



BAIL			
Bail granted on all charges	Yes / NA	Yes / No	
All bail conditions met (e.g. passport surrendered to Police)	Yes / NA	Yes / NA	
Prisoner details correct on bail undertaking	Yes / NA	Yes / No	
Bail undertaking signed by authorized delegate	Yes / NA	Yes / No	
Copy of bail undertaking forwarded to court	Yes / NA	Yes / No	
Bail undertaking scanned and attached on IOMS	Yes / NA	Yes / No	

PAROLE			
Induction for court ordered parole completed	Yes / NA	re-release Yes / NA	
² New court ordered parole order created in 'draft'	Yes / NA	Yes / NA	
Amended COP (e.g. conditions) received from Parole Board	Yes / NA	Yes / NA	
New board ordered parole order received from Parole Board and signed by prisoner	Yes / NA	Yes / NA	
Amended BOP (e.g. TNS or conditions) received from Parole Board and signed by prisoner	Yes / NA	Yes / NA	
Parole order expiry date correct (as per SCAL details)	Yes / NA	Yes / NA	
Federal Parole Order entered on IOMS as per order and emailed to paroleremissions@aq.gov.au	Yes / NA	Yes / NA	
Recognizance Order entered on IOMS as per order and emailed to paroleremissions@aq.gov.au	Yes / NA	Yes / NA	
Reporting Notice prepared and forwarded to Probation and Parole Office	Yes / NA	Yes / NA	
Signed Parole Order attached to IOMS	Yes / NA	Yes / NA	
Parole Order attached to discharge certificate	Yes / NA	deleted 9/7/14 Yes / No	

ACTION OFFICERS			
Completing Officer:	Position:	Signature:	Date:
Checking Officer: <i>M. Jody</i>	Position: <i>SIC</i>	Signature: <i>MJ</i>	Date: <i>14/7/14</i>
Completing Officer	Position:	Signature:	Date:
Checking Officer:	Position:	Signature:	Date:

¹Travel Permit **must not** be made a period more than 7 days if prisoner is released on BOP or **may be** made for a period of more than 7 days if prisoner is released on COP (refer Section 212 (1) and (2) of CSA 2006). Regional Manager or centre General Manager are delegated to approve travel permit.

²COP order is signed by prisoner at first report to the Probation and Parole District Office.

Parole order expiry date amended	Yes / <input checked="" type="radio"/> NA	✓
Parole Board email notification sent	Yes / <input checked="" type="radio"/> NA	✓
Outstanding court matters: <ul style="list-style-type: none"> IJIS notifications checked Contact Summaries – Court matters checked Case Note – Court contacts checked Criminal History e.g., bail on upcoming matter 	Yes / <input checked="" type="radio"/> NA Yes / <input checked="" type="radio"/> NA Yes / <input checked="" type="radio"/> NA Yes / <input checked="" type="radio"/> NA	✓ <i>Remand Warrant.</i>
Sentence Flags (e.g., SVO, SMAC) updated	Yes / <input checked="" type="radio"/> NA	✓
Sentence Indicators (e.g., Sex or Federal offence) updated	Yes / <input checked="" type="radio"/> NA	✓
ANCOR notification sent	Yes / <input checked="" type="radio"/> NA	✓
Cumulative orders linked on IOMS	Yes / <input checked="" type="radio"/> NA	✓
Variants (e.g., PSC, TNS, s. 108) correctly applied	Yes / <input checked="" type="radio"/> NA	✓
Variant comment section completed	Yes / <input checked="" type="radio"/> NA	✓
Section 108 correctly calculated and applied (discharge only)	Yes / <input checked="" type="radio"/> NA	✓
Release and discharge correctly calculated	Yes / <input checked="" type="radio"/> No	✓
Events Manager updated: <ul style="list-style-type: none"> Release date Discharge date Suspension expiry date Court appearance date Sentencing transcripts Clarification of court order follow up date Federal Parole Report date (4 months before parole) 	Yes / <input checked="" type="radio"/> NA Yes / <input checked="" type="radio"/> NA Yes / <input checked="" type="radio"/> NA Yes / <input checked="" type="radio"/> NA Yes / <input checked="" type="radio"/> NA Yes / <input checked="" type="radio"/> NA	✓ <i>now 24/7/13. TSJ mc. exc.</i>
*Manual Diary updated: <ul style="list-style-type: none"> Release date Discharge date Suspension expiry date Court appearance date Sentencing transcripts Clarification of court order follow up date Federal Parole Report date (4 months before parole) 	Yes / <input checked="" type="radio"/> NA Yes / <input checked="" type="radio"/> NA Yes / <input checked="" type="radio"/> NA Yes / <input checked="" type="radio"/> NA Yes / <input checked="" type="radio"/> NA Yes / <input checked="" type="radio"/> NA	✓
Sentencing transcript checked	Yes / No / <input checked="" type="radio"/> NA	
ROR completed	Yes / <input checked="" type="radio"/> NA	
*ROR email notification sent (assessment request)	Yes / <input checked="" type="radio"/> NA	
*SCAL entered on SCAL Check Template	Yes / <input checked="" type="radio"/> NA	
*Case Note – Sentencing Details entered on IOMS (i.e., date copy of checked SCAL was forwarded to prisoner)	Yes / <input checked="" type="radio"/> NA	
SCAL confirmed by Assistant Manager, SAU	Yes / <input checked="" type="radio"/> NA	
Other	Yes / <input checked="" type="radio"/> NA	

