SUPREME COURT OF QUEENSLAND

CITATION:	*Attorney-General (Qld) v Penningson* [2018] QSC 263
PARTIES:	**ATTORNEY-GENERAL FOR THE STATE OF QUEENSLAND** (applicant) **v** **PAIS WANMAN PENNINGSON** (respondent)
FILE NO:	No 2031 of 2016
DIVISION:	Trial Division
PROCEEDING:	Application
DELIVERED ON:	16 November 2018 Orders made 5 November 2018
DELIVERED AT:	Brisbane
HEARING DATE:	5 November 2018
JUDGE:	Davis J
ORDER:	**Orders made 5 November 2018:** **THE COURT, being satisfied to the requisite standard that the respondent, Pais Wanman Penningson, is a serious danger to the community in the absence of an order pursuant to Division 3 of the *Dangerous Prisoners (Sexual Offenders) Act* 2003 (the Act), ORDERS THAT:** **1. The decision made by Burns J on 24 June 2016 that the respondent is a serious danger to the community in the absence of an order pursuant to Division 3 of the Act, be affirmed; and** **2. The respondent continue to be subject to the continuing detention order made on 24 June 2016.**
CATCHWORDS:	CRIMINAL LAW – SENTENCE – SENTENCING ORDERS – ORDERS AND DECLARATIONS RELATING TO SERIOUS OR VIOLENT OFFENDERS OR DANGEROUS SEXUAL OFFENDERS – DANGEROUS SEXUAL OFFENDER – GENERALLY – where the respondent has been detained on a continuing detention order for two years – where at the first annual review one year ago the continuing detention order was affirmed – whether the respondent continues to be a serious danger to the community – whether the respondent should continue to be subject to the continuing detention order

	Dangerous Prisoners (Sexual Offenders) Act 2003 (Qld) s 13, s 17, s 30
	Attorney-General (Qld) v Francis [2007] 1 Qd R 396, followed *Attorney-General (Qld) v Penningson* [2016] QSC 146, cited *Attorney-General (Qld) v Penningson* (Unreported, Dalton J, 30 October 2017), cited *Attorney-General for the State of Queensland v Lawrence* [2017] QSC 61, cited *Fardon v Attorney-General (Qld)* (2004) 223 CLR 575, followed
COUNSEL:	P Clohessy for the applicant A E Loode for the respondent
SOLICITORS:	G R Cooper, Crown Solicitor for the applicant Legal Aid Queensland for the respondent

[1] The respondent is the subject of a continuing detention order made under s 13(5) of the *Dangerous Prisoners (Sexual Offenders) Act* 2003 (Qld) ("the Act").

[2] Continuing detention orders must be reviewed.[1] The present application sought such review. On 5 November 2018, I made the following orders:

> THE COURT, being satisfied to the requisite standard that the respondent, Pais Wanman Penningson, is a serious danger to the community in the absence of an order pursuant to Division 3 of the *Dangerous Prisoners (Sexual Offenders) Act* 2003 (the Act), ORDERS THAT:
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> 1. The decision made by Burns J on 24 June 2016 that the respondent is a serious danger to the community in the absence of an order pursuant to Division 3 of the Act, be affirmed; and
>
> 2. The respondent continue to be subject to the continuing detention order made on 24 June 2016.

[3] After making those orders I indicated that I would publish reasons at a later time. Such a course does not offend s 17 of the Act.[2] These are the reasons.

Background

[4] The respondent was born on 29 January 1996. He is of Papua New Guinean and Torres Strait Islander heritage.

[5] The respondent had some criminal history as a juvenile to which I need not refer. Relevant though, are offences which occurred on 18 November 2012 when the

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1 *Dangerous Prisoners (Sexual Offenders) Act* 2003 (Qld) Part 3.

2 *Attorney-General for the State of Queensland v Lawrence* [2017] QSC 61 at [7]–[11].

respondent was 16 years of age and offences committed on 23 May 2013 when he was 17 years of age.

[6] There were in fact two alleged episodes involving the respondent on 18 November 2012. The first involved the respondent allegedly sexually assaulting a young woman who was jogging. The respondent was charged but the prosecution did not proceed. The second occurred at about 11 pm. The respondent broke into a house while armed with a knife. In the house was the female complainant and her daughter. He threatened the complainant and said "you're going to have sex with me". After a struggle, he fled.

