are weaknesses in this domain, where if the relationship was strong and positive, both groups would have acknowledged this when asked.</p>

Improve police capacity to understand and respond to the complex health and wellbeing needs of Indigenous people in custody

When asked to reflect on the extent to which the CNS can influence its intended outcomes, its ability to improve police capacity to understand and respond to the complex health and wellbeing needs of Indigenous people in custody was the area where ATSILS felt the CNS had least influence.

When police and ATSILS were asked to what extent the CNS contributes to this outcome, again, divergent views were seen (Figure 16).

Figure 16 - Survey responses - To what extent has the CNS improved the capacity of police to understand and respond to the complex health and welfare needs of Indigenous people in custody?



Source: KPMG 2023

As discussed in the CNS theory of change, police understanding of the complex needs of Indigenous people is an important precursor to the shared intended outcome of both police and ATSILS – the reduction of harm and deaths in custody. This evaluation collected limited evidence of how well the needs of Aboriginal and Torres Strait Islander people are understood by police, and the evidence that this outcome is supported by the CNS is weak, as it is primarily self-reported by ATSILS involved in its administration.

Whilst the majority of police felt that the CNS had improved their understanding ‘to no extent at all’ (46.7 per cent of 83 responses), this may be because police already feel they have a strong understanding of the needs of Indigenous people in custody, and therefore there is little room for improvement. Alternatively, it may be the case that police do not feel the CNS is in a position to assist with this outcome. In discussions with police, the limitations of the CNS model in engaging with police was a recurring theme, supporting this interpretation of the data.

In order to contribute effectively to this outcome, more time and effort would be required from CNS coordinators to build collaborative working relationships and two way learning and respect between police and Indigenous communities. At present, as discussed throughout this report, this is not a key component of what the CNS delivers, despite the requirement in all funding agreements to ‘Ensure that collaborative partnerships are in place to support the CNS’.

Table 26: Overall conclusions regarding the extent to which the CNS contributes to improved understanding by police of the complex health and wellbeing needs of Indigenous people in custody

Evaluation finding	Evaluation reasoning
<p>Merit determination: Poor - Performance was weak in relation to the overarching question of the evaluation domain. Minimum expectations or requirements were not met.</p>	<p>The evidence suggests that the CNS has limited scope to influence the understanding of police, without increased time and efforts spent engaging with police alongside the local Indigenous communities in their jurisdictions.</p>

Evaluation finding	Evaluation reasoning
<p>Strength of evidence: Some evidence - where the evidence suggests the observation is true but there are data limitations, such that the finding is qualified and further and/or different data (which may have been unavailable to this evaluation) would need to be sourced to be more confident in the conclusion reached.</p>	<p>There is some evidence to support this finding, with survey results from ATSIILS and police indicating this to be an area of challenge.</p>

Reduce rates of Indigenous adult incarceration and youth detention (Closing the Gap Targets 10 and 11).

Targets 10 and 11 under Closing the Gap aim to ensure that Aboriginal and Torres Strait Islander adults and young people are not over-represented in the criminal justice system. These targets aim to reduce the rate of Aboriginal and Torres Strait Islander adults held in incarceration by 15 per cent (Target 10) and to reduce the rate of Aboriginal and Torres Strait Islander young people in detention by 30 per cent (Target 11).

Data available from the Productivity Commission⁵⁶ and the ABS⁵⁷ illustrates mixed progress against these targets. Rates of adult incarceration have increased from 2,142.9 people per 100,000 adult population in 2019 (baseline year) to 2,222.7 people per 100,000 adult population in 2021. However, there has been significant improvement in the rate of Aboriginal and Torres Strait Islander young people in detention. Rates have fallen from 31.9 per 10,000 young people in 2018-19 (baseline year) to 23.2 per 10,000 young people in 2020-21. It should be noted that both targets are significantly above the incarceration and detention rates of the non-Indigenous population.

It is important to acknowledge that the data used to measure the Closing the Gap targets discussed here focuses on individuals already in prison or detention. To further this analysis in the context of the CNS, and to account for the early role that the CNS plays in individuals in contact with the justice system, and for those who do not end up in incarceration or detention, consideration has been given to the number of individuals who have been proceeded against by police. This data allows for the comparison of all offenders, regardless of outcome, not only for those who end up in incarceration or detention.

Indigenous offenders⁵⁸

The ABS Recorded Crime - Offenders⁵⁹ data provides information on offenders proceeded against by police. For Aboriginal and Torres Strait Islander people, this data is available for NSW, ACT, SA, NT and QLD.

New South Wales

The data for NSW shows that, over the period 2008-09 to 2021-22, the age of standardised offender rate increased from 5,242.3 offenders per 100,000 Indigenous people to 7,332.4 offenders per 100,000 Indigenous people. This represents an increase of 64.5 per cent over the 14 years of data. Conversely over the same period, the non-Indigenous offender rate fell by 13.9 per cent. As illustrated in Figure 17 below, the ratio of Indigenous to non-Indigenous offenders for 2021-22 shows that Indigenous offenders were 7.6 times more likely to be proceeded against by police than non-Indigenous offenders.

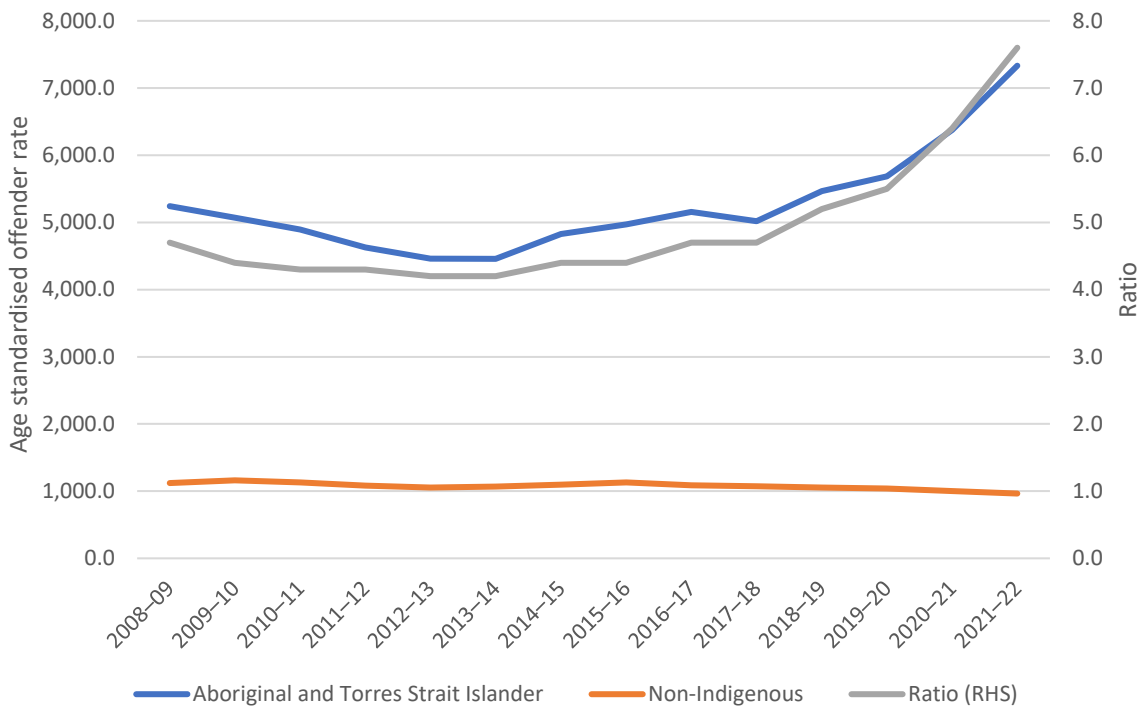
⁵⁶ Productivity Commission. Closing the Gap Information Repository: Available from: <https://www.pc.gov.au/closing-the-gap-data> Accessed: 8 March 2023.

⁵⁷ Australian Bureau of Statistics (2022), [Prisoners in Australia](#), ABS Website, accessed 8 March 2023.

⁵⁸ It should be noted that ABS Offender data is only available for select states and territories. Data for the remaining states and territories is not of sufficient quality to meet the ABS standards for national reporting.

⁵⁹ Australian Bureau of Statistics (2021-22), [Recorded Crime - Offenders](#), ABS Website, accessed 8 March 2023.

Figure 17 - NSW - Age standardised offender rate (per 100,000 people)



Source: Australian Bureau of Statistics, KPMG

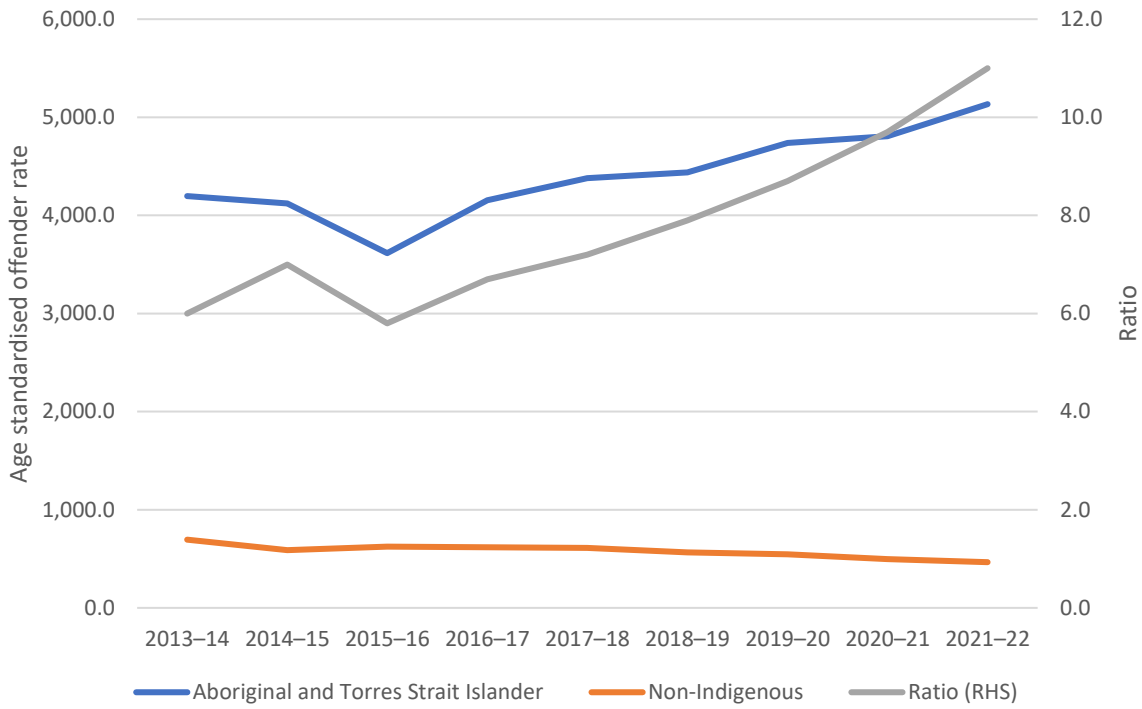
For 2021-22, the data shows that, on average, Indigenous people were proceeded against by police 2.9 times, compared to 1.7 times for non-Indigenous offenders. The data also shows that 56 per cent of Indigenous people were proceeded against two or more times, compared to 28.6 per cent of non-Indigenous offenders.

ACT

Similar to NSW, the ACT has seen a sharp rise in the age of standardised offender rate over the period 2013-14 to 2021-22.⁶⁰ Over this period, the offender rate has increased by 22.3 per cent from 4,196.5 offenders per 100,000 Indigenous people to 5,133.4 offenders per 100,000 Indigenous people. This compares to a 33 per cent fall in the non-Indigenous offender rate over the same period. As illustrated in Figure 18 below, the ratio of Indigenous to non-Indigenous offenders has almost doubled from 6.0 in 2013-14 to 11.0 in 2021-22.

⁶⁰ There is no data for the ACT prior to 2013-14.

Figure 18 - ACT - Age standardised offender rate (per 100,000 people)



Source: Australian Bureau of Statistics, KPMG

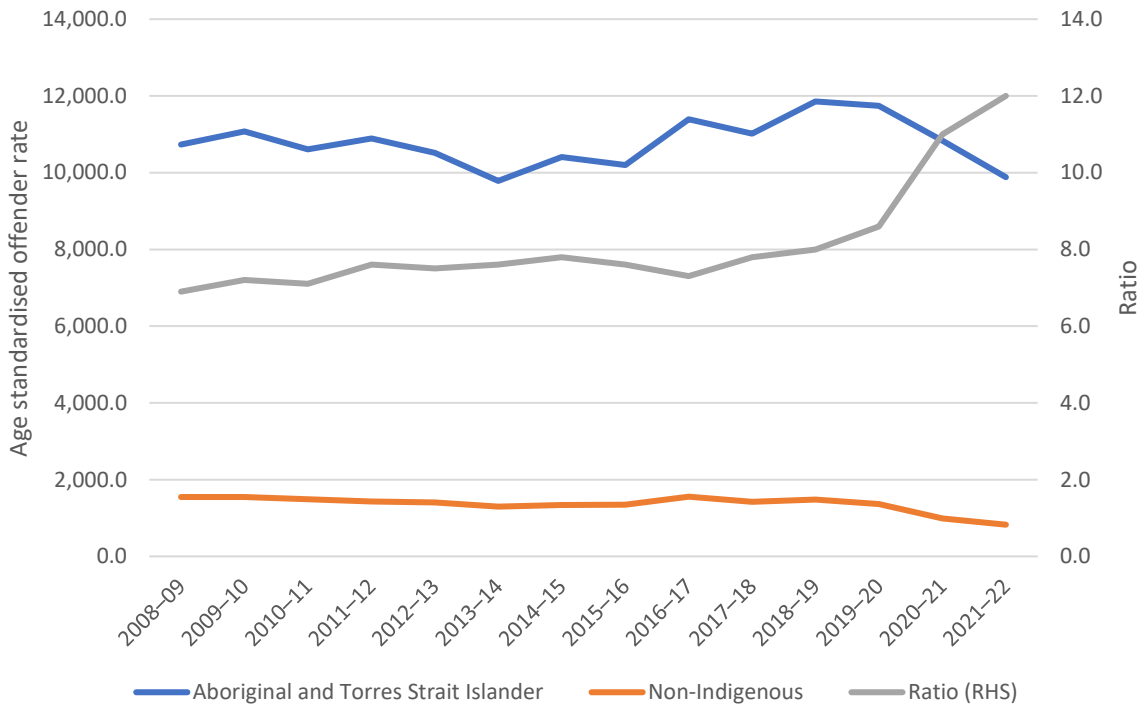
For 2021-22, the data shows that, on average, Indigenous people were proceeded against by police 1.7 times, compared to 1.3 times for non-Indigenous offenders. The data also shows that 35 per cent of Indigenous people were proceeded against two or more times, compared to 22.8 per cent of non-Indigenous offenders.

