



## Attachment A

The Department of Home Affairs (the Department) welcomes the Australian Human Rights Commission (the Commission) *Inspections of Australia's immigration detention facilities 2019* report.

The Department values the Commission's oversight of Australia's immigration detention system and the Commission's acknowledgement of good practices identified.

The Department's response to recommendations in each category of the report are provided below. A summary of the Department's agreement, or otherwise, to recommendations is provided at [Table 1](#).

### **Children (Recommendations 1 – 4)**

The Department welcomes the Commission's acknowledgment that the number of children in closed immigration detention has decreased markedly since 2012, and community-based alternatives to closed detention are used for children, except in very rare circumstances. The Commission has made four recommendations with regard to children, of these, the Department agrees with recommendations two and three, and disagrees with recommendations one and four.

As the Commission has observed, the current number of children in detention is significantly lower than at some other times over the past three decades. At 30 September 2020, fewer than 5 children were accommodated in Alternative Places of Detention (APOD), down from a peak of 1,992 in July 2013. The monthly immigration detention statistics published on the Department's website include all children residing in closed immigration detention facilities (including APODs).

A range of care, welfare and support arrangements are in place to provide for the needs of children and young people in immigration detention including age-appropriate health, education, recreational, and cultural services. The Department acknowledges that education is vital for healthy child development. It is recognised that schooling provides opportunities to build social networks and to develop knowledge and skills to facilitate a child's transition to adulthood.

The Department has agreements in place with all state and territory departments of education (except Western Australia) so that all school-aged children (those aged between five and 17 years), regardless of their immigration status, disability or learning needs, can access education commensurate with Australian community standards and relevant legislation for the state or territory in which they are accommodated while their immigration status is being resolved. In Western Australia, the Department has a standing agreement with a range of non-government education providers.

For non-school aged children who are in APODs, the Department facilitates access to a range of age-appropriate developmental and educational programs, such as pre-school, kinder groups or playgroups.

In exceptional circumstances, the Department may determine by way of risk assessment that it is not appropriate for a detained child or young person to attend off-site schooling (for example, those whose visas have been cancelled on character grounds). In such cases the Department offers alternative schooling arrangements in the Immigration Detention Facility (IDF) with qualified educators and/or other culturally-appropriate learning facilitators.

It is Departmental policy that the use of force, including the use of restraints, must not be used on a minor unless an officer believes, on reasonable grounds, that it is essential to safely transport or protect the welfare and/or security of the minor or another person. The Department maintains that whilst there is always a presumption against the use of force, there may be circumstances where it is lawful, reasonable and appropriate to use force, including restraints, on a person under 18 years of age.

Under existing detention operational policy, the pre-planned use of force, including application of restraints, may only be applied to a detainee, including a person under 18 years of age, where an individual assessment of their risk shows that it is warranted. The relevant Australian Border Force (ABF) Detention Superintendent is to have provided written approval for such force to be used in the particular circumstances and prior to that force being applied.

It is Australian Government policy that children will only be accommodated in immigration detention as a last resort, for the shortest possible time and in the least restrictive arrangements. Children and families are almost always accommodated in APODs which provide a range of flexible options that meet their specific needs, and to minimise the institutional features of the detention environment. APODs are discrete complexes or locations quite separate to IDFs, with distinct service provision models and teams to reinforce the delineation between the IDF and APOD operating environments.

### **Health Care (Recommendations 5 – 13)**

The Commission has made nine recommendations in relation to health care. Of these, the Department agrees in principle with recommendations eight and ten, and disagrees with remaining recommendations between recommendations five and 13.

The Department values the Commission's acknowledgement of the challenges of providing mental health care in the immigration detention environment. The Department is taking action to improve the delivery of mental health services, and in early 2020, commissioned a holistic review of mental health services to detainees in the immigration detention network including processes set out in the Procedural Instruction (PI) such as Supportive Monitoring and Engagement.