[7] On 23 May 2013, the respondent arranged to meet with a sex worker. The respondent and the sex worker were travelling in her vehicle when he produced a knife and threatened to cut her throat.

[8] In relation to the incident on 18 November 2012, the respondent was charged with entering a dwelling with intent to assault with intent to rape, deprivation of liberty and common assault. He pleaded guilty in the Children's Court at Townsville on 12 May 2014, but by force of the relevant legislation he was sentenced as an adult. He was sentenced to a total of 18 months imprisonment with a declaration that pre-sentence custody of 355 days was time served on that sentence. A parole eligibility date of 22 May 2014 was fixed.

[9] In relation to the incident on 23 May 2013, the respondent was charged with attempted robbery whilst armed and with personal violence, unlawful entry of a motor vehicle and assault/obstruct police. That last offence arose out of the circumstances of his arrest. He pleaded guilty to the offences in the District Court at Townsville on 12 May 2014 and was sentenced to a period of 12 months imprisonment cumulative on the sentences imposed in relation to the offences of 18 November 2012. A parole eligibility date of 23 May 2014 was set.[3]

[10] The respondent was not granted parole. His full-time release date was 22 May 2016. On 18 May 2016, he was sentenced to 3 months imprisonment, which was suspended after 4 days for an operational period of 6 months, for an offence of assaulting a corrective services officer.

[11] An application was made by the Attorney-General for orders under the Act. As the proceedings could not be finalised by the time Mr Penningson was due to be released, an order was made on 20 May 2016 under s 9A(2) of the Act for his detention pending completion of the proceedings.

[12] On 24 June 2016, Burns J made an order for the continuing detention of the respondent. His Honour delivered detailed and comprehensive reasons,[4] and it is unnecessary to repeat his Honour's findings. It is sufficient to record the following:

1. Three psychiatrists examined the respondent: Dr Grant, Dr Sundin and Dr Harden.

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3 The history and particulars of the offending appear in more detail in *Attorney-General (Qld) v Penningson* [2016] QSC 146 at [10]–[19].

4 *Attorney-General (Qld) v Penningson* [2016] QSC 146.

2. Dr Grant was of the opinion that the respondent was suffering an Anti-Social Personality Disorder with possible Borderline Traits.[5] Dr Grant thought that the respondent's risk of future sexual violence was "moderate to high",[6] and was concerned that he might be developing a more serious mental illness.[7] Dr Grant thought that the respondent needed treatment and considered that release on supervision without treatment was unlikely to be successful.[8]

3. Dr Sundin was of the opinion that the respondent was suffering an Anti-Social Personality Disorder with significant psychopathic traits together with Polysubstance Use Disorder.[9] She confirmed that the respondent also suffered from grand mal epilepsy.[10] She was of the view that the risk of sexually violent re-offending should be regarded as "high".[11] Dr Sundin was also of the same view as Dr Grant that treatment was required before there could be reasonable prospects of success of release upon supervision.[12]

4. Dr Harden diagnosed the respondent with Anti-Social Personality Disorder and Polysubstance Abuse,[13] and thought his risk of re-offending in a sexually violent way was "high".[14]

[13] Burns J found that the respondent was a serious danger to the community in the absence of a division 3 order and then, following s 13(6) of the Act and the principles in *Attorney-General (Qld) v Francis*,[15] considered that the respondent's risk could not be managed by a supervision order,[16] and consequently ordered continuing detention.

[14] The respondent's continuing detention order was reviewed by Dalton J on 30 October 2017. Her Honour made various comments concerning the respondent's future treatment to which I will later return. In affirming the continuing detention order made by Burns J, her Honour observed:

1. Between May and December 2016, there had been 18 disciplinary breaches committed by the respondent, including 8 for assault, and 6 of those were classified as major breaches.[17]

2. Dr Mohiuddin, a doctor working for Prison Mental Health:

   (i) thought the respondent might be suffering from schizophrenia;

   (ii) diagnosed moderate intellectual impairment with a behavioural disorder fuelled by substance abuse;

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5 At [34].
6 At [36].
7 At [38].
8 At [40]–[41].
9 At [43].
10 At [47].
11 At [48].
12 At [50].
13 At [57].
14 At [55].
15 [2007] 1 Qd R 396.
16 *Penningson* at [72].
17 *Attorney-General (Qld) v Penningson* (Unreported, Dalton J, 30 October 2017) at 2.