South Australia

The data for South Australia shows that, over the period 2008-09 to 2021-22, the age of standardised offender rate fell from 10,728.6 offenders per 100,000 Indigenous people to 9,883.0 offenders per 100,000 Indigenous people. This represents a decrease of 7.9 per cent over the 14 years of data. Conversely over the same period, non-Indigenous offender rate fell by 46.6 per cent. As illustrated in Figure 19 below, the ratio of Indigenous to non-Indigenous offenders for 2021-22 shows that Indigenous offenders were 12 times more likely to be proceeded against by police than non-Indigenous offenders. This has increased from a low of 6.9 in 2008-09.

For 2021-22, the data shows that, on average, Indigenous people were proceeded against by police 2.2 times, compared to 1.5 times for non-Indigenous offenders. The data also shows that 35 per cent of Indigenous people were proceeded against two or more times, compared to 22.8 per cent of non-Indigenous offenders. This is outlined in Figure 19 below.

Figure 19 - SA - Age standardised offender rate (per 100,000 people)



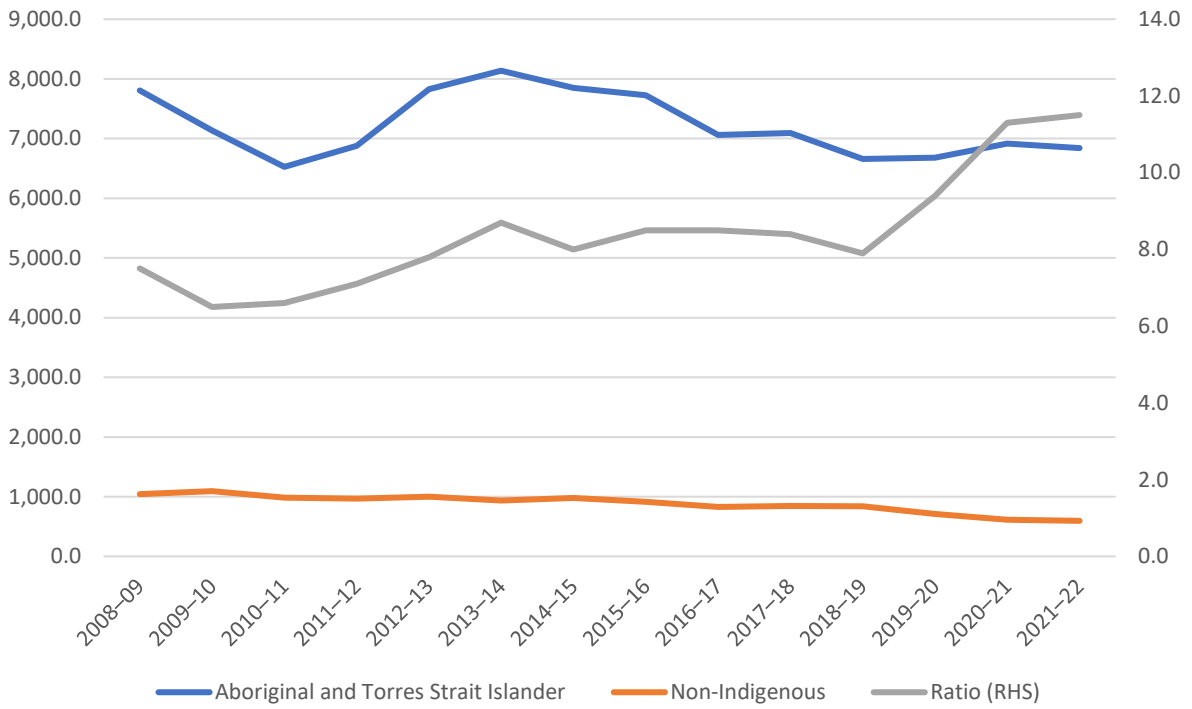
Source: Australian Bureau of Statistics, KPMG

Northern Territory

The data for the NT shows that, over the period 2008-09 to 2021-22, the age of standardised offender rate fell from 7,805.0 offenders per 100,000 Indigenous people to 6,842.5 offenders per 100,000 Indigenous people. This represents a decrease of 12.3 per cent over the 14 years of data. Conversely over the same period, non-Indigenous offender rate fell by 42.8 per cent. As illustrated in Figure 20 below, the ratio of Indigenous to non-Indigenous offenders for 2021-22 shows that Indigenous offenders were 11.5 times more likely to be proceeded against by police than non-Indigenous offenders. This has increased from a low of 6.5 in 2009-10.

For 2021-22 the data shows that on average Indigenous people were proceeded against by police 1.7 times, compared to 1.3 times for non-Indigenous offenders. The data also shows that 38.9 per cent of Indigenous people were proceeded against two or more times, compared to 20.1 per cent of non-Indigenous offenders. This is outlined in Figure 20 below.

Figure 20 - NT - Age standardised offender rate (per 100,000 people)



Source: Australian Bureau of Statistics, KPMG

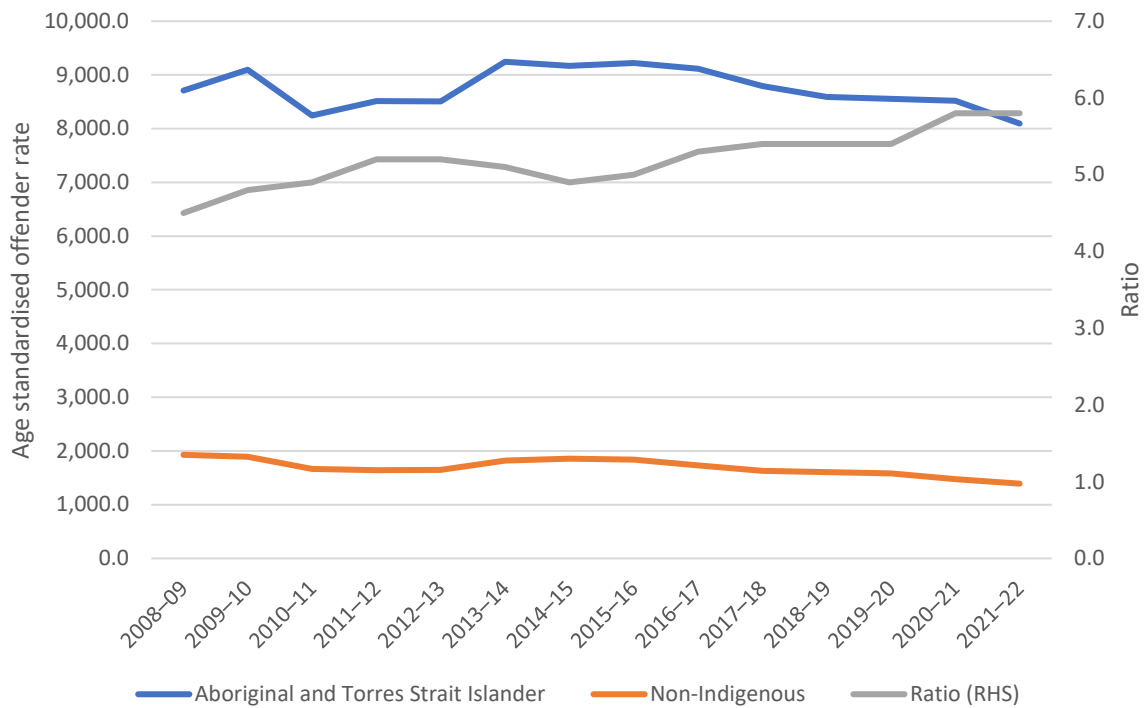
Queensland

Queensland does not have legislated CNS and provides support to Indigenous people brought into police custody through other similar mechanisms. However, this provides an opportunity to compare a region that operates differently and may have different outcomes to those state and territories with an operational CNS.

The data for Queensland shows that, over the period 2008-09 to 2021-22, the age of standardised offender rate fell from 8,707.7 offenders per 100,000 Indigenous people to 8,093.9 offenders per 100,000 Indigenous people. This represents a decrease of 7.0 per cent over the 14 years of data. Conversely over the same period, non-Indigenous offender rate fell by 27.8 per cent. As illustrated in Figure 21 below, the ratio of Indigenous to non-Indigenous offenders for 2021-22 shows that Indigenous offenders were 5.8 times more likely to be proceeded against by police than non-Indigenous offenders. This has increased from a low of 4.5 in 2008-09.

For 2021-22 the data shows that, on average, Indigenous people were proceeded against by police 2.4 times, compared to 1.7 times for non-Indigenous offenders. The data also shows that 49.2 per cent of Indigenous people were proceeded against two or more times, compared to 31.6 per cent of non-Indigenous offenders. This is outlined in Figure 21 below.

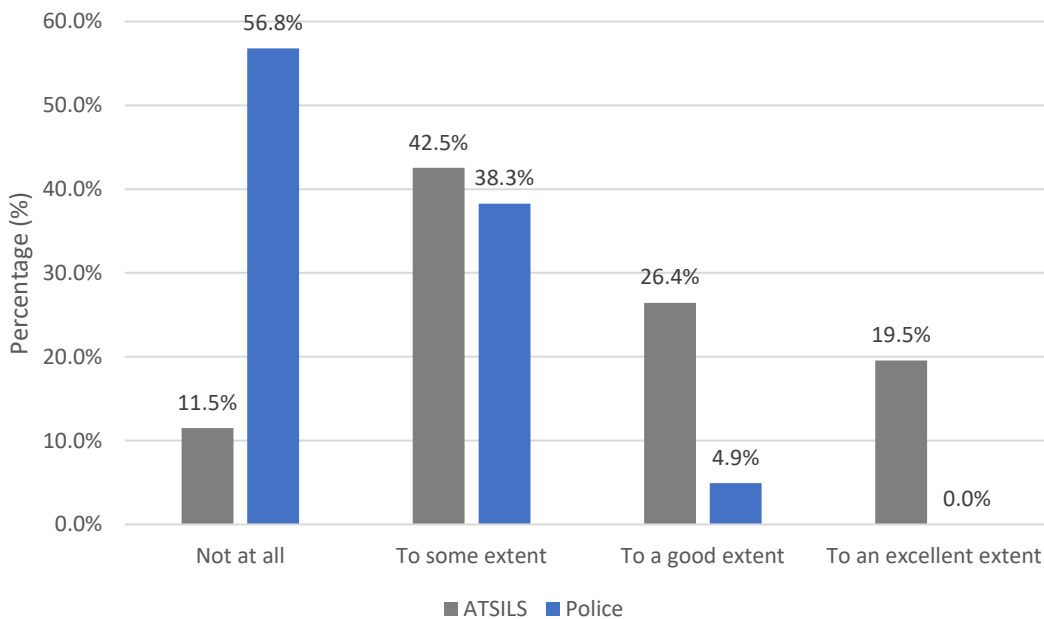
Figure 21 - QLD - Age standardised offender rate (per 100,000 people)



Source: Australian Bureau of Statistics, KPMG

Survey results indicated differing views of both ATSILS and police in the ability for the CNS to reduce recidivism and incarceration rates. Figure 22 below shows that 56.8 per cent of respondents to the police survey indicated that the CNS has no impact on the recidivism and incarceration rates. Responses from ATSILS were more positive, with 46 per cent stating the CNS impacts recidivism and incarceration rates to a good or excellent extent.

Figure 22 - Survey responses - To what extent has the CNS contributed to reduced recidivism and incarceration rates?



Source: KPMG 2023

Conclusion

There is no quantitative evidence available to link CNS activity to changes in, or progress towards, improvements in Targets 10 and 11 of Closing the Gap. From the data available, and for jurisdictions with an operational CNS, reductions in Indigenous offender rates were mixed. Whilst there was a modest fall across SA and the NT, there were significant increases in offender rates in NSW and the ACT. There were also significant improvements in the offender rates of the non-Indigenous population across all jurisdictions.

The significant improvements in non-Indigenous offender rates, combined with modest falls or increases in Indigenous offender rates, means that the gap between Indigenous and non-Indigenous people is getting wider.

As discussed in earlier chapters of this report, the key opportunity for the CNS to contribute to Closing the Gap Targets 10 and 11 is in the ability to assist in diverting people out of detention and incarceration into fine reduction or community service initiatives. The extent to which these outcomes are achieved for individual clients is unclear, and not reported in bi-annual performance data.

Table 27: Overall conclusions regarding the extent to which the CNS contributes to reducing rates of Indigenous adult incarceration and youth detention (Closing the Gap Targets 10 and 11).

Evaluation finding	Evaluation reasoning
Merit determination: Adequate - Performance demonstrated some weaknesses in relation to the overarching question of the evaluation domain, however minimum expectations or requirements were met.	The CNS provides an opportunity to divert clients out of incarceration and detention, supporting the Closing the Gap targets, however it can only do so in limited circumstances.
Strength of evidence: Weak evidence - where the evidence is indicative of a finding but there are major shortcomings in the data such that limited confidence can be placed on the conclusion.	There is weak evidence to link CNS activity data to changes in, or progress towards, improvements in Targets 10 and 11 of Closing the Gap. The data available shows mixed results and, with an improvement to CNS activity data, the contribution of the CNS to Targets 10 and 11 could be made evident.

5.2 Are there unintended outcomes/consequences?

The intended outcomes of the CNS are to reduce rates of Indigenous harm and suicide in custody, protect the legal rights of Indigenous Australians whilst in custody, improve relationships between police, ATSILS and Indigenous communities, improve police capacity to understand and respond to complex health and wellbeing needs and to reduce rates of Indigenous adult incarceration and youth detention in line with the Closing the Gap Targets 10 and 11. There are, however, additional unintended outcomes and consequences as a result of the implementation and delivery of the CNS as discussed below.

Delays

The legal advice given to the majority of clients consulted was to “say nothing”, “don’t participate in an interview” and “don’t give a DNA sample” which often created unintended delays for the processing of clients’ cases. Various state and territory police noted that the advice to “say nothing” hindered their ability to progress the client’s case in a timely manner. This often resulted in clients being required to remain in custody for longer periods of time than was necessary.