The Department ensures that all people in immigration detention have access to quality health care, delivered by experienced and appropriately qualified personnel. Mental health care and support is provided by general practitioners, mental health nurses, psychologists, counsellors and psychiatrists on a visiting basis, or through mental health clinics where available, or the use of tele-health facilities or external appointments.

Health care services for all detainees, including medical transferees from Nauru and Papua New Guinea, is comparable to those available to the Australian community through the Australian public health system. Services are provided through on-site primary and mental health clinics with referral to allied and specialist health providers, as required, and acute care is provided by hospitals. A detainee can seek a second medical opinion in circumstances where a different treating Health Service Provider Practitioner considers that a second opinion is clinically warranted, or the detainee agrees to meet the costs.

The Department ensures medical treatment and/or assessment for all medical transferees from Nauru and Papua New Guinea via the public health system. The Department's onshore Health Service Provider, International Health and Medical Services, is required to undertake a Health Induction Assessment (HIA) of each detainee within 72 hours of their arrival in immigration detention. This process applies to all transitory persons with the exception of those who decline all or part of the HIA and those who are admitted to hospital prior to an HIA. The HIA is undertaken by a general practitioner and a nurse.

As at 11 November 2020, there have been 142 incidences of refusal of an induction chest x-ray and/or pathology, medical, and/or mental health treatment by medical transferees.

The Department welcomes the Commission's observation that the availability of specialist drug and alcohol counselling and peer support programs has increased. On 2 March 2019, the Department published its Drug and Alcohol Support Services PI for immigration detention. The PI provides guidance on the Department's drug and alcohol policy and relevant programs to assist detainees in IDFs and subject to a Residence Determination in decreasing dependencies on substances such as drugs and alcohol, and minimising associated harms.

The PI includes drug and alcohol treatment services such as withdrawal management, nicotine withdrawal and Opiate Substitute Treatment Programs. The PI also outlines a variety of support services including counselling, peer to peer support, care plans addressing drug and/or alcohol related matters and brief intervention, health promotion and education. The Health Service Provider and Facilities and Detainee Service Provider (FDSP) can also refer detainees to online resources and applications.

The Department also maintains that, as per its Placements and Transfers PI published on 5 May 2019, a detainee's medical needs, including physical, cognitive and mental health, are given priority as part of the transfer and placement decision processes which occur prior to any transfer to another IDF. Upon transfer, a clinical handover is provided to the receiving IDF to ensure continuity of care. The handover addresses the detainee's clinical history, any significant health issues, treatment, care plans and medication history, as well as any ongoing health needs and treatments.

The Department's policies and procedures for transporting and escorting detainees to offsite medical appointments require the FDSP to assess any security related issues and discuss mitigation strategies with the medical provider. Escorting officers may only remain in the room during a medical appointment with the consent of the medical practitioner and detainee. This ensures that detainees are afforded maximum privacy and confidentiality. At all times though, the escorting officers are required to maintain visibility of the treatment room or the detainee.

#### **Physical Safety (Recommendation 14)**

The Commission has made one recommendation in relation to physical safety. The Department disagrees with the recommendation and maintains its expectation that any concerns expressed by detainees regarding their physical safety are responded to on a case-by-case basis in line with our responsibility to maintain the safety and security of detainees, staff and visitors in the IDF.

The FDSP informs detainees of their right to complain to the police without hindrance or fear of reprisal in the case of a suspected criminal offence. Detention operational policy and the FDSP contract articulate incident reporting requirements and protocols for engaging with police, including referring suspected or allegations of criminal activity/conduct to the police for investigation.

The FDSP is required to refer any suspected or alleged criminal matter to the police at a detainee's request. Acknowledging the Commission's findings, the Department undertakes to refer the matter to the FDSP for further investigation.

#### **Placements and Escorts (Recommendations 15 – 20)**

The Commission has made six recommendations in relation to placements and escorts. With regard to recommendations 15, 17, 19 and 20, the Department agrees in principle with the recommendations and maintains that existing policies and procedures meet the intent of the recommendations. The Department disagrees with recommendations 16 and 18.

