

# CORRECTED VERSION

## LAW REFORM COMMITTEE

### **Inquiry into Access to and Interaction with the Justice System by People with an Intellectual Disability and Their Families and Carers**

Mildura - 16 November 2011

#### Members

Mr A. Carbines  
Ms J. Garrett  
Mr C. Newton-Brown

Mr R. Northe  
Mrs D. Petrovich

Chair: Mr C. Newton-Brown  
Deputy Chair: Ms J. Garrett

#### Staff

Executive Officer: Dr V. Koops  
Research Officer: Ms V. Shivanandan  
Administration Officer: Ms H. Ross-Soden

#### Witness

Ms M. Sobkowiak, Service Coordinator, Sunraysia Residential Services.

**The CHAIR** — This is a cross-party committee set up by Parliament and we've been given terms of reference to investigate and then report back to Parliament and potentially with recommendations for new legislation. On the committee is myself and Jane Garrett, who is the Deputy Chair but is not here today; Donna Petrovich, the member for Northern Victoria, who is one of the Upper House local members here; Anthony Carbines, member for Ivanhoe; and Russell Northe is also on the committee but he couldn't make it today either.

We're pretty casual here. We'll just get you to talk us through the issues and we'll fire questions at you as they arise.

**Ms SOBKOWIAK** — Please bear with me, I have never attended anything like this and I was told an hour or so ago.

**Mrs PETROVICH** — It's very informal.

**The CHAIR** — Just as far as the formal part of it goes, you have parliamentary privilege for anything you say in the room but not outside the room, so just be aware of that. We record everything so if you could perhaps start with your name and professional address and who you represent and then launch into what you want to tell us.

**Ms SOBKOWIAK** — Okay. As you're aware, my name is Marilyn Sobkowiak, I'm a service co-coordinator at SRS, which is at 877 Fifteenth Street in Mildura. I've just got some notes here. SRS was actually opened in 1978, we offer a variety of housing accommodations, both permanent and residential; independent living; in home personal care; holiday programs; so we offer quite a broad range of support for people with disabilities in the community.

We do have our Johns Street facility that houses people with high needs; we have TICA next door that houses up to half a dozen people with high needs there as well, they actually live there; we have people in their own home we support, some people need personal care, some people just need to go out into the community to access the bank and all that type of thing, social activities, they need a bit of support.

**The CHAIR** — Who funds you, Marilyn?

**Ms SOBKOWIAK** — It's a non-for-profit organisation so we rely heavily on donations. The people get their packages, they get brokered out to us from other agencies.

**The CHAIR** — Do you have any state or federal funding?

**Ms SOBKOWIAK** — No, not that I'm aware of. I've only been in my role for a short period as well so I'm still catching up on a lot of all the finer details.

**The CHAIR** — Just to interpose for a moment. Earlier on I did an interview with WIN News, and they want to do some vision of us sitting at a table, they're not recording any voices. Are you happy with that?

**Ms SOBKOWIAK** — Yeah, Vaughn did mention it.

**The CHAIR** — All right.

**Ms SOBKOWIAK** — So we provide the best we can for people with disabilities and their families.

**Mrs PETROVICH** — So philanthropically funded through donations?

**Ms SOBKOWIAK** — Yes, through donations and also the people have their packages, like they come with a package with x amount of dollars and that gives us scope to provide the support that they need. It's all person centred, we really strive to make sure it's exactly what a person needs, we don't dictate to them: okay, you'll have two hours to do this, three hours to do that. It's all person centred.

**The CHAIR** — Do you deal with people with intellectual disabilities?

**Ms SOBKOWIAK** — Yes.

**The CHAIR** — What proportion of people that you deal with would have an intellectual disability?

**Ms SOBKOWIAK** — I couldn't say. I wouldn't like to sort of say a figure, but there's quite a few and it's such a broad range of disabilities that we support.

**Mrs PETROVICH** — Drug and alcohol as well as — —

**Ms SOBKOWIAK** — It's not so much drug and alcohol, it's more physical or acquired brain injuries, dementia, there's a dementia program, so it's that type of support that we provide.

**The CHAIR** — Do you think that the people who work with Sunraysia have the skills required to be able to deal with people with mental disabilities?

**Ms SOBKOWIAK** — SRS provide a lot of training and then if there's anybody that wants to specifically train in an area, management looks at that and we try and accommodate the staff in any training that they may require to skill them up. It is essential that they have Certificate IV in Disabilities to work with the people but we have all sorts of training. We do have a training officer that puts training into place for different things.

**The CHAIR** — This committee is particularly concerned with access to justice. Can you make any comment about your clients, the ones with the mental disabilities, any problems they have with their access to justice?

**Ms SOBKOWIAK** — Just on one case there's a young person, this young person does not get charged with any of her offences, there's lots of assaults, physical assaults, property damage to cars and things but, unfortunately, there's no consequences for this young person.