Voiding eligibility and access to diversionary programs

The provision of generic legal advice through the CNS has had unintentional consequences on clients’ ability to access diversionary schemes such as the Protected Admissions Scheme. The advice to “say nothing” from CNS staff has meant that clients under the age of 18 often forfeited their right to access diversionary programs that were made available to youth if they admitted guilt.

Identification and support for underlying health issues

The CNS is designed to provide Aboriginal and Torres Strait Islander people with a “holistic wellbeing check”⁶¹. This check is intended to identify the immediate wellbeing and welfare needs of the client to prevent harm and deaths whilst in police custody. The comprehensive welfare assessment provides an opportunity for underlying health issues to be identified in addition to their immediate needs, which can be explored and addressed through appropriate referrals to medical services. The CNS therefore provides clients with an opportunity for early intervention and treatment if underlying conditions have been identified through this welfare assessment.

Unintended consequences of the CNS are difficult to measure

These outcomes were raised by a number of stakeholders during the course of this evaluation, however they are difficult to measure in the current data collected for the program.

⁶¹ National Indigenous Australians Agency Project Schedule – General Grants Safety and Wellbeing Programme Custody Notification Service Project Schedules with legislated ATSILS (2019-2022).

6 Resource utilisation

KEQ 4: How well are resources being used?

Sub-questions:

4 N/A

6.1 Efficient use of resources by CNS providers

Efficiency is commonly evaluated by considering the cost of producing a unit of output. In the context of the CNS, efficient use of resources would relate to the cost of inputs, such as labour and overheads, of delivering the program and the volume of outputs that are subsequently produced by service providers. In order to understand how efficiently resources were used in the delivery of the CNS, reported activity data was combined with the reported costs of program delivery to develop a range of efficiency measures.

Activity and Cost Data

Cost data has been provided by ATSILS or sourced from publicly available annual reports. Cost data is not available for all jurisdictions. Cost and activity data is available in **Appendix H**.

As part of the ATSILS funding agreement with the Commonwealth, ATSILS are required to report on call-based output metrics on a semi-annual basis. These include the total number of telephone calls, missed calls and answered calls.

It has been identified during consultations and through individual activity reports that data collection and reporting methodologies vary by jurisdiction. For this reason, it is not appropriate to compare outcomes between jurisdictions.

Efficiency measures

Efficiency measures used in the analysis include:

- Cost per call received
- Funding per call received
- Call abandonment rate.

Benchmarking

There are currently no service standards for CNS operators, and it is difficult to identify appropriate benchmarks. Where commentary is provided, it is based on publicly available information, and may not be reflective of the CNS context.

Cost per call

Data was available to calculate the cost per telephone call for VIC, WA and NSW/ACT. Cost per call was calculated by dividing the costs associated with delivering the CNS and the total number of calls received.

These are presented in Table 28 below:

Table 28: Cost per call by jurisdiction

Jurisdiction	FY19/20	FY20/21	FY21/22
NSW/ACT	\$45.27	\$40.32	\$38.23

Jurisdiction	FY19/20	FY20/21	FY21/22
Vic	-	\$77.04	\$29.09
WA	\$46.22	\$48.75	\$42.84

Key findings

- The cost per telephone call varied significantly across jurisdictions, with costs varying by as much as 91 per cent. It is unclear why there is a significant difference between jurisdictions, and it is possible that it may be associated with differences in staffing costs, other overheads or differences in reporting methodologies between jurisdictions.
- Cost per telephone call tends to decrease over time. This may be indicative of improving internal processes and ways of working, leading to more efficient use of resources, or in the increased number of calls for the same level of funding.

As identified, it is difficult to benchmark cost per call metrics.

Funding per call

Data was available to calculate the funding per telephone call for VIC, WA and NSW/ACT. Funding per call was calculated by dividing the CNS funding by the total number of calls received.

These are presented in Table 29 below:

Table 29: Funding per call by jurisdiction

Jurisdiction	FY19/20	FY20/21	FY21/22
NSW/ACT	\$46.32	\$43.08	\$39.91
Vic	-	\$101.44	\$63.37
WA	\$46.22	\$48.75	\$42.84

Key findings

- Funding per telephone call was equal to or greater than cost per call in each jurisdiction.
- In the absence of a cost per telephone call benchmark, cost per call can be compared to funding per call as a proxy. Where cost per call is less than funding per call, that jurisdiction can be identified as being relatively efficient in the allocation of resources.
- When comparing results over time, VIC and NSW/ACT are relatively and increasingly efficient in delivering the CNS. Results for Western Australia are mixed.
- Data provided by ALSWA indicated that costs and funding levels were equal. This may be due to accounting or reporting methods. Despite this anomaly, ALSWA can still be said to be relatively efficient in the delivery of the CNS.

Abandonment rate

Understanding the number of telephone calls from to the CNS from police that are abandoned prior to the call being answered can give insights and context to the findings from police consultations and survey, operator performance and management and rostering decisions. The abandonment rate can be used as a proxy for wait times, with higher abandonment rates indicating a longer wait for police to speak with a CNS operator.

Abandonment rate is calculated by dividing the number of missed calls reported by the number of total calls reported. Abandonment rates are reported below in Table 30:

Table 30: Abandonment rates by jurisdiction

Jurisdiction	FY19/20	FY20/21	FY21/22
NSW / ACT	0.09%	1.35%	33.88%

Jurisdiction	FY19/20	FY20/21	FY21/22
NT	7.7%	14.8%	19.9%
South Australia	-	-	16.6%
Vic	-	-	-
WA	23.5%	12.8%	11.9%

Key findings:

- A large proportion of telephone calls are abandoned by police prior to the CNS call being answered. This creates extra work for police in terms of calling back or leaving a message with the ATSILS and waiting for a call back. This has been noted in both consultations with police and survey results. Due to operational matters, the required officer may not be available to answer the ATSILS call or be delayed in re-contacting the ATSILS to notify that a person is in custody. This leads to the potential for an Indigenous person to remain in custody for a longer period of time than is required, and potentially exposing them to harm.
- The high abandonment rate may also be indicative of the complex needs of the individuals using the CNS, and the time it takes to handle each telephone call.
- WA has shown considerable improvement in their call abandonment rate, whilst the NSW/ACT and NT have significantly worsened over time. This may be indicative of benefits drawn from the introduction of the electronic notification process that is operational in WA which drives improved outcomes through greater monitoring of data.

Table 31: Overall conclusion regarding the efficiency of resources used by CNS providers

Evaluation finding	Evaluation reasoning
<p>Merit determination: Good - Performance was generally strong in some areas relating to the overarching question of the evaluation domain. Some gaps or weaknesses were evident.</p>	<p>The evidence suggest that CNS resources are being used relatively efficiently, however the absence of relevant benchmarks and data limitations limit the strength of this finding.</p>
<p>Strength of evidence: Some evidence - where the evidence suggests the observation is true but there are data limitations, such that the finding is qualified and further and/or different data (which may have been unavailable to this evaluation) would need to be sourced to be more confident in the conclusion reached.</p>	<p>There is some evidence to support this finding. Data limitations relevant to this finding include interjurisdictional differences in reporting accuracy and methodology, access to cost data and the lack of appropriate benchmarks for the identified measures of efficiency.</p>

7 Benefits of the CNS

KEQ 5: What benefit(s) does each jurisdiction derive from the CNS, for example, in terms of saved medical costs, reduced costs if CNS is reducing time spent in custody?

Sub-questions:

5 N/A

7.1 Benefits derived from the CNS

Beyond the identified outcomes of the CNS, there are potentially a range of benefits that may accrue to individual jurisdictions from the CNS. As part of this analysis, a desktop review and qualitative sources, including stakeholder consultations and surveys, were used to identify the broader benefits of the CNS. The identification of benefits include those that contribute broadly to the health and justice systems, as well as benefits that accrue to individuals.

It is suggested that a benefit realisation framework is developed to assist further identification of broader benefits to states and territories generated by the CNS, determine methods and data sources to accurately quantify each of the benefits generated by the CNS, understand when the benefits will be realised, and measure and report on progress related to the identified benefits.

Health system benefits are difficult to identify

Health system benefits were difficult to identify. Consultation and survey results focused on improved wellbeing and improved access to medications, with ATSILs providing some case studies of individual instances where the CNS provided significant health benefits to an individual. These represent potential significant benefits to the healthcare system, however quantifying the number of these events that occur over time across jurisdictions, and the timing of potential benefits was not possible with the data available.

Benefits to the justice system were difficult to measure

Similarly, benefits to the justice system were difficult to identify, with contradictory results provided through stakeholder consultations and surveys. Cost savings through reduced time in police custody was identified by ATSILs as a significant benefit of the CNS, however police indicated that delays in contacting the CNS led to an increase in time spent in police custody. Cost savings to police are potentially a key benefit to states and territories, however no data was available to understand the length of time an individual remains in police custody and what impact the CNS has, noting the different responses from stakeholders.

The benefits of early legal advice were also identified, again with contradictory views presented by ATSILs and police. There is a body of literature that describes the benefits of legal representation; however, this body of work focuses on the representation during court proceedings rather than the initial advice given whilst an individual is in police custody. It should also be noted that client and police stakeholders indicated that legal advice was often in the form of 'don't say anything', which may delay the release from custody and present other challenges. The difference in scope of providing legal representation during court proceedings and legal advice to people in police custody limits the generalisability of the broader literature.

Data limitations also made it difficult to establish a counterfactual argument (i.e. what would have happened in the absence of the CNS) to the delivery of the CNS. Ideally, states without a CNS would have provided a natural comparator and counterfactual argument. Whilst QLD and TAS do not have a legislated CNS, they do have similar processes in place to support First Nations people who are in police custody. This confounds any differences identified between outcomes and benefits from the CNS between states with and without a legislated CNS.

Whilst the CNS operates in a complex policy and stakeholder landscape, the benefits generated by the CNS are perhaps even more difficult to navigate. Many of the related benefits are interrelated, intangible in nature, and particularly difficult to quantify. Where potential benefits have been identified, there are also often challenges with sourcing appropriate evidence and data, with issues such as inconsistent, incomplete, or non-existent data an identified issue.

Table 32: Overall conclusions regarding the benefits derived from the CNS

Evaluation finding	Evaluation reasoning
<p>Merit determination: Adequate - Performance demonstrated some weaknesses in relation to the overarching question of the evaluation domain, however minimum expectations or requirements were met.</p>	<p>The CNS provides an opportunity to provide clients with early identification and treatment of health issues, and diversion out of the justice system, however these are ancillary to the main activities and intended outcomes of the service, and are not measured or prioritised.</p>
<p>Strength of evidence: Weak evidence – where the evidence is indicative of a finding but there are major shortcomings in the data such that limited confidence can be placed on the conclusion.</p>	<p>There is weak evidence to draw a conclusion in this domain.</p>

8 Conclusions and recommendations

8.1 Summary of key findings and recommendations

Appropriateness of the design of the CNS

Support to address the client's needs

Aboriginal and Torres Strait Islander people who are brought into police custody need to understand what is happening to them, what the process is going to be and then they need immediate support to address their socio-emotional, physical and legal needs. The CNS generally provides clients access to support to address these needs but the ability to do so is dependent on the particular circumstances and relationships in place in each situation.

Strengths-based

The CNS is designed to be strengths-based, however the ability to deliver a strengths-based service is constrained due to the telephone-based nature of the service. In situations where the CNS engages with other services such as the local AMS to provide clients with mental and physical wellbeing support, clients are provided with a more strengths-based approach to meeting their needs, particularly when support is delivered in-person.

Culturally-respectful

The CNS is broadly respectful of culture, however there are limitations identified with the delivery of the service. The CNS has been designed to be culturally respectful, with the program being delivered by Indigenous-led ATSILS organisations. However, the extent to which there is ongoing, meaningful engagement with local Indigenous communities and Elders on a culturally respectful approach to service delivery is limited by the funding and capacity of CNS coordinators.

Collaborative

There is limited collaboration in the design of the CNS and, despite engagement with a range of stakeholders, this does not appear to be a widespread activity across jurisdictions and therefore has an impact on the collaborative nature of the service.

Implementation and delivery

Intended reach

The CNS is intended to support Aboriginal and Torres Strait Islander clients who are brought into police custody. The extent to which the CNS reaches its intended clients differs between jurisdictions and is highly dependent on legislative eligibility as some jurisdictions do not contact the service if the client is held in protective custody. The level of awareness of the CNS in Indigenous communities and the rate of police compliance in notifying the state or territory ATSILS that an Indigenous Australian is held in police custody are also factors affecting the reach of the program.

Expected activities and outputs

Funding agreements held with ATSILS in each state and territory that has an operational CNS outline the key expected activities and outputs to be delivered as part of the service. Agreements held in the majority of states and territories are focused on the delivery of a "holistic wellbeing check" and neglect to mention the delivery of legal advice (this is only mentioned in funding agreements held with NSW/ACT and VIC). The establishment and maintenance of collaborative partnerships are also explicitly called out as requirements in all funding agreements however, evidence shows that ATSILS

are unable to consistently prioritise expected activities around collaboration and wellbeing checks, whilst the provision of legal advice, which is not mentioned in the majority of funding agreements, was identified as a consistent, core practice for all.

Situations where the level of support provided by the CNS differs

The support provided through the CNS also differs depending on age, gender and location of the client. Clients under the age of 18 were recorded as receiving more sensitive communication, including a more comprehensive wellbeing check, due to their increased vulnerability in comparison to adult clients. The support provided to meet the physical needs of clients also differed depending on the client's identified gender or sex. The service provision for clients in metropolitan areas was identified as being more impersonal and less collaborative than for clients who lived in rural or remote communities. Finally, the resources required to access the CNS and to support the client's immediate needs were recorded as being less available, or more difficult to access by clients located in rural or remote areas than clients who were located in metropolitan areas.

Outcomes of the CNS

The CNS is in place to drive five core outcomes, as identified by the NIAA:

- 1 Reduced rates of Indigenous harm and deaths in police custody
- 2 Protection of legal rights of Aboriginal and Torres Strait Islander people whilst held in police custody
- 3 Improved relationships between police, Indigenous communities and ATSILS
- 4 Improved police capacity to understand and respond to the complex health and wellbeing needs of Indigenous people in custody, and
- 5 Reduced rates of Indigenous adult incarceration and youth detention (Closing the Gap Targets 10 and 11⁶²).