COMPLETION OFFICER

Name: <i>KBISHOP</i>	Position: <i>A02 SPO</i>	Signature: <i>KBishop</i>	Date: <i>18/7/13</i>
Name: <i>M. Dooly</i>	Position: <i>A04 SPL</i>	Signature: <i>MD</i>	Date: <i>18/7/13</i>

*If the sentence calculation is completed remotely this action must be completed by on-site sentence management staff. On-site actions must also be checked by on-site staff and recorded accordingly.

N. Johnson

AISPC

22/7/13

Outstanding parole board matters	Yes / <input checked="" type="radio"/> NA	
Parole order expiry date amended	Yes / <input checked="" type="radio"/> NA	
Parole Board email notification sent	Yes / <input checked="" type="radio"/> NA	
Outstanding court matters: <ul style="list-style-type: none"> IJIS notifications checked Contact Summaries – Court matters checked Case Note – Court contacts checked Criminal History e.g., bail on upcoming matter 	Yes / <input checked="" type="radio"/> NA Yes / <input checked="" type="radio"/> NA Yes / <input checked="" type="radio"/> NA Yes / <input checked="" type="radio"/> NA	
Sentence Flags (e.g., SVO, SMAC) updated	Yes / <input checked="" type="radio"/> NA	
Sentence Indicators (e.g., Sex or Federal offence) updated	Yes / <input checked="" type="radio"/> NA	
ANCOR notification emailed for registered prisoners CPOR@police.qld.gov.au	Yes / <input checked="" type="radio"/> NA	
Cumulative orders linked on IOMS	Yes / <input checked="" type="radio"/> NA	
Variants (e.g., PSC, TNS, s. 108) correctly applied	<input checked="" type="radio"/> Yes / NA <i>PSC</i>	
Variant comment section completed	<input checked="" type="radio"/> Yes / NA	
Section 108 correctly calculated and applied (discharge only)	Yes / <input checked="" type="radio"/> NA	
Release and discharge correctly calculated	<input checked="" type="radio"/> Yes / No	
Events Manager updated: <ul style="list-style-type: none"> Release date Discharge date Suspension expiry date Court appearance date Sentencing transcripts Clarification of court order follow up date Federal Parole Report date (4 months before parole) 	<input checked="" type="radio"/> Yes / <input checked="" type="radio"/> NA <input checked="" type="radio"/> Yes / <input checked="" type="radio"/> NA <input checked="" type="radio"/> Yes / <input checked="" type="radio"/> NA <input checked="" type="radio"/> Yes / <input checked="" type="radio"/> NA <input checked="" type="radio"/> Yes / <input checked="" type="radio"/> NA <input checked="" type="radio"/> Yes / <input checked="" type="radio"/> NA <input checked="" type="radio"/> Yes / <input checked="" type="radio"/> NA	
*Manual Diary updated: <ul style="list-style-type: none"> Release date Discharge date Suspension expiry date Court appearance date Sentencing transcripts Clarification of court order follow up date Federal Parole Report date (4 months before parole) 	<input checked="" type="radio"/> Yes / <input checked="" type="radio"/> NA <input checked="" type="radio"/> Yes / <input checked="" type="radio"/> NA <input checked="" type="radio"/> Yes / <input checked="" type="radio"/> NA <input checked="" type="radio"/> Yes / <input checked="" type="radio"/> NA <input checked="" type="radio"/> Yes / <input checked="" type="radio"/> NA <input checked="" type="radio"/> Yes / <input checked="" type="radio"/> NA	
Commonwealth ODPP notified (paroleremissions@ag.gov.au)	Yes / <input checked="" type="radio"/> NA	
Sentencing transcript checked	Yes / No / <input checked="" type="radio"/> NA <i>NR</i>	
ROR completed	<input checked="" type="radio"/> Yes / NA <i>12</i>	
*ROR email notification sent (assessment request)	Yes / <input checked="" type="radio"/> NA <i>COP 6/9/13</i>	
*SCAL entered on SCAL Check Template	<input checked="" type="radio"/> Yes / NA	
*Case Note – Sentencing Details entered on IOMS (i.e. date copy of checked SCAL was forwarded to prisoner)	<input checked="" type="radio"/> Yes / NA	
SCAL confirmed by Assistant Manager, SAU	<input checked="" type="radio"/> Yes / NA	
Other	Yes / <input checked="" type="radio"/> NA	