(iii) thought the respondent was suffering from anxiety and was displaying antisocial personality traits.[18]

3. Dr Sundin's opinion was that the respondent had shown improvement and risk had decreased, but opined that the respondent should complete a sex offender program before release on supervision.[19]

4. While in prison, the respondent had completed the "Getting Started" program which is a precursor to sexual offender treatment programs.[20]

5. Dr Grant:

(i) was concerned that the respondent minimises the seriousness of the offending; and

(ii) thought that the respondent was developing signs of sadism; and

(iii) was concerned[21] by the respondent's newfound attraction to violent aspects of Islam;[22] and

(iv) thought that risk had increased to high.[23]

[15] This, then, is the respondent's second review.

Statutory provisions

[16] A pivotal section in the Act is s 13. It provides as follows:

> "**13 Division 3 orders**
>
> (1) This section applies if, on the hearing of an application for a division 3 order, the court is satisfied the prisoner is a serious danger to the community in the absence of a division 3 order (a ***serious danger to the community***).
>
> (2) A prisoner is a serious danger to the community as mentioned in subsection (1) if there is an unacceptable risk that the prisoner will commit a serious sexual offence—
>
> (a) if the prisoner is released from custody; or
>
> (b) if the prisoner is released from custody without a supervision order being made.

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18 At 2.
19 At 3.
20 At 3.
21 As was Dr Sundin: at 5.
22 At 5.
23 At 3.

(3) On hearing the application, the court may decide that it is satisfied as required under subsection (1) only if it is satisfied—

(a) by acceptable, cogent evidence; and

(b) to a high degree of probability;

that the evidence is of sufficient weight to justify the decision.

(4) In deciding whether a prisoner is a serious danger to the community as mentioned in subsection (1), the court must have regard to the following—

(aa) any report produced under section 8A;

(a) the reports prepared by the psychiatrists under section 11 and the extent to which the prisoner cooperated in the examinations by the psychiatrists;

(b) any other medical, psychiatric, psychological or other assessment relating to the prisoner;

(c) information indicating whether or not there is a propensity on the part of the prisoner to commit serious sexual offences in the future;

(d) whether or not there is any pattern of offending behaviour on the part of the prisoner;

(e) efforts by the prisoner to address the cause or causes of the prisoner's offending behaviour, including whether the prisoner participated in rehabilitation programs;

(f) whether or not the prisoner's participation in rehabilitation programs has had a positive effect on the prisoner;

(g) the prisoner's antecedents and criminal history;

(h) the risk that the prisoner will commit another serious sexual offence if released into the community;

(i) the need to protect members of the community from that risk;

(j) any other relevant matter.

(5) If the court is satisfied as required under subsection (1), the court may order—

(a) that the prisoner be detained in custody for an indefinite term for control, care or treatment (***continuing detention order***); or

(b) that the prisoner be released from custody subject to the requirements it considers appropriate that are stated in the order (***supervision order***).

(6) In deciding whether to make an order under subsection (5)(a) or (b)—

(a) the paramount consideration is to be the need to ensure adequate protection of the community; and

(b) the court must consider whether—

(i) adequate protection of the community can be reasonably and practicably managed by a supervision order; and

(ii) requirements under section 16 can be reasonably and practicably managed by corrective services officers.

(7) The Attorney-General has the onus of proving that a prisoner is a serious danger to the community as mentioned in subsection (1).”

[17] Under s 27, the onus is cast upon the Attorney-General to make applications for review of a continuing detention order made under s 13(5)(a).

[18] Section 30 governs the determination of review applications. Section 30 is as follows:

“**30 Review hearing**

(1) This section applies if, on the hearing of a review under section 27 or 28 and having regard to the required matters, the court affirms a decision that the prisoner is a serious danger to the community in the absence of a division 3 order.

(2) On the hearing of the review, the court may affirm the decision only if it is satisfied—

(a) by acceptable, cogent evidence; and

(b) to a high degree of probability;

that the evidence is of sufficient weight to affirm the decision.

(3) If the court affirms the decision, the court may order that the prisoner—

(a) continue to be subject to the continuing detention order; or

(b) be released from custody subject to a supervision order.

(4) In deciding whether to make an order under subsection (3) (a) or (b)—

(a) the paramount consideration is to be the need to ensure adequate protection of the community; and

(b) the court must consider whether—

(i) adequate protection of the community can be reasonably and practicably managed by a supervision order; and

(ii) requirements under section 16 can be reasonably and practicably managed by corrective services officers.

(5) If the court does not make the order under subsection (3) (a), the court must rescind the continuing detention order.

(6) In this section—

required matters means all of the following—

(a) the matters mentioned in section 13 (4);

(b) any report produced under section 28A."

[19] Section 30, in many ways, mirrors s 13. As to the Court's consideration, the central question is whether the prisoner "is a serious danger to the community in the absence of the division 3 order" and in that way, s 30(1) mirrors s 13(1). The notion of a "serious dangerous to the community"[24] incorporates the concept of "unacceptable risk".[25] Like an application under s 13, "… the paramount consideration is the need to ensure adequate protection of the community", as can be seen from s 30(4)(a). There is no definition of "unacceptable risk", but in *Fardon v Attorney-General (Qld)*,[26] this was said:

> "225. The yardstick to which the Court is to have regard, of an unacceptable risk to the community, relevantly a risk established according to a high degree of probability, that the prisoner will commit another sexual offence if released, established on and by acceptable and cogent evidence, adduced according to the rules of evidence, is one which courts historically have had regard to in many areas of the law. The process of reaching a predictive conclusion about risk is not a novel one. The Family Court

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24 Sections 13(1) and 30(1).
25 Section 13(2).
26 (2004) 223 CLR 575.

undertakes a similar process on a daily basis and this Court (Mason CJ, Brennan, Dawson, Toohey and Gaudron JJ) said this in *M v M* of the appropriate approach by the Family Court to the evaluation of a risk to a child:

> 'Efforts to define with greater precision the magnitude of the risk which will justify a court in denying a parent access to a child have resulted in a variety of formulations. The degree of risk has been described as a 'risk of serious harm', 'an element of risk' or 'an appreciable risk', a 'real possibility', a 'real risk', and an 'unacceptable risk'. This imposing array indicates that the courts are striving for a greater degree of definition than the subject is capable of yielding. In devising these tests the courts have endeavoured, in their efforts to protect the child's paramount interests, to achieve a balance between the risk of detriment to the child from sexual abuse and the possibility of benefit to the child from parental access. To achieve a proper balance, the test is best expressed by saying that a court will not grant custody or access to a parent if that custody or access would expose the child to an unacceptable risk of sexual abuse.'

226. Sentencing itself in part at least may be a predictive exercise requiring a court on occasions to ask itself for how long an offender should be imprisoned to enable him to be rehabilitated, or to ensure that he will no longer pose a threat to the community. The predictive exercise of an assessment of damages for future losses is also a daily occurrence in the courts." (citations omitted)

[20] In the leading case of *Attorney-General for the State of Queensland v Francis*,[27] the Court of Appeal observed:

> "Adequate protection of the community from the risk of violent sexual offending does not impose a standard that is capable of precise measurement or prediction. The Act does not contemplate that arrangements under a supervision order to prevent the risk of reoffending must be 'watertight'."[28]

[21] Both *Fardon* and *Francis* were cases concerned with the making of orders under s 13 of the Act, but for the reasons I've already explained, the statements of principle are equally apposite to a review under s 30.

The evidence here

[22] Two psychiatrists have examined the respondent for the purposes of this review: Dr Sundin[29] and Dr Arthur.[30]

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27 [2007] 1 Qd R 396.
28 At [39].
29 Her report dated 31 July 2018.
30 His report dated 13 September 2018.

[23] Dr Sundin:

1. had previously diagnosed the respondent as suffering Anti-Social Personality Disorder with significant psychopathic traits and Polysubstance Use Disorder and confirmed those diagnoses.[31]

2. in conclusion, opined:

> "Taking all the material as a whole, I consider that Mr Penningson represents a moderate to high risk for serious sexual recidivism; with that risk rising if he were to revert to the use of intoxicating substances. He shows a pattern of emotional dysregulation and reversion to aggressive behaviour. This will be aggravated by the presence of intoxicants. Future victims of Mr Penningson would be vulnerable females of any age but most likely from mid-teens onwards who would be opportunistically attacked by Mr Penningson most likely at a time that he was intoxicated. There is a high risk of physical harm to the victims should he revert to sexual offending."[32]