The Department values the Commission's acknowledgement that capacity issues make it more challenging to locate all people in IDFs close to their ordinary place of residence.

The Department maintains its previous advice that in determining the placement of an individual, family and community links are considered as a priority. However, the broader immigration detention network is also considered as part of the transfer and placement decision process. There is finite capacity across the national network and there is often an operational need to transfer detainees to rebalance the network and ensure the stability of the immigration detention network.

The Department also welcomes the Commission's acknowledgment that there is a reduction in the overall use of restraints since previous inspections in 2017 and 2018, and notes that the Department's existing policies and procedures articulate that a new individualised risk assessment be completed for each planned use of force including the use of restraints. Under existing detention operational policy, the pre-planned use of force, including application of restraints, may only be applied to a detainee where an individual assessment of their risk shows that it is warranted and the relevant ABF Detention Superintendent has provided written approval for such force to be used in the particular circumstances and prior to that force being applied.

Where there is a planned use of force or use of restraints, the Health Service Provider is required to complete a 'Request - Risk Assessment for planned Use of Force' form which considers both the mental, trauma and torture history and physical conditions of detainees. If a detainee has any pre-existing condition that may be exacerbated by use of force, then the Health Service Provider will advise the FDSP. The Health Service Provider makes reasonable efforts to assist in reducing potential risk for detainees, to work collaboratively with the FDSP, whilst prioritising clinical care and maintaining appropriate clinical confidentiality. There are also current risk assessment processes in place that enable the Health Service Provider to document on the existing form, any impacts on a detainee's health of non-attendance at a medical appointment.

In some circumstances, it may be lawful, reasonable and appropriate to use force on detainees who have a physical disability and/or are frail and/or elderly. Whenever force is used on detainees, officers take all reasonable precautionary measures to ensure the safety of the detainee and that all actions taken are appropriate to the circumstances of that detainee. Where there is medical evidence that supports a detainee's mobility being severely limited, there will be a presumption against the use of restraints.

A high proportion of detainees located at Yongah Hill Immigration Detention Centre (IDC) have a high or extreme risk rating. The assignment of high and extreme risk ratings has a significant operational impact and it is not practical to facilitate regular transport and escort activity for the purpose of visits at Perth IDC. This is due to a number of factors including but not limited to an increased risk of escape. Detainees accommodated within an IDF have access to a range of communication facilities, including telephones, computers and internet, and are also able to utilise personal mobile phones without restriction.

#### **Programs, Activities and Excursions (Recommendations 21 – 22)**

The Commission has made two recommendations in relation to programs and activities, and excursions. The Department agrees in principle with recommendation 22 and maintains that existing policies and procedures meet the intent of the recommendation. The Department disagrees with recommendation 21.

The Department notes the Commission's observation that all IDFs offer educational activities, sport and fitness, games, art and crafts, and religious services, and the identified improvement in some IDFs. The Department also welcomes the positive feedback from detainees in relation to programs and activities generally, and the satisfaction in relation to access to religious services and the availability of spaces for prayer.

Current departmental policy already provides that the Commander of Detention Operations may approve multiple, regular, low risk offsite excursions to take place monthly (for example, library visits and religious excursions). All excursions are subject to operational priorities and requirements, and are subject to risk management processes. The Commission acknowledges that restrictions on excursions may be reasonable in some circumstances.

The Department will continue to consider how access to non-award educational opportunities for detainees may be enhanced in future. Programs and activities are conducted in accordance with the site specific schedules that are reviewed and approved by the ABF each month. The programs and activities arrangements at all locations are subject to continuous and ongoing review by the FDSP and the ABF for appropriateness, relevance, practicability and quality. Programs and activities schedules change from month to month in response to all relevant factors, including COVID-19, social distancing and other concerns and requirements as appropriate.

### **Hotel APODs (Recommendations 23 – 27)**

The Department welcomes the Commission's finding that most people interviewed reported that they are satisfied with the accommodation areas at hotel APODs. The Commission has made five recommendations with regard to hotel APODs. The Department agrees with recommendations 25 to 27, and action has been undertaken that aligns with these recommendations. The Department disagrees with recommendations 23 and 24.

#### Melbourne APOD

Since the outbreak of COVID-19 there has been a review of the availability of shared spaces at the Melbourne APOD. Noting the increased requirements for social distancing, there has been a net increase in the number of activity spaces, both inside the facility and outdoors. Two outdoor areas are available. In one outdoor area, the hotel has installed a temporary multi-purpose activity area and basketball court for the exclusive use of the detainees accommodated at the Melbourne APOD. This area has an almost full size basketball court, moveable soccer goals and is also used for outdoor fitness activities and walking activities. This space is available every day between 8:00am to 5:00pm to all detainees in groups. There is a second outdoor area available 24 hours a day, which is predominantly used for accessing fresh air.

Detainees also have access to the gym to exercise between 7:00am to 7:00pm. Where possible, outdoor activities are also made available using existing APOD amenities, for example BBQs.

#### Brisbane APOD

Since the outbreak of COVID-19, arrangements have been put in place to give detainees at the Brisbane APOD exclusive access to all elements of the hotel. This includes access to outdoor areas, and has allowed for accommodation rooms to be converted into programs and activities spaces and classrooms. With the current restrictions on social distancing, having extra rooms to facilitate programs and activities ensures that detainees accommodated at the Brisbane APOD are able to attend structured activities while still ensuring compliance regarding the maximum occupancy of each room.

The Department notes that at the time of the Commission's inspection there was a curfew from 7:00pm to 7:00am applied to the Walmsley building at Brisbane APOD. The Department can advise that in late 2019 detainees were able to access the common rooms in Walmsley Tower 24/7 with an escort. Detainees' movements were escorted at that time as the public still accessed parts of Central Apartments and this factored into the risk mitigation and security assessments.

Since March 2020 detainee accommodation has expanded to now include three complexes - Lockerbie, Walmsley and Central Apartments. For operational reasons, and to ensure the safety and security of detainees, a curfew from 10:00pm to 7:00am was in place prior to September 2020 for movement between the towers, but no curfew enforced within the accommodation areas. In early September 2020, the curfew was reviewed and is now 12:00am to 7:00am.



Since the outbreak of COVID-19, the Brisbane APOD has ceased transfers to Brisbane Immigration Transit Accommodation (ITA), however prior to this, the Department undertook a review and reduced the screening procedures for people in the Brisbane APOD travelling to attend activities at the Brisbane ITA. The revised arrangement was consistent with processes at the Melbourne APOD and involved two screenings, the first prior to departure from the APOD, and the second prior to departure from the ITA. Screening and searches are conducted with sensitivity and by officers with the appropriate training and certification.

The Department values the Commission's acknowledgement that the ABF has faced challenges to find appropriate low-security accommodation for a significant number of transferees from Nauru and PNG to Australia at short notice. The Commission also observed that the use of the hotel APODs in Brisbane and Melbourne may have initially been intended as a short-term measure, and that it may not have been known how long people would be detained there from the outset. All detainees at the Brisbane and Melbourne APODs were transferred to Australia temporarily from a regional processing country. Those who have completed the purpose of their temporary transfer (e.g. medical treatment) can return to either PNG or Nauru, while others are eligible for resettlement in the United States of America. Those who have been found to not be refugees can return to their home countries.

APODs are suitable for those detainees where less restrictive placement is appropriate. There is a finite capacity across the national network and there is often an operational need to place detainees in hotel APODs.

#### **Physical conditions of detention (Recommendations 28 – 33)**

The Commission has made six recommendations regarding the physical conditions of detention. The Department agrees with recommendation 31, and action has been undertaken that aligns with this recommendation. The Department also agrees in principle with recommendation 32, and maintains that existing policies meet the intent of this recommendation. The Department disagrees with the remaining recommendations between recommendations 28 and 33.