Each of these outcomes was the focus of stakeholder engagement, interviews and surveys as part of data collection for this evaluation and, where possible, external data from national longitudinal datasets have also been considered.

Overall, it is difficult to see a direct relationships between the work of the CNS and these outcomes, however the views of the majority of stakeholders is that the CNS is a necessary, but not sufficient, driver of these improved justice outcomes for Indigenous Australians.

Unintended outcomes and consequences?

The question of unintended consequences of the CNS was examined in consultations across stakeholder groups, and three distinct areas were identified. The first of these was a reflection that the CNS can lead to delays in the person being released from custody. These delays can be driven by high demand and lack of availability of the CNS operator at the time the person is taken into custody, or delays where the advice provided by the CNS results in the person refusing to cooperate with police, leading in turn to longer processing time whilst the facts of the matter are ascertained without the person's direct input.

The second unintended outcome is the potential for the advice of the CNS to lead to the person voiding their eligibility and access to diversionary programs. These programs often require the person to admit their guilt in relation to the matter bringing them into custody and, where the CNS cautions the person not to engage or admit culpability, this removes the option of diverting them into other programs.

The third unintended outcome identified in consultation is a beneficial one, where engagement with the CNS can lead to the early identification and support for underlying health issues. The key mechanism for this is the database held by CNS providers where details of the previous times the

⁶² Closing the Gap. (n.d.). *Closing the Gap Targets and Outcomes*. Retrieved from Closing the Gap: <https://www.closingthegap.gov.au/national-agreement/targets>

person has been brought into custody are reviewed and recommendations for appropriate supports are made.

Unintended consequences of the CNS are difficult to measure, however, and are reflected in this report as suggestions made by stakeholders consulted, and corroboration through other data sources has not been conducted.

Resource utilisation

The extent to which resources are well utilised by ATSILS delivering the CNS was examined using efficiency measures, combining activity and cost data.

These measures provide some insight into the overall efficiency of the CNS models across jurisdictions, however inconsistencies in data and reporting, along with a lack of benchmarking, prevents a strong conclusion regarding how well resources are utilised by ATSILS in delivering the CNS. More complete and reliable data on CNS funding and activities, including number of calls and call abandonment rates, would enable the calculation of costs per call and other measures of cost efficiency.

Benefits of the CNS

The health system benefits associated with the CNS are difficult to identify, and similarly, whilst benefits to the justice system are more easily identified through the theory of change for the program, these are difficult to measure using current data and evidence available to the evaluation.

8.2 Recommendations

A number of recommendations were identified through the course of this evaluation to strengthen the implementation and delivery of the CNS and, over time, to better track the contribution of the service to outcomes for Indigenous Australians and benefits to the Australian community.

The following recommendations are made to promote reach and value to clients from the CNS, and to invest in deepening relationships with police and Indigenous communities as a priority activity. Evidence suggests that where the following components are included in a CNS model, outcomes will be supported for Aboriginal and Torres Strait Islander people interacting with the justice system, along with strengthened ongoing monitoring, evaluation and improvement of the CNS.

In summary, emphasis should be placed on strengthening the following aspects of the CNS model:

1 The role of the CNS coordinator

This role is pivotal to building and maintaining the relationships required with the broad range of CNS stakeholders, in order for the service to engage effectively with Indigenous clients in crisis. This role should prioritise relationships with police, social and legal service providers and Indigenous communities. Activities including face to face introductions, educational visits to share promotional materials and ongoing engagement around community news and sector challenges should be a focus.

For example:

Establishing and maintaining partnerships with police in priority locations in each jurisdiction.

This could be in the form of face-to-face introductions, either virtually or in-person, between the jurisdictional CNS coordinator and police staff in watch houses and stations. An established partnership will help support the understanding of police of the complex health and wellbeing needs of Indigenous Australians in custody and the promotion of the CNS to people in their custody.

Establishing and maintaining relationships with service providers in priority locations in each jurisdiction, to enable strengths-based, in-person service delivery to the person in custody by appropriate providers. CNS coordinators should undertake service level engagement in locations with high Indigenous arrest rates and maintain a database of key services to which clients can be referred. Active engagement should also include follow up of client referrals to understand barriers to take up, and an understanding of service capacity should be maintained for future client referrals .

Investing in strong, collaborative relationships with Indigenous communities in their jurisdictions, to ensure the design and delivery of the program is strengths-based, culturally respectful and collaborative. CNS coordinators should engage with Traditional Owners and key Indigenous community representatives in areas with high Indigenous arrest rates to build a depth of understanding of cultural norms, expectations and relationships to support members of community when they are brought into custody.

To support community trust and engagement with the CNS, ATSILS should **develop promotional materials detailing the purpose of the CNS** and what it can offer Indigenous Australians when they are in police custody. These materials should be distributed within community. This will help the level of comfort and understanding that the clients have with the service and will assist them to be able to make an informed decision on whether they take up the service. Promotional materials distributed for the CNS should also be translated into key Indigenous languages in each priority location.

2 The wellbeing check provided over the phone

As a 24 hour telephone service, the CNS is a key triage and referral point in the justice pathway of Aboriginal and Torres Strait Islander people entering police custody. A key aspect of this triage is a wellbeing assessment, which should be consistent with validated tools and standardised across services.

In order to ensure holistic wellbeing checks are conducted for every Aboriginal and/or Torres Strait Islander person in police custody who engages with the CNS, a consistent, validated tool should be developed and rolled out to CNS operators. This should be simple and effective in design, so that it can be administered by CNS operators, irrespective of their individual skills and training, providing consistency and reliability in the wellbeing assessments made over the telephone.

Examples of Indigenous relevant mental health tools and guidance include R U OK - Stronger Together⁶³, the Westerman Aboriginal Symptom Checklist⁶⁴ and the Australian Mental Health First Aid Guidelines for providing Mental Health First Aid to an Aboriginal & Torres Strait Islander Person⁶⁵. Physical health check questions should also be incorporated, for example medical triage questions around pain, injury and disability in line with Australian Government guidance⁶⁶.

3 The CNS notification system

A national digital notification system is required. Developing an appropriate data reporting and management system would help to ensure that notifications to the CNS are made, and that situations of non-compliance are recorded and followed up. This would increase accountability for police, assist in identifying reasons for non-compliance, and surfacing these to be swiftly resolved.

A national electronic CNS notification system should be introduced, extending that which is in place in Western Australia to incorporate all states and territories nationwide. Developing an appropriate data reporting and management system would help to ensure that all records of notifications to the CNS are made, and that situations of non-compliance are recorded and followed up. This would increase accountability for police and assist in identifying reasons for non compliance, including knowledge or capacity gaps. Future data collection should be grounded in best practice guidelines to support Indigenous Data Sovereignty.

4 The monitoring and evaluation system

Improved data collection and sharing between key stakeholder groups, data linkage across core national longitudinal data sets and the effective use of key performance measures in managing CNS

⁶³ Stronger Together | R U OK?, retrieved from <https://www.ruok.org.au/strongertogether>

⁶⁴ The Westerman Aboriginal Symptom Checklist Adults (WASC-A) - Indigenous Psychological Services (indigenoussychservices.com.au) retrieved from <https://indigenoussychservices.com.au/products-tests/wasc-a/>

⁶⁵ Mental Health First Aid Guidelines | Mental Health First Aid (mhfa.com.au) retrieved from <https://mhfa.com.au/mental-health-first-aid-guidelines#mhfaatsi>

⁶⁶ triage-quick-reference-guide-emergency-triage-education-kit.docx (live.com) retrieved from <https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fwww.health.gov.au%2Fsites%2Fdefault%2Ffiles%2F2022-12%2Ftriage-quick-reference-guide-emergency-triage-education-kit.docx&wdOrigin=BROWSELINK>

funding agreements are all required to support the measurement and achievement of outcomes for the CNS.

For example:

Funding agreements held with ATSILS need to clearly outline core activities to be undertaken by ATSILS when delivering the CNS. This includes explicitly identifying legal advice if the ATSILS are to be providing this advice through the CNS. Performance measures should be reviewed to ensure they are clear and consistent, enabling comparison across jurisdictions and tracking changes over time against both activities and outcomes.

Sharing of data and insights should be done across ATSILS and police. Mechanisms to support the sharing of data and insights should be explored, and bi-annual progress reports and key performance indicator (KPI) data from ATSILS should be shared as lessons learned and better practice examples of successful approaches to supporting positive outcomes.

Relevant benchmarks should be identified or developed to measure the efficiency of resource use and CNS provider performance. Benchmarks should be publicly available and reported against by both service providers and in annual reporting by NIAA, in line with other government agencies. In addition to the metrics above, understanding the average handling time, call trends and wait times will allow for better workforce planning, reduce police wait times and re-work and potentially reduce the length of time a person is in custody.

A benefits realisation framework would be required in order to understand the broader health and economic impacts of the CNS. This would:

- a) Identify the broader benefits to states and territories generated by the CNS
- b) Determine methods and data sources to accurately quantify each of the benefits generated by the CNS
- c) Understand when the benefits will be realised
- d) Measure and report on progress related to the identified benefits.

To understand the longer-term impacts of the CNS, **a data linkage program should be introduced.** This would include linking relevant de-identified data sets, including CNS, police, health, justice, and other associated data sets to understand the impact CNS is having on other outcomes, such as healthcare utilisation, justice outcomes and other social outcomes.

5 The strategic governance of the CNS

A strategic advisory council model should be introduced in each jurisdiction to bring together key stakeholders across the CNS and justice and social services sectors, to share insights, learnings and set the direction for the service. This should be comprised of senior police, government agency senior officials, and Aboriginal and Torres Strait Islander peak bodies.

Appendix A: Terms of reference

Table 33: Terms of reference for the evaluation

Section	Reference material
Background	<p>The CNS was developed in response to the recommendations of the Royal Commission into Aboriginal Deaths in Custody (1991). The CNS was first implemented in New South Wales and the Australian Capital Territory in 2000. Subsequently, additional services were established in Western Australia and the Northern Territory (2018), in Victoria (2020) and in South Australia (2021).</p> <p>The CNS is a telephone-based service that delivers an independent, culturally appropriate health and wellbeing check, along with basic legal information, to all Indigenous persons in police custody. In addition, the service links individuals to appropriate services to facilitate their release on bail, such as referrals to homelessness and mental health services. Police are required by law to formally notify the CNS as soon as practicable after taking an Indigenous person into police custody (including protective custody). The CNS is focused on ensuring an Indigenous person's wellbeing at the commencement of police custody. The service does not extend into remand or post-sentencing periods of incarceration. Each jurisdiction's CNS provider has standard operating procedures, and some have memoranda of understanding with their respective police services.</p> <p>These services are currently Commonwealth-funded, under the Indigenous Advancement Strategy, and delivered by five Aboriginal and Torres Strait Islander Legal Services, which collectively answer approximately 1,500 notifications (calls) from police per week. Whilst policing is a responsibility of each jurisdiction, the Commonwealth Government has agreed to support the establishment of the CNS in all jurisdictions. Queensland and Tasmania do not yet have a CNS, but have other notification and/or wellbeing check processes in place. The evaluation project will ideally also engage with relevant state government and Aboriginal and Torres Strait Islander legal services stakeholders in both Queensland and Tasmania to understand their existing processes and how a best practice CNS model could benefit those jurisdictions.</p>
Objective	<p>This evaluation sought to identify whether the CNS:</p> <ol style="list-style-type: none"> 1. is culturally appropriate, delivered/implemented effectively and efficiently and represents best practice 2. has demonstrably reduced Indigenous deaths in police custody, noting that this metric is difficult to measure 3. has improved relationships between police and Indigenous people, including Aboriginal and Torres Strait Islander legal services 4. has improved the capacity for police to meet the unique health and wellbeing needs of Indigenous people in custody 5. would benefit from any specific improvements to, or greater consistency in, the way it is delivered across jurisdictions or in specific contexts (e.g., to children versus adults; in urban versus regional and remote areas) 6. has the potential to contribute to achieving Targets 10 and 11 under the National Agreement on Closing the Gap (CtG), which aim to reduce the rates of Aboriginal and Torres Strait Islander adult incarceration and youth detention, respectively.
Scope	<p>In-scope aspects of the evaluation:</p> <ul style="list-style-type: none"> • All active CNS (in NSW, ACT, SA, VIC, WA, NT) • Comparable CNS-like services delivered in TAS and QLD. <p>Out of scope from the evaluation:</p> <ul style="list-style-type: none"> • Police practices and operating procedures outside of those directly pertaining to the administration of the CNS to persons in police custody • Other programs that aim to reduce deaths in custody, including prison custody.
Methodology	<p>The methodology should:</p> <ul style="list-style-type: none"> • Reflect the core values and best practice principles in the Indigenous Advancement Strategy Evaluation Framework. • Involve developing the program theory and draw on a theory based approach to the evaluation.

