

Outcare WA - New Director Paul McMullan

Paul McMullan, CEO



Paul qualified as a Social Worker/ Probation Officer in the UK. He has a Masters Degree in Crime, Deviance and Social Policy. He has a long senior management career in the UK Probation Service, working in Merseyside, Greater Manchester and South Yorkshire. Paul came to Australia in 2006 to join the Senior Management Team at Acacia Prison (Serco). He became Director of Acacia Prison in 2010 until 2015 and was appointed CEO of Outcare in June 2015.

Throughout his career, Paul has been committed to the rehabilitation of offenders and has extensive experience in managing dangerous offenders in the community within a multi-agency setting. He has managed to combine a full time career with part-time lecturing in criminology both in the UK and WA. Paul has a particular interest in staff development and organisational culture. A key area of concern for him is the critical impact of social policy on individuals and families caught up in the criminal justice system.

Outcare is a community based organisation which has, for the last 50 years, delivered throughcare Services in Perth WA. Outcare has a proven evidence based approach.

- We address the factors known to contribute to offending behaviour.
- We support individuals to build their capacity to desist from crime.
- We partner agencies to deliver outcomes.
- We companion people throughout their journey.
- We rehabilitate.

Our approach reflects our belief that effective rehabilitation can restore, transform and add value for the whole community. We know that each individual has a unique set of environmental and personal circumstances that shape their attitudes, needs and experience – so rehabilitation has to be tailored to each person to work effectively.

Everything we do is based on a case-managed throughcare model. We address the risks and needs of the individual client from the point of their contact with the criminal justice system, until they are settled into a law-abiding life. Throughout this we recognise the range of factors that influences offending behaviour and focus on rehabilitation.

Our holistic and individualised approach looks at aspects like their health, emotional, educational, financial, psychosocial or behavioural needs as well as those of their family. We know that rehabilitation

benefits everyone – the ex-offender, their family and our community.

At every point in their journey we treat people with respect. Offenders have obligations to respect other people's entitlements to wellbeing and freedom and they are entitled to the same considerations in the rehabilitation and reintegration process. While we work to create opportunities for people to change their lives, the change is their responsibility.

In March 2013 Outcare were invited to partner with a number of agencies in two unique and exciting opportunities in crime prevention and criminal justice pilots. The START Court (Specialist Treatment and Referral Team) commenced operations and was uniquely placed as the only sole full-time mental health court in Australia, whilst the LINKS (Linking Services) Program operates out of the Children's Court premises; both the LINKS and START programs are funded by the Mental Health Commission WA. Both programs work in close partnership with the Department of Health, Department of Corrective Services, Department of the Attorney General, Department of Police Persecution to reduce offending by addressing the participant's mental health and psychosocial needs through assessment, referrals and interventions.

Outcare has Community Support Coordinators who work within the two pilot programs for adult (START) and youth (LINKS) offenders. The Community Support Coordinators provide assertive case management to the participants for approximately six months and aim to address their criminogenic and psychosocial needs. These needs may include accommodation, employment, education and training, drug and alcohol support, family support, physical health and community access and involvement.

The model aims to build trust in this disadvantaged and vulnerable client group by having a dedicated multidisciplinary team, who provide a wrap-around service in addressing the participants' needs in a holistic and responsive manner. Participants who are accepted onto the programs remain under judicial supervision from the Magistrate. Participant's needs are improved through referral and assertive case management and coordination, with a specific focus on their criminogenic and mental health needs. If these needs are addressed effectively they reduce recidivism and improve the participant's quality of life. The participants have access to brokerage funds which are used to support and enhance their wellbeing; this funding can be used for a range of needs including



accommodation, training and education, mental health, and social inclusion activities.

Community Support Coordinators routinely collect qualitative and quantitative data that is submitted to the Mental Health Commission monthly. The data focuses on the amount of referrals, the number of clients and their needs before entering the program compared to when they exit. Feedback from a recent review indicated that the LINKS Program's one stop shop approach was the 'best program that [they] had seen'. The trust built between the participants and Coordinators means their needs are being appropriately identified and met. Not only does the program have a positive impact on the participant's lives and the Court system especially as the Courts are able to effectively divert offenders away from the criminal justice system and into recovery focused treatment. As both programs are in a pilot phase they are continuing to develop and evolve regularly. Both programs hope to secure permanent funding so they can continue to fill an important and under resourced gap within the criminal justice system. An exciting experience for all involved and we await the formal evaluation.

Case Study

A 14 year old youth was referred by his lawyer to the LINKS program and after a mental health assessment the Community Support Coordinator began to build a rapport. At first, he was difficult to engage and failed to attend appointments; the Coordinator liaised with the participant's mother and built a relationship with her. The mother suffered from mental health issues and was admitted to hospital, leaving the participant at home with no electricity, food or money and not knowing where she was. The Coordinator used the brokerage funds to ensure the participant had food and the basic necessities. The participant's mother was located and he was able to visit her in hospital. The fact that the Coordinator was able to assist the participant in such a way meant he started to trust and engage with the Coordinator.

After many case conferences the Coordinator negotiated for the participant to return to school. The Coordinator took him to school every day and

supported him intensely for about a month. The participant was referred to another service that could provide longer term support; the participant developed a good relationship with the new case worker and the Coordinator was able to slowly disengage. Quite soon after, the participant decided to move to Kalgoorlie with his father. With assistance, the trip was planned and the participant linked with a youth mental health service in Kalgoorlie. He continues to attend this service regularly and is receiving relevant follow up work.

Case Study

40 year old male participant with a diagnosis of schizophrenia and problematic alcohol misuse was accepted onto the START Program. He had experienced long-term homelessness and had untreated mental health needs.

At the first meeting with the Coordinator the participant was referred to an accommodation service, where the participant resided for several months. The Coordinator liaised with the accommodation worker to assist with referrals to long-term accommodation services.

Through the program the participant was linked with a community mental health service where he attended regularly for a monthly depot injection and appointments with the psychiatrist. The participant was supported to attend regular appointments with his Community Corrections Officer and comply with his Community Order. He was linked with alcohol counselling, which he engaged with well and found very beneficial. With the assistance of the Coordinator that participant was referred to a community agency which provided regular therapeutic activities including gardening, art and working with animals. The participant was linked with an employment agency, where he was actively looking for work. His mental health stabilised, alcohol intake decreased and his wellbeing improved. Upon closure from Outcare, the participant had been successful with his application to long-term supported accommodation. He remained involved with the community mental health service, his counsellor and Community Corrections Officer.

The Role of Neighbourhood Watch Programs in Anti Terrorism Strategies

Ingrid Stonhill, Chief Executive Officer, Neighbourhood Watch Australasia



30 years ago Neighbourhood Watch (NHW) programs were introduced into Australian Society. The original promotion of the program saw the first "formal" participation of the community at large playing a role in crime prevention. In essence it was an acknowledgement on several fronts, community members

acknowledging police officers, whilst enforcers of the law, were also people who lived amongst the community. But most importantly, was the perceived acknowledgement by law enforcement agencies, that community members had a responsibility and valuable contribution to make in keeping themselves and their neighbours safe, whilst working alongside police.



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