The Commission has acknowledged that strategies have been put in place to provide increased access to outdoor space and facilities for exercise, activities and recreation for people detained in medium and high-security compounds. Detainees have access to welfare support and age-appropriate educational, recreational, sporting and religious programs and activities, including access to outdoor recreational activities. Programs and activities are delivered at all IDFs across the network, and must be consistent in quality and quantity, irrespective of locality. Programs and activity schedules are tailored to the detainee cohort at each facility and reflect, as far as possible, the individual needs of the detainees as outlined in Individual Management Plans.

The Commission has also acknowledged that the controlled movement model aims to ensure the safety of facility staff and people in immigration detention and is regularly reviewed. The FDSP is required to ensure that the personnel levels at IDFs deliver the services in accordance with the contract and ensure they utilise appropriate qualified staff.

The Department and the FDSP continually review the appropriate arrangements around detainee welfare and management, including infrastructure. In 2015, the Department undertook an internal audit to assess the end-to-end management of the delivery of onshore immigration detention services against contractual requirements. The audit found that the Department was required to manage the changing nature of cohorts accommodated in the Immigration Detention Network which now include a significant proportion of detainees rated under the Security Risk Assessment Tool as High or Extreme.

Major capital works were undertaken at the Dargo compound to provide improved security infrastructure which offered a safer environment for detainees and detention staff. The Dargo compound in all other ways is the same as other compounds in the Melbourne ITA North facility. Opaque fencing is in place for the protection of the detainees in that compound, many of whom have significant criminal backgrounds that may make them a target for other detainees.

The Commission acknowledges that there may be some circumstances in which there is a need to use separate accommodation for people in immigration detention (such as where a person poses a serious risk of harm to others). The Department wishes to clarify that high-care accommodation refers to an environment where a higher degree of supervision and engagement of the detainee can be maintained. While IDFs may have accommodation areas that are suited for and routinely used as high-care accommodation, the concept of high-care accommodation is not limited to a specified location. In some cases, the transfer of detainees to another IDF with suitable accommodation may be necessary if the capacity of an IDF to manage a detainee within that facility is exceeded.

The Department has a framework in place for regular detention reviews, escalation and referral points to ensure that people are detained in the most appropriate placement to manage their health and welfare, and to manage the resolution of their immigration status. The Department also maintains that detention review mechanisms regularly consider the necessity of detention and where appropriate, identify alternate means of detention or the grant of a visa. Each detainee's case is reviewed monthly by a Status Resolution Officer (SRO) to ensure that emerging vulnerabilities or barriers to case progression are identified and referred for action. In addition, the SRO also considers whether ongoing detention remains appropriate and refers relevant cases for further action. Monthly detention review committees provide formal executive level oversight of the placement and status resolution progress of each immigration detainee.

Where a detainee may only be released from immigration detention through Ministerial Intervention powers, their case may be referred for assessment against the Ministerial Intervention guidelines. The Minister's Intervention powers are non-delegable and non-compellable, meaning only a portfolio Minister can exercise these powers and the Ministers are under no obligation to consider exercising or to exercise these powers in any case. Only cases which meet the Minister's guidelines are referred for the Minister's consideration.

### **Visits (Recommendations 34 – 35)**

The Department welcomes the positive feedback about the visits program. The Commission has made two recommendations related to visits, the Department agrees in principle with recommendation 34 and disagrees with recommendation 35.

The Department and FDSP are committed to maintaining a safe and secure immigration detention environment. For this reason all visits to IDFs must be supervised, and conducted in sight of FDSP officers, but where possible, out of hearing.

The conditions of entry to IDFs are provided to all visitors prior to entry, and advise that all visitors must behave in an appropriate manner that is respectful of others and which will not upset or disturb people in immigration detention or other visitors. It also includes that visitors must not encourage or engage in behaviour that may adversely affect the safety, good order, peace or security of the detention centre. As a result, appropriate physical contact is permitted during visits, provided it is acceptable and reasonable behaviour.