Section	Reference material
	<ul style="list-style-type: none"> • Highlight the use of mixed methods including culturally appropriate methods to ensure Aboriginal and Torres Strait Islander knowledge, perspectives and world views are embedded in the evaluation – expected methods include, but are not limited to: <ul style="list-style-type: none"> - Document analysis/review - Interviews with key stakeholders including policy officers, CNS service providers, police forces and legal bodies (see key stakeholders below) - Yarning with advocacy groups for users of CNS - Focus groups with stakeholders - Analysis of routinely collected monitoring and performance reporting data (to be provided by NIAA). • Consider opportunities for engaging users of CNS to inform the evaluation. • Consider the opportunities to use routinely collected jurisdictional data to assess the contribution of the CNS to expected outcomes and any ethics application considerations (including timelines). NIAA is currently undertaking analysis of deaths in custody data and will make this analysis available to the evaluation. • Detail any assumptions relating to conducting the evaluation. • Include methods for validating data and findings (e.g. testing of instruments and data triangulation). <p>Key Evaluation Questions</p> <ol style="list-style-type: none"> 1. How appropriate is the design of CNS to meet the needs of stakeholders? <ol style="list-style-type: none"> 1.1 To what extent is the CNS strengths -based, culturally-respectful and collaborative? 2. How well has the CNS been implemented and delivered? <ol style="list-style-type: none"> 2.1 Who does the CNS reach? 2.2 What quality of services do clients receive (fidelity/dose) (urban versus remote clients; children and youth versus adult clients)? 2.3 To what extent are expected activities and outputs delivered? 2.4 What is working well/less well and why? 2.5 What are the enablers/barriers to the effective implementation and delivery of the program? 2.6 What are the similarities and differences in CNS operating models? 3. To what extent have the expected outcomes been achieved? <ol style="list-style-type: none"> 3.1 In what context(s) has the program been more/less successful? 3.2 Are there unintended outcomes/consequences? 3.3 To what extent does CNS contribute to CtG? 4. How well are resources being used? 5. What benefit(s) does each jurisdiction derive from the CNS, for example, in terms of saved medical costs, reduced costs if CNS is reducing time spent in custody?
Consultation	<p>Community engagement</p> <p>NIAA supplied KPMG with a list of 19 different site locations, 15 of which were confirmed and the remaining four were alternative options if another site was not suitable. The sites were selected as they were identified as having a significant record of Aboriginal and Torres Strait Islander custody rates and based on their remoteness as per the Modified Monash Model (MMM). The 19 sites included (bolded sites were visited):</p> <p><u>Western Australia</u></p> <p>Perth</p> <p>Broome</p> <p>Geraldton (switched to Kununurra)</p> <p>Derby (alternative site)</p> <p><u>New South Wales</u></p> <p>Sydney</p>

Section	Reference material
	<p>Bourke</p> <p>Dubbo</p> <p>Moree (alternative site)</p> <p><u>Northern Territory</u></p> <p>Darwin</p> <p>Alice Springs</p> <p>Maningrida (switched to Nhulunbuy)</p> <p><u>South Australia</u></p> <p>Adelaide</p> <p>Port Augusta</p> <p>Ceduna</p> <p><u>Victoria</u></p> <p>Melbourne</p> <p>Shepparton</p> <p>Bairnsdale</p> <p><u>Queensland</u></p> <p>Townsville (alternative site)</p> <p><u>Tasmania</u></p> <p>Hobart (alternative site) (switched to Circular Head)</p> <p>Stakeholder consultation</p> <p>NIAA identified the following stakeholders for KPMG to engage with:</p> <p><u>Government Policy Departments</u></p> <ul style="list-style-type: none"> • Justice and Reintegration Policy Section, National Indigenous Australians Agency • NSW Department of Justice • ACT Justice and Community Safety Directorate • Victoria Department of Justice and Community Safety • South Australia Attorney-General's Department • WA Department of Justice • Queensland Department of Justice and the Attorney-General • Tasmania Department of Justice <p><u>Service Providers</u></p> <ul style="list-style-type: none"> • National Aboriginal and Torres Strait Islander Legal Services (NATSILS) (peak body representing the existing service providers) • Aboriginal Legal Services of Western Australia (ALSWA) (delivers the CNS in Western Australia) • North Australian Aboriginal Justice Agency (NAAJA) (delivers the CNS in the Northern Territory) • Aboriginal Legal Services of NSW/ACT (ALSNSW/ACT) (delivers the CNS in NSW/ACT) • Aboriginal Legal Rights Movement (ALRM) (delivers the CNS in South Australia) • Victorian Aboriginal Legal Services (VALS) (delivers the CNS in Victoria) • Tasmanian Aboriginal Legal Service (TALS) • Aboriginal and Torres Strait Islander Legal Service (ATSILS) Queensland (Qld.)

Section	Reference material
	<ul style="list-style-type: none"> • Any third party referral services, such as mental health or homelessness service providers, as deemed necessary in consultation with the above stakeholders. • Indigenous people who have previously been in police custody and have first-hand experience of the CNS (subject to ethics approval and advice from the peak body NATSILS). <p><u>State and Territory Police Services</u></p> <ul style="list-style-type: none"> • Victoria Police • Northern Territory Police Force • Western Australia Police Force • New South Wales Police Force • ACT Policing • South Australia Police • Queensland Police • Tasmania Police
Timeframe	KPMG commenced the evaluation on 6 September 2022 and finalised the evaluation on 26 July 2023.

Appendix B: Key Evaluation Questions

Table 34: Key evaluation questions

Key Evaluation Question	
1. How appropriate is the design of the CNS to meet the needs of stakeholders?	
Sub-questions	a. What support do Aboriginal and Torres Strait Islander people need upon entering custody, and how does this compare to what they receive?
	b. To what extent is the CNS strengths-based, culturally respectful and collaborative?
2. How well has the CNS been implemented and delivered?	
	a. Who does the CNS reach?
	b. What quality of services do clients receive (fidelity/dose) (urban versus remote clients; children and youth versus adult clients)?
	c. To what extent are expected activities and outputs delivered?
	d. What is working well/less well and why?
	e. What are the enablers/barriers to the effective implementation and delivery of the program?
	f. What are the similarities and differences in CNS operating models?
3. To what extent have the expected outcomes been achieved?	
	a. In what context(s) has the program been more/less successful?
	b. Are there unintended outcomes/consequences?
	c. To what extent does the CNS contribute to Closing the Gap?
4. How well are resources being used?	
5. What benefit(s) does each jurisdiction derive from the CNS?	

Appendix C: Data collection and approach

C.1 Stakeholder consultation approach

Stakeholder consultations were identified as a key source of information regarding the effectiveness of the program and was crucial to augment the program data collected through the desktop review, literature scan and survey.

Factors regarding the level of cultural appropriateness, whether the program has reduced Indigenous deaths in custody and if the program has improved relationships between police and Indigenous people was explored. Interviews will also be a key method in exploring any specific improvements in the way CNS is delivered across the country.

KPMG designed the consultation with stakeholders to be conducted via semi-structured interviews, both face-to-face with local staff whilst in community and virtually with senior staff. Stakeholders included ATSILS delivering the CNS program (both local and senior staff), state and territory police services (both local and senior staff) and government policy units.

C.1.1 ATSILS

KPMG initially held a briefing session with NATSILS and representative members from each of the ATSILS to introduce the project and advise of the request for further consultation with each state and territory ATSILS.

KPMG reengaged with all of the individual ATSILS to provide a briefing on our survey which was designed for police, ATSILS and clients of the CNS. During this briefing, KPMG and the ATSILS co-designed a distribution method for the client survey based on what was suitable in their jurisdiction.

KPMG held a final virtual consultation with senior staff within the state and territory ATSILS to understand the delivery and operationalisation of the CNS, or equivalent service in their jurisdiction.

C.1.2 Police Services

KPMG drafted letters to Police Commissioners in each state and territory detailing the evaluation and requesting their involvement in a consultation to understand how they interact with the CNS in their jurisdiction.

KPMG held pre-consultation briefing sessions with the state and territory police services that requested them to detail the scope of the project and type of questions that would be asked during the consultation.

KPMG held virtual consultations with senior staff within the state and territory police services to understand their involvement and engagement with the CNS, or equivalent service in their jurisdiction.

C.1.3 Relevant Government Policy Units

KPMG worked with NIAA to identify key government policy units in each state and territory that have been instrumental in the design and implementation of the CNS, or equivalent service in their jurisdiction.

KPMG held virtual consultations with the senior staff within the state and territory government policy units to understand the process of design, funding and implementation of the CNS, or equivalent service in their jurisdiction.

Table 35 below details the stakeholder consultations which have been completed.

Table 35: Key stakeholders consulted groups involved in the delivery of the CNS

Stakeholder group	Stakeholder
ATSILS	Aboriginal and Torres Strait Islander Legal Services (ATSILS QLD) (Senior Staff Members)
	Aboriginal legal Service of Western Australia (ALSWA) (Senior Staff Members)
	Aboriginal Legal Service (NSW/ACT) (NSW/ACT ALS) (Senior Staff Members)
	Tasmanian Aboriginal Legal Service (TALS) (Senior Staff Members)
	Victorian Aboriginal Legal Service (VALS) (Senior Staff Members)
	Aboriginal Legal Rights Movement (ALRM) (Senior Staff Members)
	North Australian Aboriginal Justice Agency (NAAJA) (Senior Staff Members)
Police	New South Wales Police (Senior Staff Members)
	Northern Territory Police (Senior Staff Members)
	South Australia Police (Senior Staff Members)
	Victoria Police (Senior Staff Members)
	Western Australia Police (Senior Staff Members)
	Queensland Police (Senior Staff Members)
	ACT Police (Senior Staff Members)
	Tasmania Police (Senior Staff Members)
Government Policy Units	ACT Justice and Community Safety Directorate
	Victoria Department of Attorney-Generals
	NT Department of Attorney-General and Justice
	NSW Department of Communities and Justice
	TAS Department of Justice
	SA Attorney-General's Department
	WA Department of Justice
	QLD Department of Justice and Attorney-General

C.2 Community engagement approach

KPMG undertook site visits to seek the views of members of the local Aboriginal and Torres Strait Islander communities that have had experience with the CNS. Fifteen sites were selected for visitation and community consultation.

Prior to commencing consultation in the identified communities, KPMG needed to obtain signed letters of support from representative organisations on the community's behalf. KPMG identified organisations that they felt represented the communities across 15 different locations and asked that, if they felt that the community would be supportive of the project in their location, they should sign the letter. Without a signed letter of support, KPMG was unable to complete site visits and consult with community in the identified locations.

These site visits involved extensive community consultation, including a range of in-person yarning circles and individual informal conversations depending on what the participant felt most comfortable with.

Two key principles were upheld throughout all site visits to ensure cultural appropriateness and comfort for participants:

- 1 The involvement of least one Aboriginal and Torres Strait Islander researcher; and
- 2 An even gender balance between the two researchers. We ensured that at least one researcher was female, whilst the other was male to ensure that, if participants felt more comfortable speaking to someone of the same gender, they were given the option to do so.

KPMG completed 13 site visits across the duration of the project, Table 36 below details a list of organisations consulted in each of the visited communities.

Table 36: Locations visited for face-to-face consultations.

Location	Organisations consulted	# Clients of the CNS or community members with connection to the CNS consulted	Date
Townsville (QLD)	Queensland Aboriginal and Torres Strait Islander Legal Service (QLD ATSILS)		6-7 March 2023
	Townsville Justice Group		
Moree (NSW)	Miyay Birray Youth Service	4	7-8 March 2023
	Maayu Mali Residential Rehab	3	
Alice Springs (NT)	North Australian Aboriginal Justice Agency (NAAJA)		19-21 March 2023
	Salt Bush Social Enterprises		
	Red Cross		
	Lhere Artepe Aboriginal Corporation	7	
	Grannies for Justice	5	
Perth (WA)	Noongar Family Safety and wellbeing Council		20-22 March 2023
	Yorgum Healing Service		
	Nyoongar Outreach Services		
	Aboriginal Legal Service of Western Australia (ALSWA)		
Kununurra (WA)	Wunan Foundation	1	22-24 March 2023
	WA Police (Kununurra)		
	Aboriginal Legal Service of Western Australia (Kununurra office)		
	Binarri-binyja yarrowoo (BBY)		
	Kununurra Safety Group		

Location	Organisations consulted	# Clients of the CNS or community members with connection to the CNS consulted	Date
	WA Police and Community Youth Centres (PCYC)		
	Save the Children		
	NIAA Kununurra Regional Office		
Dubbo (NSW)	Dubbo Community Corrections Office	2	27-29 March 2023
	Grannies Group	4	
	Dubbo Local Aboriginal Land Council	3	
	ACT/NSW Aboriginal Legal Service (Dubbo office)	2	
Circular Head (Tas)	Circular Head Aboriginal Corporation		29-31 March 2023
	Number 33 Aboriginal Medical Service Women's Group	5	
	Brumby Hill Employment	5	
Bourke (NSW)	Bourke Tribal Council	2	30 March 2023
	Maranguka Community Hub	2	30 March 2023
	NSW/ACT ALS (Bourke office)	2	31 March 2023
Adelaide (SA)	Neporendi Aboriginal Community Centre	6	4-6 April 2023
	Port Grannies Forum	6	
Shepparton (Vic)	Rumbalara Aboriginal Co-operative	1	11 April 2023
Bairnsdale (Vic)	Gippsland and East Gippsland Aboriginal Co-operative (GEGAC)	2	12-13 April 2023
Nhulunbuy (NT)	Datjala Work Camp	7	5-7 June
	North East Arnhem Land (NEAL) Aboriginal Corporation	6	
	NT Government Department of Health (Mental health, Alcohol and other Drugs)		
	Anglicare		
	Yothu Yindi Foundation		
	East Arnhem Regional Council		
	NIAA Nhulunbuy Regional Office		
Darwin (NT)	Larrakia Nation	2	8-9 June 2023
	Danila Dilba		
Total clients of the CNS, or community members with a connection to the CNS consulted		77	

C.3 Survey approach

Three tailored surveys were designed and administered to explore relevant evaluation questions, one for Aboriginal and/or Torres Strait Islander people who have accessed the CNS, one for ATSILS staff and one for police. The survey was designed to explore perspectives from both workforces involved in the administration of the CNS and clients, and family of clients who access the service.

The surveys were designed for ease of understanding and to support swift completion by participants, taking approximately 15 minutes to complete. They reflected the objectives of the evaluation and questions are bespoke to this project. The following considerations were incorporated into the survey design to maximise response rates:

- Tailor the flow of questions to each responder using conditional logic to create custom paths through the survey
- Provide a sufficient response period acknowledging that those asked to complete the survey have multiple competing demands on their time
- Ensure the questions are clear and concise and contained in length
- Adequately remind people through a series of targeted communications.

The KPMG Project Team met with representatives of ATSILS in each state and territory to co-design the approach to distributing the client survey. The final approach differed between jurisdictions depending on what was most appropriate for their clients, and approaches included completing hard copy surveys with the client in court, Aboriginal Community Liaison Officers supporting clients to complete them in a hard copy format, and staff offering clients access to digital surveys on a tablet in the ATSILS storefront.

The following limitations were identified with the survey design and implementation:

- Client survey questions were not been translated from English into the language of the participant. This is a limitation of the approach to survey data collection which may impact the volume and quality of survey responses received from CNS clients.
- The client survey was designed to be completed independently by the client on an electronic device. KPMG recognises the limitations of this approach and understands that clients might have varying literacy levels and may not have access to an electronic device on which to complete the survey.

To attempt to address these limitations, KPMG had co-designed the delivery model with the ATSILS in each state and territory to ensure that clients were appropriately supported to understand and complete the client survey. The varied approaches between states and territories meant that clients were appropriately given the opportunity to provide input and have a voice in the evaluation.