COMPLETION OFFICER			
Name: <i>M. Vaughan</i>	Position: <i>SPA</i>	Signature: <i>[Signature]</i>	Date: <i>19/8/13</i>
Name: <i>M. Dadey</i>	Position: <i>SPL</i>	Signature: <i>[Signature]</i>	Date: <i>22/8/13</i>

*If the sentence calculation is completed remotely this action must be completed by on-site sentence management staff. On-site actions must also be checked by on-site staff and recorded accordingly.

200

PROPER OFFICER

Date: 01/08/2013

Place: TOWNSVILLE



[Handwritten signature]



PROPER OFFICER

Date: 31/07/2013

Place: TOWNSVILLE

RECEIVED
02 AUG 2013
BY: _____

[Handwritten signature]
PROPER OFFICER
Date: 29/07/2013
Place: TOWNSVILLE



[Handwritten signature]

PROPER OFFICER

Date: 26/07/2013

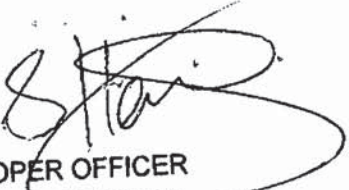
Place: TOWNSVILLE

207




PROPER OFFICER
Date: 24/07/2013
Place: TOWNSVILLE





PROPER OFFICER
Date: 26/07/2013
Place: TOWNSVILLE



PAROLE DOCUMENTS

Doc ID: 55ff9758-d5a4-4e53-806e-a639ca6b6ce9

B/c General Manager
Sentence Management Services
Townsville Correctional Centre (Male)

For your information and attention. Please arrange for a copy of this correspondence to be provided to the prisoner.

Please note the Board's decision as outlined above. The jurisdiction of the Board relates only to this suspension and does not include any instrument issued by the judiciary or any other authority.

For and on behalf of the Central and Northern Queensland Regional Parole Board

Doc ID: b054c1d9-1699-4fd5-8b0b-44059000c514

B/c General Manager
Sentence Management Services
Townsville Correctional Centre (Male)

For your information and attention. Please arrange for a copy of this correspondence to be provided to the prisoner. A signed copy of the Suspension Order is attached in IOMS.