3. was of the view that the respondent should be offered a place in the "Inclusion Sexual Offending Program" or some alternative psychological treatment.[33]

[24] Dr Arthur:

1. diagnosed the respondent as presently suffering Intellectual Development Disorder, Anti-Social Personality Disorder and an unspecified psychotic disorder, Substance Misuse Disorder and epilepsy.[34]

2. considered "prisoner Penningson's unmodified risk of sexual recidivism to be moderately high."[35]

3. expressed some concerns that treatment programs had apparently not been offered to the respondent, but considered that programs ought to be completed before there is a contemplation of release on supervision.[36]

[25] Other matters noted by the psychiatrists included:

1. the respondent's apparent low intelligence.[37]

2. a likelihood that he could not manage himself on a regime of medication.[38]

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31 Psychiatric Risk Assessment Report of Dr Josephine Sundin, 31 July 2018: Affidavit of Josephine Sundin, filed 20 August 2018, CFI 44, ex JJS-2 at 10 (Sundin Report).
32 At 12.
33 At 11.
34 Psychiatric Risk Assessment Report of Dr Kenneth Arthur, 13 September 2018: Affidavit of Kenneth Arthur, filed 10 October 2018, CFI 45, ex KA-2 at 5 [21], 37 [275] (Arthur Report).
35 At 5 [22].
36 At 5 [23]–[24].
37 Sundin Report at 6, 8; Arthur Report at 4 [14], 36 [269].
38 Sundin Report at 9; Arthur Report at 34 [255].

3. the respondent's epilepsy presenting problems on supervision.[39]

4. the respondent lacking insight into his offending behaviour.[40]

5. a risk of reversion to substance abuse.[41]

Determination

[26] The Attorney-General presses for a continuing detention order.

[27] Counsel for the respondent concedes "… that the evidence supports a continuing detention order." The concession is appropriate.

[28] I am satisfied to a high degree of probability by the evidence which I regard as acceptable and cogent that:

1. the respondent is a serious danger to the community in the absence of a Division 3 order;

2. that adequate protection of the community cannot be reasonably and practicably managed by a supervision order; and

3. protection of the community can only be achieved by the respondent's continuing detention.

[29] Therefore, I affirmed the decision to place the respondent on a continuing detention order and I have ordered that he continue to be subject to that order.

Matters of concern

[30] In her judgment on the first review on 30 October 2017, Dalton J reviewed the medical evidence then available. Her Honour said this:

> "Overall, I think that the steps that need to be taken here are, first of all, medical tests. There needs to be a neurological review, it needs to be soon and it needs to be thorough. It has to be established whether or not this man has epilepsy, how bad his epilepsy is, and whether it is being regulated by the medication he is currently taking.
>
> There needs to be put in place regular blood testing to see that he is taking his medications, and it was the very clear advice of both Dr Sundin and Dr Grant that this man needs to be put back onto an antipsychotic – olanzapine was suggested – to control his behaviour, even if there is no active psychosis.
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> He needs some individual counselling to try and make him understand the effects that his own bad behaviour is having on his chances of ever getting out of jail. And then he needs to undertake the program conducted at Lotus Glen jail for Indigenous male sex offenders.

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39 Arthur Report at 5 [18].
40 Sundin Report at 11; Arthur Report at 23 [144], 34 [256].
41 Sundin Report at 12; Arthur Report at 36 [267], 41 [300].

> So in those circumstances, it seems to me there is nothing I can do except to detain him for another year and hope that those medical and therapeutic matters are addressed."[42]

[31] It took 6 months from the date her Honour's reasons were published for a cognitive functioning assessment to be performed upon the respondent. A report of Elana Carr of 2 May 2018 was delivered to the High Risk Offender Management Unit (HROMU) on 4 May 2018. In an affidavit of Catherine McKinnon,[43] this was said:

> "I'm aware from the content of Elana Carr's report that it was recommended the respondent would not benefit from further QCS[44] group-based sexual offending treatment programs given his level of cognitive functioning and/or potential for cultural isolation. The report indicates that the respondent would find the group-based treatment programs available to him challenging and that individual intervention would be more beneficial."[45]

[32] In her affidavit, Ms McKinnon then considered the various programs which are currently available. Of the Sexual Offending Program for Indigenous Males (SOPIM), Ms McKinnon said:

> "The clinical assessment of Elana Carr indicates the respondent would require significant modification of program content and a high level of support to complete the program. While program facilitators have capacity to modify and adapt the content of the SOPIM to suit the needs of individuals identified as having low literacy and cognitive functioning, based on the outcomes of this assessment, the respondent's overall comprehension and retention of program content is likely to be limited. In line with the recommendations made within the affidavit of Elana Carr, it is considered that individual intervention at the respondent's current centre would be more beneficial."[46]

[33] Of the Inclusion Sexual Offending Program (ISOP) Ms McKinnon said:

> "Based on the clinical assessment of Elana Carr which identified the respondent as having an extremely low level range of intellectual functioning, the adapted format of the ISOP is considered a more appropriate treatment option for the respondent. However, the ISOP has not been developed for Aboriginal and/or Torres Strait Islander offenders. Further, participation in the ISOP would require the respondent to be transferred away from his cultural connections and family support in Townsville. In line with the recommendations made within the affidavit of Elana Carr, it is considered that individual intervention at the respondent's current centre would be more beneficial."[47]

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42 *Attorney-General (Qld) v Penningson* (Unreported, Dalton J, 30 October 2017) at 5.
43 Affirmed 1 November 2018, filed by leave 5 November 2018.
44 A reference to Queensland Corrective Services.
45 At [12].
46 At [15].
47 At [18].

[34] Ms McKinnon then considered the Low Intensity Substance Intervention (LISI). Of that, she said:

> "Given the LISI is a low intensity program that can be completed more than once, consideration could be given to offering the respondent a place on the program. However, if the respondent is assessed as having higher needs in relation to his substance abuse than can be addressed in the LISI, alternative substance abuse intervention would need to be considered."[48]

[35] The Pathways Program is a substance abuse program. Of that, Ms McKinnon said:

> "Given the respondent's level of cognitive functioning and associated responsivity issues, as outlined in the affidavit of Elana Carr, it is unlikely that he would benefit from such an intensive program as the Pathways. Further, it would be difficult for program facilitators to adapt the content of the program to match the respondent's level of functioning, meet his treatment needs and produce treatment gains within the closed format. In line with the recommendations made within the affidavit of Elana Carr, it is considered that individual intervention would be more beneficial."[49]

[36] The respondent has been in custody for over 5 years. The continuing detention order has been in place for over 2 years. Ms McKinnon's affidavit sets out in great detail all the treatment programs for which the respondent is apparently not suitable for.

[37] The objects of the Act are to provide "continuing control, care or treatment"[50] of prisoners falling within the Act. The respondent appears to be seriously disadvantaged because of his intellectual limitations which mean that the standard courses which are offered to prisoners are unsuitable for him.

[38] Jolene Monson is the acting Manager of HROMU. In her affidavit[51] she deposes:

> "21. On 26 July 2018 HROMU referred the respondent to psychologist Tracy Richards to commence individual treatment and provide a progress report to identify how the respondent engages with individual intervention. Tracey Richards commenced individual treatment with the respondent on 17 August 2018.
>
> 22. Based on the opinion contained in the affidavit of Katherine McKinnon affirmed 1 November 2018, HROMU will provide continued individual treatment with Ms Richards.
>
> 23. Treatment provided will be in consultation with QCS and in consideration of the psychiatric reports currently available to address the respondent's sexual offending.
>
> 24. QCS will continue to liaise with the treating psychologist regarding the nature and effectiveness of the treatment. Referrals

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48 At [22].
49 At [26].
50 Section 3. My emphasis.
51 Affirmed 1 November 2018, filed by leave 5 November 2018.

> to other relevant service providers will be considered as necessary."[52]

[39] It therefore took until 17 August 2018, over 9 months after the delivery of Dalton J's judgment on the first review before individual treatment was given to the respondent.

[40] Paragraph 24 of Ms Monson's affidavit is of some interest. No doubt on the next review of the respondent's continuing detention order, Corrective Services will provide detailed material as to:

(i) the extent to which they have "liaise(d) with the treating psychiatrist regarding the nature and effectiveness of [Ms Richard's] treatment";

(ii) details of what considerations have been given to "referrals to other relevant service providers";

(iii) what referrals have actually been made and when; and

(iv) what treatment has in fact been provided to the respondent.

[41] These issues must be properly addressed by the next review.

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52 At [21]–[24].