C.4 Program key performance indicator (KPI) and publicly available data

Program KPI data and other relevant data was collected from jurisdictional ATSILS and police services. At a high level, the data requested included:

- Indigenous custody numbers
- Support services referred to
- Core activities delivered
- Number of Aboriginal and/or Torres Strait Islander workers currently employed by the ATSILS
- Participant and stakeholder feedback.

A range of secondary data sources were used to support the program KPI data and to provide further insights into the evaluation findings. Secondary data sources used included:

Australian Bureau of Statistics – Information relating to Corrective Services datasets, Recorded Crime Offenders datasets and Census (2016 & 2021) data. This supported our understanding of Aboriginal and Torres Strait Islander incarceration rates.

Australian Institute of Criminology – Specifically, the National Deaths in Custody Program data was used to identify and describe the number of Indigenous deaths in police custody/custody related operation and the breakdown of deaths by jurisdiction, age, gender, cause of death, offence type, method of detainment and setting/location.

Australian Institute of Health and Welfare – Data reported as part of Australia’s Welfare 2021, including Indigenous health and wellbeing.

Productivity Commission – Specifically data related to the reporting of outcomes associated with the National Agreement on Closing the Gap, and data reporting on justice across jurisdictions.

C.5 Limitations of data collected

C.5.1 Generalisability

A limitation of the data collected was that it was unable to be generalised to a national population. This could have been avoided if a high volume of data was collected or if we were able to randomly select an appropriate sample of participants.

The lack of generalisability means that comparisons across jurisdictions may not be possible, or the available data may not be relevant or fit the context of other jurisdictions or stakeholder groups. This limits the ability to make findings based on some data.

C.5.2 Availability of data

There was a limitation on the availability of data, both in terms of consistency and quantity. Each jurisdictional ATSILS collects different data sets relevant to what data must be presented in their program reports and therefore the data was inconsistent between states. Relevant data, such as arrest data, was also requested from state and territory police services but we were unable to obtain the requested data from each jurisdiction.

The lack of available data, and the consistency and reliability of the data received limits the ability to draw robust conclusions about the effectiveness of the CNS and its contribution to outcome measures. The variation in the quantity and types of data between jurisdictions also makes comparison between jurisdictions difficult. Furthermore, the overall lack of data limited the ability to develop and understand the counterfactual argument, that would support findings regarding the effectiveness of the CNS.

C.5.3 Lack of jurisdictional representation

Throughout the stakeholder consultation phase, KPMG made contact with state and territory police and government policy units to request their input and engagement in a virtual consultation. A significant limitation to the data collected is that we were unable to speak with representatives of all state and territories due to a lack of engagement and availability.

This limits the robustness and strength of any findings, and limits the ability to make accurate comparisons between jurisdictions.

C.5.4 Censoring of survey responses

Select state and territory police services were transparent about their need to review and clear their officers’ surveys before releasing them to KPMG. This presented a risk to the quality of the responses given by police officers as many were aware that their answers would be reviewed by their superiors.

The censoring of police survey data may have introduced biases into the results. This limits the ability to draw strong and robust conclusions about the effectiveness of the CNS from this data source.

C.5.5 Lack of an appropriate cross section of clients

A large sample of the client responses, both through the yarning circles and in the client survey, were of an experience with the CNS, or equivalent service, that was not recent. In many cases, the client was unable to recall whether a call had been offered or made, and they were unsure of the level of the service, or the support provided.

This limitation reduces the ability to draw conclusions about the impact of the CNS on the custody experience of First Nations peoples. It may introduce inaccuracies and reduce the reliability of the data used in understanding the impact of the CNS.

Appendix D: Requirements and support for vulnerable clients

Requirement of a responsible adult to be present, or an Independent Person

Legislation in Victoria, New South Wales, Queensland, Australian Capital Territory and the Northern Territory specifies that clients under the age of 18 are required to have an Independent Person (also known as an Interview Friend) to be present before the commencement of any questioning relating to a suspected offence. Western Australia does not have this requirement legislated but the WA Police Commissioner has issued rules and orders stating that, wherever possible, a young person who has been arrested or is being questioned should have a Responsible Adult (RA) or Independent person present.

In these jurisdictions, the responsible police officer is to make all reasonable attempts to locate a parent, guardian or RA for the client first, and if unsuccessful they are to arrange for an Independent Person to be present for the interview. There are programs offered such as the Youth Referral and Independent Person Program (YRIPP) and the Red Cross Responsible Adult Support Program (RASP) where a volunteer will go to the police facility where the client is being detained to support them in the absence of a RA. The role of the RA or Independent Person is to provide emotional support to the young person, ensure that they understand the questions during the interview, ensure that their evidence is being accurately recorded and to act as an independent account of the interview at any court proceedings.

This process of attempting to find a RA and then arranging an Independent Person has been reported as adding additional delays for clients under the age of 18 in custody. This is not a shared delay for clients over the age of 18 as there is no requirement for them to be accompanied during an interview by a RA or Independent Person.

Delays associated with youth-specific correctional facilities

Clients under the age of 18 who have been charged with an offence will be sent to the closest juvenile prison and, given the remoteness of Australia, this can result in additional delays, requiring the client to be held in custody for extended periods of time. Clients have been reported to have been processed in Kununurra and then, due to the availability of flights, have been unable to be transported to the closest juvenile prison in Perth for up to four days.

Clients under the age of 18 in Adelaide are required to be transported across to Kurlana Tapa Youth Justice Centre to undertake their virtual bail hearing with the Youth Court Judge. If clients are not granted bail, then they are held in detention facilities for extended periods of time until transported back to the watch house or police facility.

Additional supports offered to clients under the age of 18

Some ATSILS offer tailored services specifically to support clients under the age of 18. NAAJA offers an after-hours bail application support program in their Alice Springs office to assist clients in understanding the process behind a bail application and the type of information that should be supplied to the judge. This program provides clients with the best possible chance of being granted bail. This is however, limited to only clients supported in Alice Springs.

Requirement of an Independent Third Party for vulnerable clients

Legislation also specifies that if the individual (both adults and minors) has a cognitive impairment or disability then a trained Independent Third Party (ITP) is to be present instead of the Independent Party⁶⁷. ITPs are to support the person with a disability to communicate with the police officer, to advise the police officer if they do not believe that the client understands the questions being asked and to help identify if the client is becoming distressed at any stage⁶⁸. The requirement of an ITP for individuals with a cognitive impairment or disability also can contribute to additional delays for the client, requiring them to be held in police custody for extended periods of time. However, this is applicable to both adult clients and clients under the age of 18.

⁶⁷ Centre for Multicultural Youth 'Police – YRIPP' (n.d). Retrieved from <https://www.cmy.net.au/yripp/police/>.

⁶⁸ Office of the Public Advocate 'Independent Third Persons' (n.d). Retrieved from <https://www.publicadvocate.vic.gov.au/opa-volunteers/independent-third-persons>.

Appendix E: Minimum operating model requirements of the CNS

Table 37 describes the detailed steps of the minimum operating model required for the delivery of the CNS, as described by the Commonwealth Department of the Prime Minister and Cabinet in their establishment document 'Custody Notification Services - A Base to Build On'.

Table 37: Detailed steps of the minimum operating model requirements for the delivery of the CNS

Activity	Description
1. Person brought into custody	
1a. Initiation point in detention	<ul style="list-style-type: none"> The point at which an Aboriginal and Torres Strait Islander person first becomes detained in custody. For the purposes of the CNS, custody includes being in police care, supervision, or detention. It covers individuals who have been arrested and those in protective custody who have not been charged with an offence.
2. Identification and processing	
2a. Indigeneity status ascertained	<ul style="list-style-type: none"> The point of formally processing the detainee into the record system and ascertaining Indigeneity status, usually set within the police station or watch house. At this point the police officer ascertains: <ul style="list-style-type: none"> Basic information Indigenous status* <p>*It is strongly encouraged that the question "do you identify as an Aboriginal and/or Torres Strait Islander?" be included as mandatory in the legislation making use of the CNS and that it should be compulsory.</p>
3. Police notification to CNS	
3a. Notification process initiated	<ul style="list-style-type: none"> Mandatory legislation is in place enforcing police to contact the CNS, within one hour or when reasonably possible, to notify that an Indigenous person has been placed in custody.
3b. Two-step notification procedure completed	<ul style="list-style-type: none"> The CNS provider has a two-step system in place to capture telephone calls that are not answered, including both a voice-message bank and digital receipt system (i.e., email). These arrangements provide a failsafe backup to ensure all calls are answered directly and provisions made accordingly to ensure this is achieved. Models should be flexible to ensure they can adapt to the vulnerability levels of persons entering custody and their potential risk of self-harm.
4. Details of custody circumstance ascertained	
4a. Exchange between police officer and CNS operator	<ul style="list-style-type: none"> A direct exchange between the police officer and the on-call CNS operator to acknowledge receipt of the notification and commence the provision of services and support. The mandatory minimum questions the service operator is required to ask include: <ul style="list-style-type: none"> Basic details e.g., name, age, known residence, gender Why and how long the individual has been in custody, where they are held and where they were picked up If the individual will be released on bail/on summons/without charge/pending further enquiry Physical condition of the individual, including if any substance related impairments.

Activity	Description
5. CNS operator provides support to the individual in custody	
5a. Exchange protocols in place and followed	<ul style="list-style-type: none"> • The person in custody should not be in the physical presence of police officers during the conversation unless an overriding reason can be provided as to why this is not possible. • The CNS operator must also acknowledge the privacy safeguards they have in place to ensure sensitive information is not misused or disseminated without consent. • Voice-to-voice is a minimum requirement and should be superseded by more preferred options where reasonably possible. These are, in order: physical presence, and digital face-to-face application (i.e., Skype or Facetime).
5b. Preliminary legal advice	<ul style="list-style-type: none"> • The operator on-call provides preliminary legal advice directly to the person in custody. • The CNS operator must cover: <ul style="list-style-type: none"> - Verification of the questions they asked of the police regarding the circumstances of their arrest, personal details and the details of any relatives and/or friends they would like to be notified. - Preliminary outline of their rights in custody. Where the operator is not a solicitor, they will inform the person in custody that a lawyer will be contacted on their behalf to provide them with legal advice. - Explanation of what will happen next and requests for confirmation that the individual understands.
5c. Welfare assessment	<ul style="list-style-type: none"> • In addition to legal advice, the operator on-call conducts a wellbeing assessment. • The CNS operator must cover: <ul style="list-style-type: none"> - A welfare check that encompasses questions that assess both the individual's emotional wellbeing and physical condition and whether the individual has any existing medical conditions or are taking any medication. - Any additional details the individual would like to have documented and support or services they may require.
6. CNS operators identifies, and initiates services and supports as required	
6a. Operator triggers further support and services	<ul style="list-style-type: none"> • The CNS operator triggers, sources, and connects the individual in custody to a holistic, tailored catalogue of services and supports, including: <ul style="list-style-type: none"> - Contact relevant Aboriginal Legal Service (if they are not already providing the CNS) - Arranging an interpreter - Arranging medical and/or other health services - Contacting an individual's relatives and/or friends.
6b. Operator closes notification process and transfers case	<ul style="list-style-type: none"> • The CNS operator is a "front-door" to a broader service ecosystem whose role ends at clearly defined moment. • After the initial notification point, the responsibility for ongoing overview and care is transferred to a case manager. • This further ensures police processing is used as a moment to initiate long-term, post-release services that may have been previously missing, aimed at addressing the drivers of offending.

Source: Commonwealth Department of the Prime Minister and Cabinet, 2018

Appendix F: Data and document register

Table 38: Data and document register

Jurisdiction	Stakeholder	Document	Time Period
ACT	ACT Police	Indigenous arrest and offense data	31/06/2019 to 31/12/2022
NSW	NSW/ACTALS	Project Agreement (Funding Agreement)	01 August 2019 to 29 January 2021
NSW	NSW/ACTALS	IAS Performance Report	01/01/2022 to 30/06/2022
NSW	NSW/ACTALS	IAS Performance Report	01/01/2021 to 30/06/2021
NSW	NSW/ACTALS	Variation No 2 to Project Agreement	19 July 2019 to 31 January 2023 (executed 10 December 2021)
NSW	NSW/ACTALS	IAS Performance Report	01/07/2020 to 31/12/2020
NSW	NSW/ACTALS	IAS Performance Report	01/01/2020 to 30/06/2020
NSW	NSW/ACTALS	IAS Performance Report	01/07/2021 to 31/12/2021
NSW	NSW/ACTALS	IAS Performance Report	01/07/2019 to 31/12/2019
NSW	NSW/ACTALS	IAS Performance Report	01/01/2018 to 31/06/2018
NSW	NSW/ACTALS	IAS Performance Report	01/01/2019 to 31/06/2019
NSW	NSW/ACTALS	IAS Performance Report	01/07/2018 to 31/12/2018
NSW	NSW/ACTALS	IAS Performance Report	01/01/2020 to 31/12/2020
NSW	NSW/ACTALS	Updated performance data	01/01/2019 to 31/12/2022
NSW	NSW/ACTALS	Financial data	Financial year 2022/23 – year to date
NT	NAAJA	Project Schedule (Funding Agreement)	01 July 2021 to 30 June 2022
WA	ALSWA	Project Schedule (Funding Agreement)	06 July 2022 to 31 October 2023
WA	ALSWA	IAS Performance Report	01/07/2019 to 31/12/2019
WA	ALSWA	IAS Performance Report	01/01/2019 to 30/06/2019
WA	ALSWA	IAS Performance Report	01/01/2020 to 30/06/2020
WA	ALSWA	IAS Performance Report	01/07/2020 to 31/12/2020
WA	ALSWA	IAS Performance Report	01/01/2021 to 30/06/2021
WA	ALSWA	IAS Performance Report	01/07/2021 to 31/12/2021
WA	ALSWA	IAS Performance Report	01/01/2022 to 30/06/2022
WA	ALSWA	Financial data	01/07/2019 to 30/06/2022