The Department imposes conditions on the entry of all visitors to IDFs to maintain the safety of all visitors, detainees and staff by ensuring that the Department has accurate information about the identity of individuals visiting its facilities, and to increase the ability to address contraband entering IDFs.

Requiring 100 points of identity documentation ensures that visitors entering an IDF are who they say they are, and can be properly assessed for any risks they may pose including contraband. This requirement to submit identification for every visit is necessary because the process cannot reasonably rely on individual staff member's knowledge of individual visitors.

It is not intended that the Community Support Sector Visitor Program (CSSVP) pilot will be rolled out to individual visitors at this time. The CSSVP pilot was conducted at Villawood IDC and the MITA in recognition of the specific administrative burden placed on some structured groups from the community support sector, who frequently applied to visit large numbers of detainees on a regular basis. To be eligible to participate in the pilot, the community groups were required to have a public presence and deliver a specific and measurable support service to detainees, such as English language tuition. The CSSVP pilot was not intended to circumvent the visitor application process, conditions of entry or existing visitor policy.

**Length of detention and status resolution (Recommendations 36 – 41)**

The Commission made six recommendations related to length of detention and status resolution. The Department agrees with recommendation 38 and action has been taken that aligns with this recommendation. The Department also agrees in part with recommendation 39, and maintains that existing policies and procedures meet the intent of this recommendation. The Department disagrees with the remaining recommendations between recommendation 36 and 41.

The Department has incorporated the recommended breakdown into its reporting program. These changes were first published in the Department's Immigration Detention and Community Statistics Summary 31 August 2020 report and will be featured in all subsequent publications of this report.

The Department welcomes the positive feedback detainees provided to the Commission about their SRO, and maintains that detainees are afforded every opportunity to engage with their SRO throughout their immigration detention. SROs identify the initial status resolution service level and type of intervention required to achieve a timely immigration outcome for each person in immigration detention. SROs review all detainees' cases monthly which includes discussing the case directly with the detainee and as part of this, the level of intervention will change depending on the detainee's circumstances. Detainees are also able to request to meet or discuss their case with their SRO at any time. The Department notes the COVID-19 pandemic has impacted the ability for SROs to conduct face-to-face interviews but engagement with detainees is still maintained through other means such as telephone and email.

The role of a SRO is primarily focussed on resolving immigration status and, where possible reducing time in immigration detention. The *Detention Capability Review 2016* and the *Management Initiated Review into Status Resolution 2016* redefined and broadened the SRO role to focus on resolving immigration status and managing individuals while their status is being resolved. SROs provide holistic support to detainees to ensure they have access to appropriate support services and escalate cases where required, enabling them to resolve their own status and address any issues that may arise.

It is the responsibility of the detainee to seek legal advice and assistance if they wish to do so. SROs conduct an initial interview with a detainee within 24 hours of their detention. As part of the interview, the detainee is advised they can arrange and access a migration agent or legal representation for assistance. The Department ensures all detainees have access to reasonable facilities for obtaining legal advice, including access to computers, internet, meeting rooms and telephones. Detainees are able to appoint a legal representative and/or migration agent at any time to assist with their status resolution pathway.



The length of a person's detention can be influenced by a number of factors including the complexity of the case and whether there are character, security or identity concerns. In some cases, a detainee's immigration status can be resolved through departmental processes, including removal from Australia or the grant of a visa. In other cases, Ministerial Intervention may be required to enable management of a detainee within the community.

The Australian Government's position is that indefinite or otherwise arbitrary immigration detention is not acceptable. The lengths and conditions of immigration detention, including the appropriateness of both the accommodation and services provided, are subject to regular review by senior officers of the Department, the Commonwealth Ombudsman and the Commission. These reviews consider the lawfulness and appropriateness of a person's detention, their detention arrangements and placement, health and welfare, and other matters relevant to their ongoing detention and case resolution.

Under the Act, detention is not limited by a set timeframe, rather, detention remains lawful in particular circumstances and until, for example, the person is granted a visa or is removed from Australia. The timeframe associated with either of these events is dependent upon a number of factors, including identity determination, developments in country information, and the complexity of processing due to individual circumstances relating to health, character or security matters. These assessments are completed as expeditiously as possible to facilitate the shortest possible timeframe for detaining people in IDFs.

The Commonwealth Ombudsman is required by the Act to review immigration detention arrangements for each person detained for more than two years, and then every six months if they remain in immigration detention. The Australian Government is committed to ensuring that all people in immigration detention are not subjected to harsh conditions, are treated fairly and reasonably within the law, are provided with a safe and secure environment, and are only in immigration detention for the shortest practicable time.

#### **Alternatives to 'closed detention' (Recommendations 42 – 44)**

The Commission has made three recommendations relating to alternatives to detention in an IDF. The Department agrees in part with recommendation 43 and disagrees with recommendations 42 and 44.

Only cases which meet the Minister's guidelines are referred for Ministerial consideration. The Minister is under no obligation to exercise or to consider exercising the intervention power in respect of any case referred to the Minister for consideration.

Ministerial Intervention policy does not provide for automatic assessment, or assessment at certain intervals, against the Minister's Intervention guidelines or referral of cases under Ministerial Intervention powers. As mentioned above, the Department conducts formal monthly reviews of efforts to resolve the status of persons held in detention. The purpose of these reviews is to ensure that:

- where a person is managed in a held detention environment, that the detention remains lawful and reasonable
- the location of detention remains appropriate to their individual circumstances and conducive to status resolution
- regardless of the location the person is being held, their case is progressing and departmental activity is underway to reach an outcome, and
- appropriate services are being provided in an effective and cost efficient manner.

Through these reviews, if it is identified that detention is no longer appropriate to an individual's circumstances, or if there are identified vulnerabilities, their case may be referred for consideration against the Minister's intervention guidelines.

The Department conducts an initial risk assessment on all persons in held immigration detention, including those transferred from Nauru and PNG, through the Department's Community Protection Assessment Tool (CPAT). The CPAT assesses the level of risk a person poses to the community and is generally reviewed every three to six months and/or when there is a significant change in an individual's circumstance. The risk assessments identified in the CPAT are considered when initiating a referral to the Minister to consider alternative community-based arrangements. In referring submissions for ministerial consideration, the Department outlines any potential risks (both in respect of an individual's ongoing detention and possible placement in the community), and provides appropriate options for the Minister to consider, including advice on the conditions that could be applied in an individual's case.

Conditions applied to Residence Determinations made, or Bridging visas granted by the Minister, are stipulated in the Act and *Migration Regulations 1994*. The Minister is unable to apply conditions outside of what the Act and the Regulations allow. These conditions include strict requirements that broadly cover reporting, not engaging in criminal behaviour, not breaching a Code of Behaviour, not becoming involved in activities that are disruptive to the Australian community, not participating in violence or threatening harm to the Australian community, and notifying the Department of updated address and contact details. Detainees placed into community detention under Residence Determination arrangements are also required to reside at their specified address.

**Table 1 - Summary of Department's response to recommendations**

Recommendation number	Department's response
1	Disagree
2	Agree
3	Agree
4	Disagree
5	Disagree
6	Disagree
7	Disagree
8	Agree in principle
9	Disagree
10	Agree in principle
11	Disagree
12	Disagree
13	Disagree
14	Disagree
15	Agree in principle
16	Disagree
17	Agree in principle
18	Disagree
19	Agree in principle
20	Agree in principle
21	Disagree
22	Agree in principle
23	Disagree
24	Disagree
25	Agree
26	Agree
27	Agree
28	Disagree
29	Disagree
30	Disagree
31	Agree
32	Agree in principle
33	Disagree
34	Agree in principle
35	Disagree
36	Disagree
37	Disagree
38	Agree
39	Agree in part
40	Disagree
41	Disagree
42	Disagree
43	Agree in part
44	Disagree