**Mrs PETROVICH** — Is that because she is known to police and known to have a condition?

**Ms SOBKOWIAK** — Mmm. And this young person, it can be argued that this person does know right from wrong, it's maybe a belief amongst people that it's more behavioral than actually a mental — —

**Mrs PETROVICH** — Impairment?

**Ms SOBKOWIAK** — Yeah, because she will often assault and damage and say: call the cops, it doesn't matter. She knows nothing is going to happen so there is no process, there's nothing, nothing at all, no consequences at all. This young person just continually physically assaults staff.

**Mrs PETROVICH** — Staff of your organisation?

**Ms SOBKOWIAK** — Mmm.

**Mrs PETROVICH** — It's interesting because we've heard just the opposite in other cases that with some people it isn't established that they do have a condition so they actually receive quite punitive — —

**Ms SOBKOWIAK** — Mmm. There's just no consequences for her at all. As I said, this young person knows that and this young person can turn it off and on. She does know right from wrong. I can't comment on her condition because I'm not a professional in that field but it just seems to be very unfair that this young person can do so much damage physically to people and to people's property.

**Mrs PETROVICH** — Is she in stand-alone accommodation or is she sharing?

**Ms SOBKOWIAK** — She's by herself. It has come to an end last week, she physically assaulted someone, and things are changing with DHS and the support model is being reviewed but this young person just, you know, there's no consequences for her and I think if something could be followed, a follow-up to it, because it's just giving her a green light to be abusive. She won't be abusive in public, she knows.

Just as a quick instance, we were having a cup of coffee and she was really disgruntled. The waitress came down, put the hot chocolate in front of her and her persona was just fine — as soon as the waitress walked away, she was at it again. This young person can behave, can control herself, and knows right from wrong but knows that nothing gets followed up.

**Mrs PETROVICH** — What is your interaction at that point, as a liaison point, do you then go as an interface with the police or with the court system?

**Ms SOBKOWIAK** — The thing is the police have been instructed not to take her away, so often they will come and just talk to her and she's as good as gold, they go, she's had the attention and that's gone, all gone, until the next day that she's a little bit unsettled for some reason so it just goes on and on and I think it's not doing her any good at all, it's not teaching her anything at all.

**Mrs PETROVICH** — She's obviously got some fairly antisocial behaviours happening to making her life difficult and everyone else around her. At that point it's

access to justice but it's also access to treatment, I suppose, because ultimately she is going to end up in the justice system. Is she receiving treatment?

**Ms SOBKOWIAK** — That's up to the family and we have spoken, and DHS have spoken, to this young person's family, but they don't seem to follow it up. Without going into great detail there's quite a few issues, it seems a lot of trouble stems once she has contact with the family, after a phone call or something. She's a very complex case and as far as all the justice and that go there's just nothing being done to protect her or protect staff.

**Mrs PETROVICH** — She's one case but are there others who obviously have an impairment that you would work with and processes seem to work okay for them?

**Ms SOBKOWIAK** — Yeah. This young person I would have to say would be the most — —

**Mrs PETROVICH** — Challenging.

**Ms SOBKOWIAK** — Mmm. For the rest, they're all pretty compliant.

**The CHAIR** — I think Donna touched in some way the issue of the interface with your staff and the judicial system. Do your clients ask staff to come with them when they go to see the police or go to court?

**Ms SOBKOWIAK** — If they need to, SRS would support them but again I'm not familiar with anyone having had to go through all this. I basically deal with this young person, not so much over the board of SRS so it's pretty much the one person.

**The CHAIR** — So as far as the intellectual disability goes it's only the one person you have experience with?

**Ms SOBKOWIAK** — Yeah. There's other co-coordinators, because we have co-coordinators for different areas in the program and I'm the co-coordinator of this person.

**Mrs PETROVICH** — Has there been a clinical diagnosis of this young person?

**Ms SOBKOWIAK** — Uh huh.

**Mrs PETROVICH** — So she has been diagnosed, it's not a case of nobody really knowing how to deal with it because she's undiagnosed?

**Ms SOBKOWIAK** — It varies. Sometimes they say it's this and it's not, and then it's this and then it's not; there's no real clear-cut diagnosis, I don't think, of this young person. A lot of it is behaviour and because it's gone on for so long that's how it is with her. As I said, at this point they're doing a bit of a turnaround and maybe some things may change in the way we support her so we're just waiting on DHS. I just don't believe it helps her in any way, shape or form because she can go into the community and can be very well behaved, very well behaved and good mannered, so she can pick and choose when she wants to and what she wants to do and she delights in telling people how many people she's hurt and how everyone is afraid of her.

**The CHAIR** — All right. Thank you very much for coming in; it's been helpful.

**Ms SOBKOWIAK** — Thank you. I hope I haven't said anything I shouldn't have said or what I wasn't supposed to say. As I said, I haven't done anything like that before so it's a learning process for me.

**Committee adjourned.**