Jurisdiction	Stakeholder	Document	Time Period
WA	WA Police	Indigenous arrest and offense data.	31/06/2019 to 31/12/2022
VIC	Southeast Australian Aboriginal Justice Services Limited	IAS Performance Report	01/01/2021 to 30/06/2021
VIC	Southeast Australian Aboriginal Justice Services Limited	IAS Performance Report	01/01/2022 to 30/06/2022
VIC	Southeast Australian Aboriginal Justice Services Limited	IAS Performance Report	01/07/2021 to 31/12/2021
VIC	Southeast Australian Aboriginal Justice Services Limited	Jan - June 2021 NIAA IAS Review Report	Jan to June 2021
VIC	Southeast Australian Aboriginal Justice Services Limited	July - Dec 2020 NIAA IAS Review Report	July to December 2020
VIC	Southeast Australian Aboriginal Justice Services Limited	Jan - June 202 NIAA IAS Review Report	Jan to Jun 2022
VIC	Southeast Australian Aboriginal Justice Services Limited	D24 Data July -Dec 21 NIAA Report Appendix	July to December 2021
VIC	NIAA - Regional Manager, Victoria and Tasmania	PROGRAMME DECISION	11/03/2020
VIC	Southeast Australian Aboriginal Justice Services Limited	Project Agreement (Funding Agreement)	02/07/2020 to 30/06/2023
VIC	Southeast Australian Aboriginal Justice Services Limited	Appendix - Custody Notification Data	July - December 2021
SA	Aboriginal Legal Rights Movement	NIAA IAS Performance Report	01/07/2021 to 31/12/2021
SA	Aboriginal Legal Rights Movement	NIAA IAS Performance Report	01/01/2022 to 30/06/2022
SA	Aboriginal Legal Rights Movement	Custody Notification Service SOUTH AUSTRALIA	None specified
SA	Aboriginal Legal Rights Movement	Project Agreement (Funding Agreement)	31 May 2021 to 30 June 2024
SA	Aboriginal Legal Rights Movement	Project Delivery Overview	None specified
SA	Aboriginal Legal Rights Movement	Financial data	Financial year 2022/23 year to date
SA	Government of South Australia	Summary Offences (Custody Notification Service) Variation Regulations 2020	2020

Jurisdiction	Stakeholder	Document	Time Period
NT	NAAJA	IAS Performance Report	Jan to June 2019
NT	NAAJA	IAS Performance Report	Jan to June 2020
NT	NAAJA	IAS Performance Report	Jan to June 2021
NT	NAAJA	IAS Performance Report	Jan to June 2022
NT	NAAJA	IAS Performance Report	July to Dec 19
NT	NAAJA	IAS Performance Report	Jul to Dec 20
NT	NAAJA	IAS Performance Report	Jul to Dec 21
NT	NAAJA	IAS Performance Report	July to Dec 22
NT	NAAJA	Project Agreement (Funding Agreement)	01 July 2021 to 30 October 2022
NT	NAAJA	CNS Manual 'live'	Version as at July 2022
NT	NAAJA	Financial data	Financial year 2022/23 year to date
NT	NT Police	Indigenous arrest and offense data	31/06/2019 to 31/12/2022

Appendix G: Survey quantitative data

G.1 ATSILS Survey

The ATSILS Survey was designed to capture insights from staff supporting the delivery of the CNS, as well as those within the broader ATSILS team. The survey was open from 27 March 2023 to 19 May 2023. A selection of survey results is presented below in table 33. *Note: Data is not available on the number of potential responses for this survey; as such, it is not possible to calculate a response rate. Percentage figures presented here are the proportion of total responses to each individual question.*

Table 33: Select ATSILS survey results

State / Territory	Responses (n=93)	%
Western Australia	32	34.4%
Queensland	15	16.1%
Northern Territory	12	12.9%
New South Wales	11	11.8%
Tasmania	11	11.8%
South Australia	7	7.5%
Victoria	5	5.4%

Rurality (Modified Monash Model)	Responses (n=93)	%
Metro	60	64.5%
Regional	20	21.5%
Rural	6	6.5%
Remote	7	7.5%

Indigenous Status	Responses (n=93)	%
No	73	78.5%
Yes, Aboriginal	20	21.5%
Yes, Torres Strait Islander	0	0.0%
Yes, Aboriginal and Torres Strait Islander	0	0.0%
Prefer not to say	0	0.0%

Is the provision of the CNS part of your role?	Responses (n=93)	%
No	39	41.9%
Yes	54	58.1%

How often does your CNS (or equivalent service) conduct a comprehensive welfare assessment of an Indigenous person entering custody?	Responses (n=90)	%
Never	5	5.6%
Rarely	2	2.2%
In some cases	16	17.8%
In most cases	35	38.9%
In every case	32	35.6%

Source: KPMG

G.1.1 Question 7

In this question, participants were asked to respond to a series of 14 statements, that reflected their views on the extent to which the CNS meets the needs of Aboriginal and Torres Strait Islander people entering custody. A 4-point Likert scale was used, responses were:

- Not at all (score = 1)
- To some extent (score = 2)
- To a good extent (score = 3)
- To an excellent extent (score = 4)

To understand the 'average' response and variation between responses, each response was given a score between 1 and 4, with means and standard deviations calculated. A higher mean score indicates participants had a more favourable view of the CNS meeting the need of individuals in custody.

Table 34: ATSILS Question 7

Q7. To what extent does the service provide...	Responses	Mean	SD
Culturally respectful service delivery?	91	3.45	0.65
Services which focus on client's individual strengths?	88	2.99	0.80
Collaborative service delivery amongst key delivery stakeholders?	90	3.10	0.85
Holistic wellbeing support for every Indigenous person entering custody?	89	3.07	0.90
Preliminary legal advice to every Indigenous person entering custody?	90	3.43	0.74

Q7. To what extent does the service provide...	Responses	Mean	SD
Appropriately tailored services for every Indigenous person entering custody?	89	3.12	0.77
Flexible services?	90	3.06	0.84
Supports that meet the presenting needs of the Indigenous person in custody?	88	3.17	0.81
Notifications to relevant legal services to initiate ongoing legal support?	90	3.51	0.69
Referrals to additional services or support where required (for example, medical support, interpreter services etc.)?	89	3.16	0.74
Timely notification to the person's relatives, guardians, carers, and/or friends, where this is appropriate?	88	3.26	0.81
Case management support, where this is appropriate?	88	2.65	0.97
Long-term post release services, where this is appropriate?	88	2.18	0.99
Able to be linked to reduced rates of recidivism and rates of incarceration?	87	2.54	0.94

Source: KPMG

The results to this question indicate that, across most measures, ATSILS staff feel that the CNS meets the needs of Aboriginal and Torres Strait Islander people to a relatively good extent.

G.1.2 Question 30

Question 30 aimed to understand the extent that CNS staff have the **time and capacity** to deliver services that meet the needs of Aboriginal and Torres Strait Islander people in police custody. Participants were asked to respond to 14 statements, via a 5-point Likert scale. Responses available were:

- Never (score = 1)
- Rarely (score = 2)
- Sometimes (score = 3)
- Usually (score = 4)
- Always (score = 5)

To understand the 'average' response and variation between responses, each response was given a score between 1 and 5, with means and standard deviations calculated. A higher mean score indicates participants felt they had the **time and capacity** to meet need of individuals in custody.

Table 35: ATSILS Question 30

Q30. To what extent do your CNS staff have the time and capacity to...	Responses	Mean	SD
Deliver culturally respectful services?	89	4.22	0.77
Deliver services which focus on client's individual strengths?	85	3.68	0.99

Q30. To what extent do your CNS staff have the time and capacity to...	Responses	Mean	SD
Foster collaborative service delivery amongst key delivery stakeholders?	86	3.56	0.98
Conduct a comprehensive welfare assessment of every Indigenous person entering custody?	87	3.79	1.18
Provide holistic wellbeing support?	85	3.54	1.02
Provide preliminary legal advice?	87	4.54	0.70
Provide appropriately tailored services?	85	3.87	0.94
Provide flexible services?	84	3.74	0.91
Provide supports that meet the presenting needs of the Indigenous person in custody?	85	3.98	0.89
Notify the relevant Aboriginal and Torres Strait Islander Legal Service (ATSILS), to initiate ongoing legal support?	86	4.51	0.89
Refer to additional services or support where required (for example, medical support, interpreter services etc.)?	86	3.83	0.96
Notify the individual's relatives, guardians, carers, and/or friends?	86	4.00	0.93
Arrange case management support?	83	3.33	1.19
Arrange long-term post release services?	84	2.75	1.24

Source: KPMG

The results to Question 30 indicate that CNS staff have the time and capacity to deliver services most of the time. The areas where they have the most time and capacity are the core areas of providing legal advice and ongoing legal support. Arranging long-term, post release service scored lowest, which may be indicative of the transactional nature of the service.

G.1.3 Question 31

Question 31 aimed to understand the extent that CNS staff have the **skills and capability** to deliver services that meet the needs of Aboriginal and Torres Strait Islander people in police custody. Participants were asked to respond to 13 statements, via a 5-point Likert scale. Responses available were:

- Never (score = 1)
- Rarely (score = 2)
- Sometimes (score = 3)
- Usually (score = 4)
- Always (score = 5)

To understand the 'average' response and variation between responses, each response was given a score between 1 and 5, with means and standard deviations calculated. A higher mean score indicates participants felt they had the **skills and capability** to meet need of individuals in custody.

Table 36: ATSILS Question 31

Q31. To what extent do your CNS staff have the skills and capability to...	Responses	Mean	SD
Deliver culturally respectful services?	84	4.48	0.67
Deliver strength-based services?	84	4.08	0.88
Foster collaborative service delivery amongst key delivery stakeholders?	83	3.84	0.89
Conduct a culturally safe welfare assessment?	84	4.13	0.95
Provide holistic wellbeing support?	84	3.82	1.02
Provide preliminary legal advice?	83	4.55	0.74
Provide appropriately tailored services?	82	3.96	0.91
Provide flexible services?	82	3.89	0.94
Notify the relevant legal service, to initiate ongoing legal support?	82	4.60	0.73
Organise additional services or support where required (for example, medical support, interpreter services etc.)?	82	4.04	0.91
Notify the person's relatives, guardians, carers, and/or friends?	81	4.31	0.82
Arrange case management support?	79	3.53	1.13
Arrange long-term post release services?	78	3.15	1.22

Source: KPMG

Similarly, to question 30, the results of question 31 indicate that ATSILS staff have the greatest skills and capability to deliver the core areas of providing legal advice and ongoing legal support. Again, arranging long-term, post release services scored lowest, which suggests that CNS may not have the knowledge to arrange long-term services, noting the complex nature of the social services sector across Australia.

G.1.4 Question 32

Question 32 aimed to understand ATSILS staff views on the extent that the CNS delivers against the main outcome measures. Participants were asked to respond to five statements, via a 5-point Likert scale. Responses available were:

- To no extent at all (score = 1)
- To some extent (score = 2)
- To a moderate extent (score = 3)
- To a great extent (score = 4)
- To a significant extent (score = 5)

To understand the 'average' response and variation between responses, each response was given a score between 1 and 5, with means and standard deviations calculated. A higher mean score indicates that participants felt the CNS had a greater impact on the outcome measure described.

Table 37: ATSILS Question 32

Q32. In your view, to what extent has your CNS contributed to....	Responses	Mean	SD
Reduced Aboriginal and Torres Strait Islander deaths whilst held in police custody?	90	4.02	1.15
Reduced harm suffered by Aboriginal and Torres Strait Islander people whilst held in police custody?	90	4.06	1.05
Protection of the legal rights of Aboriginal and Torres Strait Islander people whilst held in police custody?	90	4.29	1.00
Improved relationship between police, Indigenous communities and Aboriginal and Torres Strait Islander legal services?	89	3.62	1.04
Improved capability and capacity of police officers to understand and appropriately respond to complex, holistic health and social and emotional wellbeing needs of Indigenous people in custody?	89	3.35	1.18

Source: KPMG

The results indicate that the CNS has a greater impact on protecting the legal rights of Aboriginal and Torres Strait Islander people in police custody. This aligns with the results of previous questions, where the provision of legal services were highly rated. Reducing deaths and harm in custody also scored highly, whilst ATSILS staff felt that the CNS had a moderate impact on relationships with, and the capability and capacity of police.

G.1.5 Question 33

Question 33 allowed participants to reflect, in their view, the objectives where the CNS can most influence change. Participants were asked to rank the objectives with 1 = most influential, 5 = least influential. If in their opinion the service cannot influence one of these objectives, participants were asked to leave the space blank. To understand the 'average' response and variation between responses, each response was given a score between 1 and 5, with means and standard deviations calculated. A lower mean score indicates that participants felt the CNS had a greater ability to influence change on the outcome measure described.

Table 38: ATSILS Question 33

Q33. Please rank the following...	Responses	Mean	SD
Reduced Aboriginal and Torres Strait Islander deaths whilst held in police custody?	89	2.12	1.28
Reduced harm suffered by Aboriginal and Torres Strait Islander people whilst held in police custody?	89	2.28	0.87

Q33. Please rank the following...	Responses	Mean	SD
Protection of the legal rights of Aboriginal and Torres Strait Islander people whilst held in police custody?	89	2.19	1.02
Improved relationship between police, Indigenous communities and Aboriginal and Torres Strait Islander legal services?	87	4.20	0.82
Improved capability and capacity of police officers to understand and appropriately respond to complex, holistic health and social and emotional wellbeing needs of Indigenous people in custody?	87	4.14	1.12

Source: KPMG

The results of question 33 mostly mirrored those in question 32. However, and despite the lack of quantitative evidence to support this outcome, participants felt that the CNS had the greatest influence on reducing Aboriginal and Torres Strait Islander deaths in police custody, followed by the protection of an individual's legal rights.

G.2 Police Survey

The Police Survey was designed to capture insights from police staff supporting the delivery of the CNS. The survey was open from 27 March 2023 to 2 June 2023. A selection of survey results is presented below. *Note: Data is not available on the number of potential responses for this survey; as such, it is not possible to calculate a response rate. Percentage figures presented here are the proportion of total responses to each individual question.*

Table 39: Select Police survey results

State / Territory	Responses (n=86)	%
NSW	46	53.5%
QLD	11	12.8%
TAS	9	10.5%
NT	8	9.3%
WA	8	9.3%
ACT	2	2.3%
SA	2	2.3%

Rurality (Modified Monash Model)	Responses (n=86)	%
Metro	35	40.7%
Regional	31	36.0%
Rural	17	19.8%
Remote	3	3.5%

Indigenous Status	Responses (n=86)	%
No	72	83.7%
Yes, Aboriginal	8	9.3%
Yes, Torres Strait Islander	0	0.0%
Yes, Aboriginal and Torres Strait Islander	0	0.0%
Prefer not to say	6	7.0%

Age	Responses (n=86)	%
18 - 29 years	2	2.4%
30 – 54 years	71	83.5%
Over 55 years	12	14.1%

Gender	Responses (n=86)	%
Man	66	76.7%
Woman	11	12.8%
Other	0	0.0%
Prefer not to say	9	10.5%

Experience	Responses (n=86)	%
5 to 10 years	13	15.1%
Less than 5 years	14	16.3%
More than 10 years	59	68.6%



Source: KPMG

G.2.1 Question 4

Question 4 asked police to reflect on their experiences in collaborating with the CNS (or equivalent service) in their jurisdiction. Participants were asked to respond to 14 statements, via a 5 point Likert scale. Responses were:

- All of the time (score = 5)
- Most of the time (score = 4)
- Some of the time (score = 3)
- A little of the time (score = 2)
- None of the time (score = 1)

To understand the 'average' response and variation between responses, each response was given a score between 1 and 5, with means and standard deviations calculated. A higher mean score indicates participants felt they had a better experience in dealing with the CNS.

Table 40: Police Question 4

Q4. The CNS (or equivalent service) in my jurisdiction is generally...	Responses	Mean	SD
Well-staffed with operators who can facilitate culturally appropriate and strength-based service delivery.	86	3.23	1.17
Easy to access, collaborate with and build positive relationships with.	83	3.00	1.20
Able to provide clear expectations in terms of the role of police officers in the CNS model.	83	2.99	1.31
Able to de-escalate conflict through timely involvement of Aboriginal Liaison Officers or other intermediaries between Indigenous people and police.	83	2.14	1.23
Able to improve relationships between police and Indigenous people held in custody through appropriate involvement of Aboriginal Liaison Officers or other intermediaries between Indigenous people and police.	83	2.17	1.23
Able to conduct a comprehensive and culturally safe welfare assessment.	83	2.53	1.25
Able to provide holistic support, including preliminary legal advice and social and emotional wellbeing support.	83	2.78	1.27
Able to organise additional services or support where required to the individual or their family (for example, medical support, interpreter services etc.).	83	2.13	1.21
Able to meet the presenting needs of the individual Indigenous person in custody.	83	2.61	1.22
Able to organise ongoing legal support where required.	83	3.34	1.28

Q4. The CNS (or equivalent service) in my jurisdiction is generally...	Responses	Mean	SD
Able to notify the individual's relatives, guardians, carers, and/or friends.	82	2.33	1.24
Able to arrange case management support.	82	2.39	1.19
Able to arrange long-term post release services.	82	2.10	1.18
Able to be linked to reduced rates of recidivism and rates of incarceration.	81	1.65	0.88

G.2.2 Question 22

Question 22 aimed to understand the extent to which police believe that CNS operators and support staff have the **time and capacity** to deliver services under the CNS. Participants were asked to respond to 11 statements via a 6-point Likert scale. As part of this answer set, respondents were also able to choose a 'Can't say / unsure' option. Responses available were:

- Always (score = 5)
- Usually (score = 4)
- Sometimes (score = 3)
- Rarely (score = 2)
- Never (score = 1)
- Can't say/ unsure (score = 0)

Higher scores indicate that police believe that the CNS staff have the time and capacity to provide supports.

Table 41: Police Question 22

Q22. Do you believe that CNS staff have the time and capacity to...	Responses	Mean	SD
Deliver culturally respectful services?	85	2.54	1.66
Deliver strength-based services?	85	2.01	1.51
Foster collaborative service delivery amongst key delivery stakeholders?	85	2.07	1.39
Conduct a comprehensive and culturally safe welfare assessment?	85	2.26	1.38
Provide holistic wellbeing support, including preliminary legal advice and wellbeing support?	85	2.36	1.51
Provide appropriately tailored and flexible services?	85	1.82	1.35
Notify the relevant legal service, to initiate ongoing legal support?	85	2.61	1.87

Q22. Do you believe that CNS staff have the time and capacity to...	Responses	Mean	SD
Organise additional services or support where required (for example, medical support, interpreter services etc.)?	85	2.01	1.58
Notify the person's relatives, guardians, carers, and/or friends?	84	2.00	1.41
Arrange case management support?	84	1.67	1.50
Arrange long-term post release services?	81	1.23	1.38

G.2.3 Question 24

Question 24 aimed to understand police views on the impact of the CNS, and if the CNS has contributed to beneficial outcomes for Aboriginal and Torres Strait Islander people. Participants were asked to respond to six statements, via a 5-point Likert scale. Responses available were:

- To no extent at all (score = 1)
- To some extent (score = 2)
- To a moderate extent (score = 3)
- To a great extent (score = 4)
- To a significant extent (score = 5)

Higher scores indicate that police believe that the CNS contributes more to the individual outcome measures.

Table 42: Police Question 24

Q24. In your view, to what extent has the service in your jurisdiction contributed to...	Responses	Mean	SD
A reduction in Aboriginal and Torres Strait Islander deaths whilst held in police custody?	84	1.98	1.31
A reduction in harm suffered by Aboriginal and Torres Strait Islander people whilst held in police custody?	83	1.93	1.20
Protection of the legal rights of Aboriginal and Torres Strait Islander people whilst held in police custody?	83	2.72	1.27
Improved relationship between police, Indigenous communities and Aboriginal and Torres Strait Islander legal services?	83	1.95	1.15
Improved capacity police officers to understand and appropriately respond to complex, holistic health and social and emotional wellbeing needs of Indigenous people in custody?	83	1.98	1.09

Q24. In your view, to what extent has the service in your jurisdiction contributed to...	Responses	Mean	SD
Improved capability of police officers to understand and appropriately respond to complex, holistic health and social and emotional wellbeing needs of Indigenous people in custody?	82	1.90	1.10

G.3 Client Survey

The client survey was designed to capture data on people who have come into contact with the CNS and to understand their lived experience of being in police custody. The survey was open from 27 March 2023 to 19 May 2023. Minimal quantitative data was captured, however demographic data from participants is presented below in Table 43.

Table 43: Select client survey results

State / Territory	Responses (n=80)	%			
QLD	48	60.0%			
NT	20	25.0%			
NSW	7	8.8%			
WA	3	3.8%			
VIC	2	2.5%			
ACT	0	0.0%			
TAS	0	0.0%			
SA	0	0.0%			
Rurality (Modified Monash Model)	Responses (n=80)	%			
Metro	31	38.8%			
Regional	31	38.8%			
Rural	12	15.0%			
Remote	6	7.5%			
Age	Responses (n=80)	%			
18 - 29 years	34	42.5%			
30 – 54 years	40	50.0%			
Over 55 years	6	7.5%			
Gender	Responses (n=80)	%			
Brotherboy	1	1.3%			
Man	55	68.8%			
Prefer not to say	1	1.3%			
Sistergirl	2	2.5%			
Woman	21	26.3%			
Disability	Responses (n=80)	%			
No	60	75.0%			
Yes	20	25.0%			
Age	First Custody	Second Custody	Third Custody	Fourth custody	Fifth Custody
0 – 9 years	2	-	-	-	-
10 – 14 years	17	10	6	5	3
15 – 17 years	13	12	10	7	7

State / Territory		Responses (n=80)		%	
18 – 29 years	35	29	23	18	11
30 – 54 years	13	13	13	15	18
Total	80	64	52	45	39
%	100.0%	80.0%	65.0%	56.3%	48.7%

Appendix H: Financial data

Financial data was requested from ATSILs to cover FY2019/20 to FY2021/22, to align with activity data. Where financial data was not available, or not provided for the required years, data was sourced from publicly available Annual Reports.

Expense allocations

Where data was not available to determine the costs incurred by ATSILs in delivering the CNS, a proportional method was used. Costs were allocated to the CNS by determining the level of funding for the CNS as a proportion of total ATSIL funding. This proportion was then used to allocate costs.

Insufficient data

- Sufficient data was not available for South Australia
- Data has been received for FY2022/23, with further data requested.
- The FY2021/22 Annual Report is not publicly available.
- Sufficient data was not available the Northern Territory
- Data has been received for FY2022/23, with further data requested.
- The FY2021/22 Annual Report is not publicly available, with the most recently available Annual Report being 2016/17.

H.1 Victoria

Publicly available annual report data has been used and is included below in Table 44.

Table 44: VALS financial data for FY 20/21 and FY 21/22

	FY20/21	FY21/22
Total grant income (total income for Vic)	\$13,668,383	\$27,393,706
Expenses	\$10,380,218	\$12,574,837
CNS Funding	\$1,205,000	\$750,000
% of expenses allocated to CNS funding	8.82%	2.74%
Value of expenses allocated to CNS funding	\$915,116	\$344,281
Calls received Activity Data	11,879	11,836
Cost per call received	\$77.04	\$29.09
Funding per call received	\$101.44	\$63.37
Difference	\$24.40	\$34.28
Call abandonment rate	0.00%	0.00%

H.2 Western Australia

Table 45: ALSWA financial data for FY 19/20, FY 20/21 and FY 21/22

	FY19/20	FY20/21	FY21/22
Total Funding	\$1,128,778	\$1,423,657	\$1,314,469
CNS related costs	\$1,128,778	\$1,423,657	\$1,314,469
Calls received Activity Data	24,422	29,203	30,685
Cost per call received	\$46.22	\$48.75	\$42.84
Funding per call received	\$46.22	\$48.75	\$42.84
Difference	\$0.00	\$0.00	\$0.00
Call abandonment rate	23.55%	12.80%	11.91%
Average Staff	12	15	13.5

H.3 New South Wales

Publicly available annual report data has been used. Data has been provided for the 2022/23 year in Table 46 below.

Table 46: NSW/ACT ALS financial data for FY 19/20, FY 20/21 and FY 21/22

	FY19/20	FY20/21	FY21/22
Total grant income	\$26,451,723	\$29,543,370	\$32,037,647
Expenses	\$25,852,982	\$27,655,411	\$30,686,337
CNS Funding	\$1,050,000	\$1,000,000	\$1,000,000
% of expenses allocated to CNS funding	3.97%	3.38%	3.12%
Value of expenses allocated to CNS funding	\$1,026,233	\$936,095	\$957,821
Calls received Activity Data	20,590	29,925	25,054
Cost per call received	\$49.84	\$31.28	\$38.23
Funding per call received	\$51.00	\$33.42	\$39.91
Difference	\$1.15	\$2.14	\$1.68
Call abandonment rate	0.09%	1.35%	33.88%

Appendix I: Police data

Data presented in the following tables represent police data on Indigenous arrests and offences committed.

I.1 Australian Capital Territory

Table 47: ACT Police data

	2018	2019	2020	2021	2022
Number of arrests	775	824	912	801	910
Distinct individuals	451	464	516	482	550
Arrests per person	1.72	1.78	1.77	1.66	1.65
Offences per person	3.29	3.52	3.58	3.17	3.43
Offence Type					
Homicide	1	0	0	1	2
Assault	113	102	149	159	223
Sexual offences	2	4	20	4	12
Other offences against the person	16	24	55	31	32
Robbery	9	22	14	16	27
Burglary	47	41	38	38	60
Stolen Motor vehicle	59	52	61	69	96
Theft (excl motor vehicle theft)	43	74	62	49	78
Property damage	59	51	74	66	89
Other offences against property	49	64	69	80	58
Environmental Offences	0	0	1	0	0
Government security/operations	15	21	23	25	24
Justice procedures	504	615	619	473	596
Firearms and weapons	43	50	60	56	80
Other offences against good order	41	74	69	47	58
Drug offences	40	38	22	26	22
Traffic offences	294	281	349	225	279
Lodged for Intoxication	144	113	145	141	137
Other offences n.e.c.	7	9	18	21	13
Total	1486	1635	1848	1527	1886

I.2 Northern Territory

Table 48: NT Police data

	2019	2020	2021	2022
Number of arrests	-	-	-	-
Distinct individuals	3,819	3,859	3,793	4,116
Arrests per person	-	-	-	-
Offences per person	3.72	3.67	3.74	3.80
Offence Type				
Abduction, Harassment and Other Offences Against the Person	78	105	105	112
Acts Intended to Cause Injury	2,184	2,614	2,773	3,081
Dangerous Or Negligent Acts Endangering Persons	369	434	361	424
Fraud, Deception and Related Offences	39	36	50	51
Homicide and Related Offences	6	15	14	18
Illicit Drug Offences	308	241	219	195
Inadequate Data Provided	961	980	835	759
Miscellaneous Offences	12	26	11	13
Offences Against Justice Procedures, Government Security and Government Operations	3,622	3,762	4,077	4,446
Prohibited And Regulated Weapons and Explosives Offences	651	593	638	694
Property Damage and Environmental Pollution	812	730	840	1,031
Public Order Offences	717	830	805	943
Robbery, Extortion and Related Offences	118	115	171	247
Sexual Assault and Related Offences	112	121	154	124
Theft And Related Offences	1,015	663	890	1,202
Traffic And Vehicle Regulatory Offences	2,573	2,467	1,646	1,568
Unlawful Entry with Intent/Burglary, Break and Enter	613	448	592	737
Total	14,190	14,180	14,181	15,645

I.3 Western Australia

Table 49: WA Police data

	2019*	2020	2021	2022
Number of arrests	-	-	-	-
Distinct individuals	4,925	11,842	11,727	12,298
Arrests per person	-	-	-	-
Offences per person	1.50	2.14	2.18	2.31
Offence Type				
Accompany Police - Section 28 CIA	20	83	102	92
Detention - Service of Dispersal Notice				3
Drunk Detainee	25	86	92	81
Form 6	238	730	879	1331
Illegal Immigrant		2	1	
Mental Health	10	46	31	31
Mental Health – Section 156				4
Mental Health – Section 157				1
Person in Care	146	553	386	140
Prisoner Transfer	19	124	139	213
Remand	228	904	1035	1195
Suspect Charged	3283	11831	12241	14243
Suspect Uncharged	2064	6477	6420	6812
Under Requirement	318	1334	1348	1367
Warrant - Arrest (Bail Act)	940	2827	2604	2693
Warrant - Arrest 1st Instance	29	87	64	60
Warrant - Extradition		3	5	2
Warrant - Return to Prison	49	177	169	135
Warrant of Commitment	34	69	26	35
Total	7403	25333	25542	28438

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