For and on behalf of the Central and Northern Queensland Regional Parole Board

11 JUN 2014

RECEIVED
- 6 JUN 2014

BY: _____

11 JUN 2014

RECEIVED
- 6 JUN 2014

BY:.....

Doc ID: 25b74743-1a08-437a-9280-6f653cc654ae

B/c General Manager
Sentence Management Services
Townsville Correctional Centre (Male)

For your information and attention. Please arrange for a copy of this correspondence to be provided to the prisoner recording the date this occurs. A signed copy of the suspension order is attached on IOMS.

It would be appreciated if assistance could be provided to the prisoner to develop written Mental Health and Medical Treatment Plans.

Please forward a copy of the Home Assessment Report and Mental Health and Medical Treatment Plans to the Board, for its consideration, as soon as they become available.

For and on behalf of the Central and Northern Queensland Regional Parole Board

Doc ID: 25b74743-1a08-437a-9280-6f653cc654ae

B/c District Manager
Townsville Probation and Parole District Office

For your information.

For and on behalf of the Central and Northern Queensland Regional Parole Board

SENTENCE/ORDER
MANAGEMENT

Assessment Outcome:

260

Classification Recommendation:

TBA

Low Custody Consideration:

—

Assessment Conducted By; List Panel Members:

Names:

K. Richards,

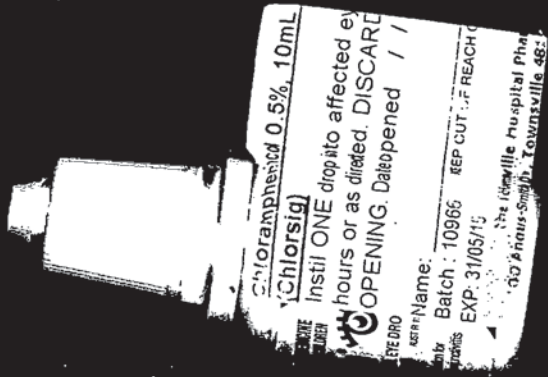
Date Assessment Conducted:

28/5/14

Position of Delegated Decision Maker:

Date:

ENTERED





Referral to Alcohol, Tobacco and Other Drug Services (ATODS)

(Affix identification label here)

URN:

Family name:

Given name(s):

FOR ATODS USE ONLY

Address:

Date of birth:

Sex: M F I

CLINICAL INFORMATION/REASON FOR REFERRAL

Mental State

If mental state scores at moderate to high mental distress call 1300 MHCALL or other relevant Mental Health Service before ATODS

Mood Behaviour: Settled Depressed Elevated
 Agitated Aggressive

Psychotic Features: No Yes
 If 'Yes', Delusions Hallucinations Command hallucinations
 Paranoia

Current risk of self harm: Low Medium High

Details including previous harm to self:

Current risk of harm to others: Low Medium High

Details including previous harm to others, child protection and DV concerns:

Relevant investigations, assessments and results

BBV LFT Other relevant pathology Alcohol AUDIT

Current Medications

- Doses
- Start date if known

Probation and Parole only

Client recommended for: Intake assessment

Date: _____

Kickstart

Date of group: _____


as recommended during the assessment phase.

DO NOT WRITE IN THIS BINDING MARGIN

PRESCRIPTION ONLY MEDICINE
KEEP OUT OF REACH OF CHILDREN.

Lexam 10
escitalopram 10 mg tablets


Each tablet contains escitalopram oxalate equivalent to escitalopram 10 mg

 **28 tablets** AUST R 210837

546017

Aspen Pharmacy Ltd,
34-36 Charles Street,
St Leonards,
NSW 2055 Australia
Made in South Africa

Do not use if blister seal is broken. Store below 25°C.
Free from gluten, lactose and sucrose.
Usage: As directed by your doctor.
In Australia, Consumer Medicine Information is available from
your pharmacist or www.aspenmed.com.au

 Please
recycle

Assessment Outcome:

Classification Recommendation: TBA

Low Custody Consideration:

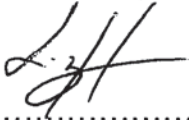
Assessment Conducted By; List Panel Members:

Names: Cathy Neal.
Jul. 30-9-13

Date Assessment Conducted:

Position of Delegated Decision Maker:

Date:



.....
Louise Hetherington
Senior Case Manager
Townsville District Office
Date: 25/09/2013



.....
Silvi Baretta
Supervisor
Townsville District Office
Date: 25/09/2013

All bail conditions met (e.g., passport surrendered to Police)	Yes / <input checked="" type="radio"/> NA	Yes / NA	No of Charges
Prisoner details correct on bail undertaking	Yes / <input checked="" type="radio"/> NA	Yes / No	
Bail undertaking signed by authorized delegate	Yes / <input checked="" type="radio"/> NA	Yes / No	
Copy of bail undertaking forwarded to court	Yes / <input checked="" type="radio"/> NA	Yes / No	
Bail undertaking scanned and attached on IOMS	Yes / <input checked="" type="radio"/> NA	Yes / No	

PAROLE			
Induction for court ordered parole completed	<input checked="" type="radio"/> Yes / NA	<input checked="" type="radio"/> Yes / NA	
² New court ordered parole order created in 'draft'	<input checked="" type="radio"/> Yes / NA	<input checked="" type="radio"/> Yes / NA	
Amended COP (e.g., conditions) received from Parole Board	Yes / <input checked="" type="radio"/> NA	Yes / <input checked="" type="radio"/> NA	
New board ordered parole order received from Parole Board and signed by prisoner	Yes / <input checked="" type="radio"/> NA	Yes / <input checked="" type="radio"/> NA	
Amended BOP (e.g., TNS or conditions) received from Parole Board and signed by prisoner	Yes / <input checked="" type="radio"/> NA	Yes / <input checked="" type="radio"/> NA	
Parole order expiry date correct (as per SCAL details)	<input checked="" type="radio"/> Yes / NA 11/7/14	<input checked="" type="radio"/> Yes / NA	
Federal Parole Order entered on IOMS as per order and emailed to paroleremissions@ag.gov.au	Yes / <input checked="" type="radio"/> NA	Yes / <input checked="" type="radio"/> NA	
Recognizance Order entered on IOMS as per order and emailed to paroleremissions@ag.gov.au	Yes / <input checked="" type="radio"/> NA	Yes / <input checked="" type="radio"/> NA	
Reporting Notice prepared and forwarded to Probation and Parole Office	<input checked="" type="radio"/> Yes / NA Inducted by P.P.	<input checked="" type="radio"/> Yes / NA	
Signed Parole Order attached to IOMS	Yes / <input checked="" type="radio"/> NA	Yes / <input checked="" type="radio"/> NA	
Parole Order attached to discharge certificate	<input checked="" type="radio"/> Yes / NA Cop.	<input checked="" type="radio"/> Yes / No	

ACTION OFFICERS			
Completing Officer: N. JOHNSON	Position: A1SPC	Signature: <i>N. Johnson</i>	Date: 4/9/13
Checking Officer: J. ROY	Position: A1A1	Signature: <i>J. Roy</i>	Date: 5/9/13
Completing Officer: K. BISHOP	Position: SPO	Signature: <i>KB</i>	Date: 14/9/13
Checking Officer:	Position:	Signature:	Date:

¹Travel Permit **must not** be made a period more than 7 days if prisoner is released on BOP or **may be** made for a period of more than 7 days if prisoner is released on COP (refer Section 212 (1) and (2) of CSA 2006). Regional Manager or centre General Manager are delegated to approve travel permit.

²COP order is signed by prisoner at first report to the Probation and Parole District Office.

Assessment Outcome:

Classification Recommendation: *High*

Low Custody Consideration:

Assessment Conducted By; List Panel Members:

Names: *M. Dooley*

Dooley
16/7/13

Date Assessment Conducted:

Position of Delegated Decision Maker:

Date: