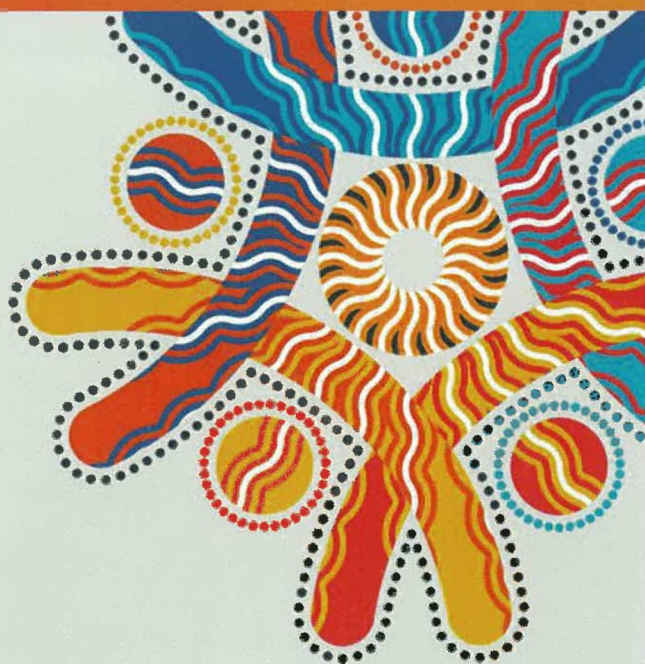


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Evaluation of the Electronic Monitoring Trial: Final Report

Department of Youth Justice and Victim Support

9 October 2025



Nous Group acknowledges Aboriginal and Torres Strait Islander peoples as the First Australians and the Traditional Custodians of country throughout Australia. We pay our respect to Elders past, present and emerging, who maintain their culture, country and spiritual connection to the land, sea and community.

This artwork was developed by Marcus Lee Design to reflect Nous Group's Reconciliation Action Plan and our aspirations for respectful and productive engagement with Aboriginal and Torres Strait Islander peoples and communities.

This report was prepared by Nous Group with the assistance of Dr Kat de Rooy, Georgia Wearne, Aleisha Reader-White and Lacey Atkins within the Department of Youth Justice and Victim Support.

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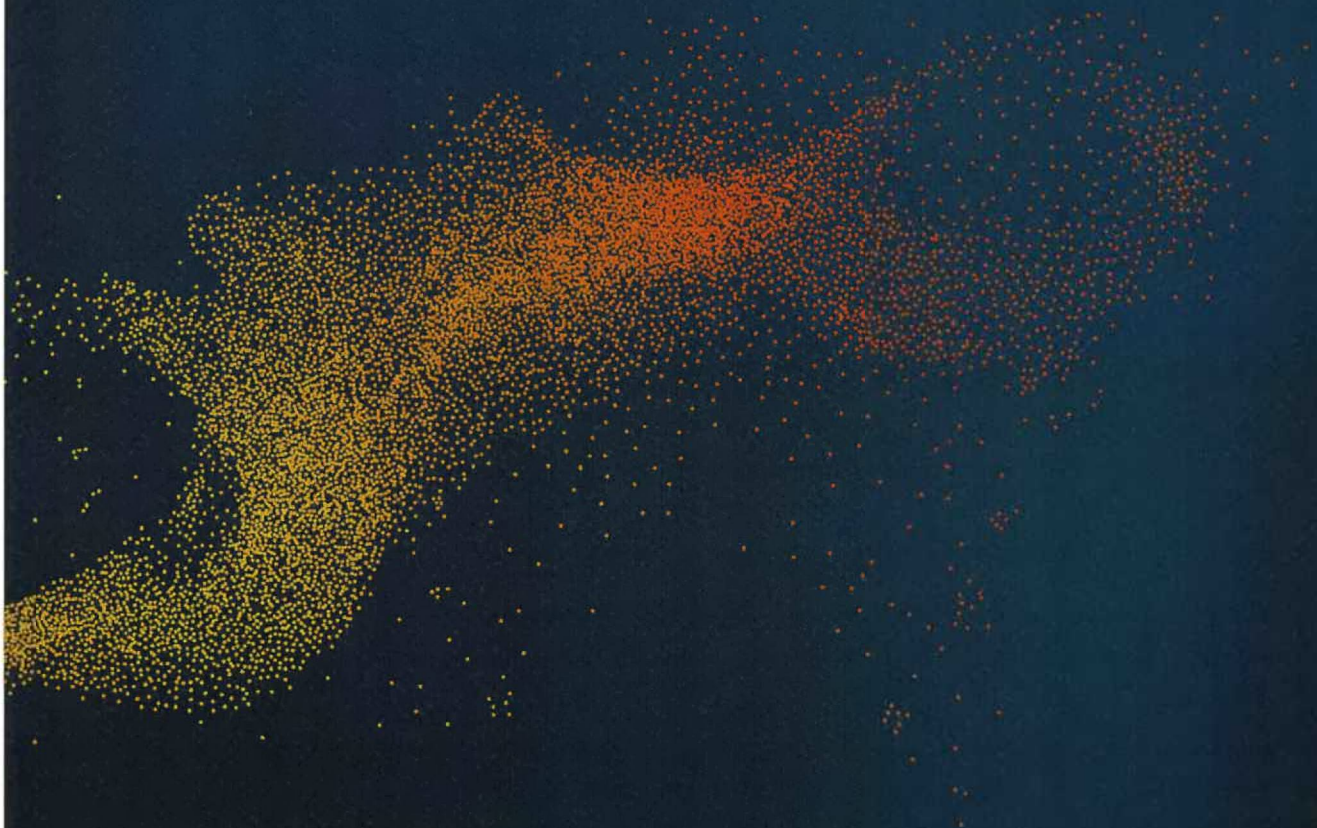
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Executive summary



The Electronic Monitoring trial was introduced in May 2021 as part of the then Queensland Government's strategy to reduce serious youth crime and enhance community safety

In 2021, the Queensland (QLD) Government introduced the Electronic Monitoring (EM) trial to allow courts to impose an Electronic Monitoring Device (EMD) as a condition of bail for eligible young offenders. Activities within the trial are delivered collaboratively by partner agencies including the Department of Youth Justice and Victim Support (YJVS), QLD Police Service (QPS), and QLD Corrective Services (QCS). Wrap-around supports, delivered by Youth Co-Responder Teams (YCRTs) and bail services, are embedded in the EM trial to help young people and their families comply with bail conditions and address underlying risk factors for offending. A shared Alert Protocol supports the flow of information between QPS, QCS and YCRT team members to enable a structured response to compliance issues.

The EM trial adapts EM arrangements previously used for adults in QLD to the youth justice context. QLD is one of four Australian jurisdictions using EMDs to support young people with bail compliance, sentencing, and/or reintegration. It is one of three to embed wrap-around supports in its monitoring approach for young people, based on evidence EMDs are more effective when combined with case management and therapeutic services.

An initial evaluation of the EM trial identified early benefits, including that services supporting EM may benefit a broader group of serious repeat offenders (SROs).¹ However, it noted that the sample size was too small to determine the impact on reoffending. It also found that EMDs rely on additional supports to play a meaningful role. In November 2024, YJVS engaged Nous Group (Nous) to conduct a further evaluation of the trial drawing on data up to 30 June 2025.

It is important to note that the use of EMDs for young people in QLD remains in a trial phase. As such, this evaluation is intended to inform policy and practice by identifying strengths and areas for improvement, rather than to provide definitive conclusions about effectiveness. YJVS has previously clarified that 'well over... 130 or 140' participants in the trial would be considered a sufficient number to conduct an evaluation that would yield 'true results'; participation in this trial approaches that threshold, with 139 EMD episodes recorded for 116 young people. Key findings from the evaluation are summarised in the infographic on Page 9.

Usage of the EM trial has been limited overall but increased over time

The use of EMDs in the QLD trial was intentionally narrow at multiple levels

At the first threshold, the technology itself can only be deployed in locations with the necessary infrastructure and support arrangements, which limits the geographic reach within QLD. At the second threshold, the legislation prescribes a specific set of criteria which young people must pass. To be eligible, young people must be at least 15 years old, reside in a trial location, have been charged with a prescribed indictable offence, and have been found guilty of an indictable offence or charged with a prescribed indictable offence in the preceding year. At the third threshold, among those who meet these criteria, a suitability assessment is conducted to evaluate the young person's living arrangements, access to electricity and a mobile phone, and the presence of a support person to assist with compliance. This assessment is conducted by staff from Youth Justice Service Centres (YJ).² Courts consider the eligibility criteria, suitability assessment and other factors to determine whether to order an EMD.³

These three layers (technology, legislation, and decision-making) combine to create a highly targeted and selective use of EMDs. This approach is deliberate, reflecting both practical constraints and policy intent, and is critical context for interpreting the evaluation findings and considering the future direction of EMD use in youth justice. The EM trial does not, and cannot, apply EMDs universally or indiscriminately; rather, it is designed to test their use in a carefully defined and limited context. This highlights the importance of ensuring eligibility

¹ Electronic monitoring trial evaluation. Youth Justice Research and Evaluation Department Youth Justice. November 2022. At, <https://www.youthjustice.qld.gov.au/our-department/research-evaluations/evaluations/electronic-monitoring-trial>

² For simplicity, the acronym 'YJ' is used to refer specifically to staff from Youth Justice Service Centres. The term 'YJVS' refers to the Department of Youth Justice, which oversees these centres.

³ Youth Justice Act 1992. QLD Government. At, <https://www.legislation.qld.gov.au/view/html/inforce/current/act-1992-044>

criteria are well-defined, suitability assessments are robust, and magistrates are equipped to make informed decisions about EMD use.

EMD conditions were ordered selectively within a narrowly defined cohort

Stakeholders indicated support for the use of EMDs to reinforce bail conditions (particularly curfews), respond to families seeking assistance to help their children curb offending behaviour, and provide an alternative to detention where appropriate.

Despite this support for EMDs, actual usage of EMDs was limited in practice, even within the already highly selective thresholds established by technology, legislation, and judicial discretion. From trial commencement to 30 June 2025, 297 suitability assessments were ordered. Of these, 85% (248) found the young person suitable for an EMD. Ultimately, 139 EMD conditions were ordered for 116 young people.

The total number of young people who were eligible for the EM trial is difficult to define with current data sources. However, the 54 young people who commenced EMD episodes in 2024-25 equate to 13% of the number of SROs aged 10-17 at all trial sites (412).⁴ This comparison is imperfect, as the eligible population includes both SROs and non-SROs and is limited to young people aged 15-17. Nonetheless, it provides context for trial usage, reinforcing the view that EMD conditions were ordered selectively within an already narrowly defined set of parameters.

This low usage partly reflects the deliberate narrow design of the trial. It also highlights that, even among those who passed all thresholds, further narrowing occurred in practice. Consultations revealed possible reasons for this, including *insufficient training and communication about the trial*, limited evidence of positive outcomes of EMD conditions, differing views on the appropriateness of EMDs, and refusal of bail (which occurred in 60% of cases where EMD conditions were not granted).

EMD usage has increased over time, primarily in South East QLD

There have been increases in the number of suitability assessments and EMD conditions over time. In the first two years of the trial (May 2021 to April 2023), 24 assessments were conducted per year – in the fourth year (May 2024 to April 2025), this rose to 134. Similarly, only 4 conditions were ordered in the first year of the EM trial, rising to 71 in the fourth year. Possible explanations for these increases include expansion of the EM trial to additional locations and cohorts under policy changes enacted in August 2024; improvements in stakeholder understanding of the trial; and legal representatives growing more positively disposed to the use of EMDs.

Usage of EMDs has been concentrated in South East QLD (SEQ). A total of 84% (117) of EMD conditions were ordered in SEQ, compared to 16% (22) outside of SEQ. Stakeholders attributed low usage in regional areas to inconsistent mobile connectivity, which reduces the effectiveness of EM in some areas. Low usage was also attributed to logistical challenges, particularly longer travel distances to watch houses for fitting, which can affect the practicality of EMDs and potentially influence how courts assess their viability. These regional usage patterns further illustrate how the first threshold noted above (location and technology) operates in practice: even when the trial is technically available in regional areas, the real-world application of EMDs is often constrained by the need for reliable infrastructure and support.

When EMD conditions were ordered, they were almost always accompanied by curfew orders. All EMD episodes (excluding 2) had a curfew condition requiring them to stay at a particular address between prescribed hours.⁵ This aligns with the intended use of EMDs in monitoring compliance with location-based bail conditions. The most common curfew lengths were 24 hours and 12 hours, both of which accounted for 39% (54) of EMD episodes. The median duration of EMD episodes was 53 days (around 8 weeks), though this varied from 5 days to 449. This indicates that, in practice, magistrates apply their discretion to order EMDs in cases where they see a clear and appropriate use case, primarily for tracking adherence to curfew requirements, further narrowing the circumstances in which EMDs are applied.

⁴ Number of SROs as of 30 June 2022-23. Reducing serious youth crime. QLD Audit Office. At, <https://tinyurl.com/mrx5bkn8>

⁵ For simplicity, the term episode is used throughout this report to refer to individual instances of young people's involvement in the trial. This reflects the structure of the available data, which is recorded and analysed at the episode level rather than by individual.

Outcomes of the EM trial were generally positive

EMD conditions were associated with high bail completion and reduced reoffending

While EMDs alone do not lead to a complete cessation of offending, they appear to be complementing other supports to achieve positive outcomes including:

- **High bail completion** – 82% (114) of EMD orders have been completed while 18% (25) are ongoing. Of the completed orders, 71% (82) were successfully completed (i.e., the young person was sentenced, bail was varied or charges were dismissed) while 28% (32) had bail revoked. Consistent with this data, stakeholders generally agreed EMD conditions supported bail compliance for at least some young people.
- **Reduced reoffending** (severity and frequency) – Relative to a comparison group, EMD episodes had a 24% reduction in the likelihood of reoffending; a lower proportion of episodes with serious offences during bail (14% (16) vs 26% (350)); and fewer offences during bail (4.4. vs 7.4). Most young people and family-members said that EMD conditions helped young people reduce offending, even if some young people still offended.
- **Lower victimisation** – A lower proportion of EMD episodes were associated with offences involving victims during bail compared to the comparison group (40% (46) vs 66% (909)). In addition, young people in the EMD group committed fewer offences with victims during bail on average (1.5 per episode) compared to those in the comparison group (3.7 per episode).
- **Less time in custody** – 46% (52) of EMD episodes spent time in custody during bail, compared to 96% (109) in the three months before the episode. Furthermore, EMD episodes spent an average of 8.7 days in custody during bail, compared to 36.9 days in the three months before the episode. Stakeholders generally viewed EMD conditions as providing an alternative to remand in custody, thereby reducing criminogenic exposure.

The reoffending rate was lower among EMD episodes than in the comparison group across all sub-groups. However, this difference varied between sub-groups. The smallest difference in reoffending rates was for episodes with poor mental health (-4%). In contrast, episodes without poor mental health had the largest difference (-32%). This aligns with stakeholder views that curfews may worsen existing mental health challenges.

Bail completion rates were similarly varied. The lowest bail completion rate was among EMD episodes for SROs: 64% (41) of SRO episodes were successfully completed, compared to 82% (41) of non-SRO episodes. The next lowest was among EMD episodes with poor mental health: 65% (35) of episodes with poor mental health completed their orders, compared to 82% (41) without poor mental health.

EMD outcomes were influenced by the young person's motivation, family situation, and engagement with support services

Many stakeholders reported that outcomes were strongly influenced by the young person's intrinsic motivation, family environment and the presence of a role model. These differences highlight the importance of supportive factors including family involvement and wrap-around supports. This aligns with research showing EMDs are most effective when used alongside other supports.

YCRTs are specialised teams of YJVS and QPS staff that work responsively with young people to reduce offending and increase community safety.⁶ They played an active role in the EM trial, with YCRT engagement recorded in 91% (127) of EMD episodes at an average of 14 engagements per episode. Stakeholders also emphasised the critical role of YCRT in delivering key operational activities alongside QCS and other QPS teams.

EMD episodes with YCRT engagement had a higher completion rate than those without (74% (77) vs 50% (5)). They also had a lower reoffending rate (62% (64) vs 80% (8)). However, it should be noted that the sample size for non-engagement was small, so these findings should be interpreted as indicative. Consistent with these results, magistrates viewed YCRTs as a constructive service for conducting EMD checks, noting that their

⁶ Youth co-responder teams evaluation. Department of Children, Youth Justice, and Multicultural Affairs. At, <https://www.youthjustice.qld.gov.au/our-department/research-evaluations/evaluations/ycrts>

qualified staff can use interactions with young people to encourage positive behaviour change. These findings are consistent with a previous evaluation that found YCRTs supported an overall reduction in the average number of offences for young people.⁷

Bail services include multiple programs which are offered to youth on bail and their families to address the practical and underlying factors that contribute to offending. These bail services include the Intensive Bail Initiative (IBI), which comprises multiple support components focused on intensive case management, intensive family support and community outreach support, as well as other programs such as the Conditional Bail Program (CBP).⁸ Access to bail services was an intended aspect of the use of EMDs, with previous evaluations identifying the importance of offering wrap-around supports in conjunction with the use of EMDs.⁹

Engagement with bail services was less widespread than YCRT, with 51% (71) of EMD episodes involving this support. EMD episodes with bail services engagement had a higher completion rate than those without (81% (50) vs 62% (32)). They also had a lower reoffending rate (58% (36) vs 69% (36)) and a lower average number of alleged offences (3.7 vs 5.3). These findings are consistent with a previous evaluation that found IBI was associated with a reduction in offence frequency and seriousness.¹⁰

The EM trial had unintended outcomes both positive and negative

Stakeholders identified positive unintended outcomes of EMDs, including strengthened engagement with wrap-around services, more time spent with family, and peace-of-mind for parents and families. These benefits led some to suggest EMD conditions could be used more widely, such as post-detention.

Negative unintended outcomes included physical discomfort, stress for family-members, and increased risk of incarceration for young people without stable housing (due to suitability criteria). Broader concerns included young people viewing EMDs as a 'badge of honour' or experiencing stigma that discourages pro-social participation (e.g., in education). Some YJ staff suggested lawyers may progress legal matters less urgently because young people with EMDs are not in custody.

Some stakeholders expressed concern that EMDs could expose young people to additional charges such as breach of bail. However, in the context of the thousands of alerts generated over the course of the trial, this outcome was rare: 59 EMD episodes recorded a breach of bail, of which only 22 resulted in bail revocation. This suggests that discretion was often applied.

Views on the cultural safety of the EM trial varied. Some stakeholders said First Nations young people may be excluded (due to suitability criteria), and participation rates were lower among First Nations young people. However, others noted EMDs can support connection to family and community by avoiding remand.

Operational challenges impeded the implementation and effectiveness of the EM trial

As a technology-based monitoring mechanism, the use of EMDs necessitates effective operational arrangements to administer and maintain them. This operational burden is carried largely by QCS through monitoring and QPS and YCRT teams through supervision and response, but it also impacts young people and their families. Concerns about the operational burden of the trial and intrusive nature of EMDs were held across all stakeholders.

The operating model for the trial was achieved by accessing technology and resources through QCS, QPS and YJVS. The initial introduction of the trial was rapid and without time to identify many workflows or processes. Although the multi-agency working group developed detailed guidelines and information-sharing protocols, including workflow charts for QPS and YCRT outlining roles and suggested actions, stakeholders still reported

⁷ Youth co-responder teams evaluation. Department of Children, Youth Justice, and Multicultural Affairs. At, <https://www.youthjustice.qld.gov.au/our-department/research-evaluations/evaluations/ycrts>

⁸ This report draws on bail services data for the IBI only, as one of the main bail services available at the time of the trial. For simplicity, the term 'bail services' is used in place of the term 'IBI', recognising that other programs also provide wrap-around support to youth on bail.

⁹ Electronic monitoring trial evaluation. Youth Justice Research and Evaluation Department Youth Justice. November 2022. At, <https://www.youthjustice.qld.gov.au/our-department/research-evaluations/evaluations/electronic-monitoring-trial>

¹⁰ IBI and BSS Evaluation. Nous Group. 2024.

confusion around responsibilities and how alerts should be actioned. The alert protocol was intended to clarify these processes, but staff noted that workflows remained unclear, partly due to limited training and onboarding. Despite a strong spirit of collaboration and growing competency over time, the rushed rollout meant staff often had to adapt on the fly, resulting in inconsistencies.

EMDs introduce a requirement for 24/7 supervision of those wearing devices. As a result, the operation of EMDs is resource-intensive and can produce high volumes of alerts necessitating monitoring, maintenance and supervision responses, which is often inefficient. Over the course of the trial, EMDs triggered 5,667 confirmed alerts – averaging 50 alerts per order, or nearly one alert per day during the median 53-day order period. Of these, 70% were inclusion zone alerts and 16% were low battery alerts. Every alert required a response from QCS, QPS or YCRT. This led to frequent engagement with young people and families.

Core trial activities were often cumbersome and resource-intensive to deliver, with staff, families, and young people identifying several challenges. Device fittings were time-consuming and required substantial resources, and young people frequently described the devices as uncomfortable – particularly at night or when fitted poorly – though most eventually adjusted. Connectivity problems and false alerts were also common, leading to frequent follow-up calls and home visits from QPS and YCRT, which many participants found frustrating.

Additionally, staff described challenges with:

- **Administrative burden:** YJ staff reported excessive paperwork and expectations to support activities outside rostered hours. Only a small number of QPS and YJ staff agreed adequate resources were in place.
- **Alert response fatigue:** QCS teams faced high volumes of alerts with limited staffing. YCRT and QPS staff reported frequent double-handling due to unclear responsibilities and inefficient escalation pathways.
- **Poor inter-agency coordination:** Restrictive data-sharing (due to legal frameworks and the Memorandum of Understanding (MoU) that governs data sharing processes) and unclear roles delayed responses and led to duplicated alert response. Most QCS staff disagreed that inter-agency communication was effective (out of a small sample of staff surveyed).
- **Training and role clarity gaps:** Rapid rollout of the EM trial left staff across YJ, QCS, QPS, and legal representatives with a limited understanding of how the trial was designed to operate.

These findings highlight that the operational demands of the EM trial are substantial and must be carefully weighed against its intended benefits when assessing the sustainability of the model.

The cost of EMD-based supervision is substantially lower than the cost of detention-based supervision and could be expected to reduce with increases in scale

At the current scale of around 20 concurrent EMD conditions per day, the estimated cost of EMD-based supervision per young person per day is \$577.92. This is:

- **Substantially lower than for detention-based supervision** (\$2,162.09) – this suggests that EMDs may offer a cost-effective alternative for supporting bail compliance and reducing reoffending among young people.
- **Around 50% higher than for community-based supervision** (\$382.05) – this reflects investments in EM infrastructure and delivery partners' provision of round-the-clock support.¹¹

The cost per young person per day could be expected to decrease as the number of concurrent EMD episodes increases, reflecting economies of scale in staffing, equipment, and overheads. However, beyond a certain scale, additional EMD units would need to be leased and additional QCS staff hired.

Additional reductions in the cost of per young person per day could be achieved through operational improvements to reduce burden on delivery partners (as discussed above). They could also be achieved through alternative delivery models. For example, some jurisdictions have outsourced EM capabilities.

¹¹ Values are from Report of Government Services 2025: 17 Youth Justice services (QLD). Productivity Commission. 2025. At, [17 Youth justice services - Report on Government Services 2025 - Productivity Commission](#). Note: values are for 2023-24.

The Electronic Monitoring (EM) trial was introduced in 2021 as part of the then QLD Government's approach to reduce serious youth crime and keep QLD safe. It is available in 13 locations....

The EMD trial reached 116 youth in more than 4 years of operation

297 suitability assessments were ordered to consider an EMD.

139 EMD conditions were ordered.

116 young people received an EMD (some received more than 1).

So far, the EMD trial has reached around 13% of eligible youth (based on the estimated number of SROs vs young people with EMDs*).

84% EMD conditions were ordered in urban SEQ, and only 16% in regional SEQ.



EMDs are used selectively

Not all young people are able to participate under the defined eligibility and suitability criteria.

Only 55% (137) of episodes deemed suitable resulted in an EMD order.

85% of all assessments (248) were suitable.

Bail refused

60%

of the time when an EMD was not ordered.

Considerations regarding community safety, attitudes of the youth and the capability of families informs decisions made by courts to order an EMD.

EMDs are typically used together with curfews

EMDs are regarded as a tool to enable location monitoring to track compliance with bail conditions.

99% of EMD conditions included a curfew.

53 days was the median length of EMD condition,

although the longest was 449 days and the shortest was 5 days.

39% on a 24-hour curfew,

39% on a 12-hour curfew,

21% had an 'other' curfew,

only 1% (2) had no curfew.



EMDs increased bail compliance and reduced reoffending for youth

82 young people completed bail.

24% reduction in offending likelihood (EMD group vs comparison group).

26% less offences involving victims (EMD group vs comparison group).

Reduced time in detention – Youth spent 28 days less in custody during EMD orders, than the 3 months previous.

Young people were more successful in reducing reoffending and completing orders when engaged with wrap-around supports.

5,667 alerts recorded across the trial

Support from Youth Co-Responder Teams (YCRTs) and bail services was critical to helping young people comply with EMD conditions and reduce reoffending.

50 alerts for each young person per EMD condition generated on average

70% inclusion zone alerts,

16% low battery alerts,

8% no communication alerts

5% strap alerts.

Every alert required resolution by QCS via phone or escalation to YCRT and/or QPS in person

Police conducted an average of 14 street checks per EMD condition (in addition to alerts).

The operational demands of the EM trial must be carefully weighed

The operational demands of the EM trial must be carefully weighed against its intended benefits when assessing the efficiency, sustainability, and intrusiveness of the model. Key issues included:

too much paperwork and need to support activities outside rostered hours

restrictive data-sharing and unclear roles delayed responses and led to duplicated calls and visits

the rollout left delivery partners and legal sectors without consistent procedures or technical knowledge

frequent double-handling of alerts, and minimal staff resources to manage high alert volumes



* This indicative comparison is calculated based on the annual estimated number of all SROs at all EM trial sites (412), against the annual estimated number of young people with EMD conditions (54). While the eligibility criteria for the EM trial may include both SROs and non-SROs aged 15-17, meaning that this comparison is indicative only. Figure C1. Reducing serious youth crime (Report 15: 2023–24). Queensland Audit Office.

Considerations for the future

1. **The EM trial provided evidence that EMDs in combination with wrap-around supports may be effective in reducing reoffending and supporting bail compliance for some young people.**

Young people subject to EMD conditions, particularly when supported by wrap-around services, were less likely to reoffend than those on bail without EMDs. Most EMD episodes also resulted in bail completion. These outcomes suggest that EMDs, when appropriately targeted and supported, can contribute to improved compliance and reduced offending.

2. **There are opportunities to refine and responsibly widen usage of EMDs.**

While usage of EMDs is intentionally targeted, opportunities exist to appropriately widen usage through improved stakeholder understanding of the EM trial's intent and outcomes. Most importantly, magistrates may choose to impose EMD conditions for a broader range of young people if they have greater confidence in their deterrent effects and clearer understanding of stakeholders' perspectives, particularly those of young people and their families. This would require ongoing information sharing with magistrates to build their understanding of the appropriateness and effectiveness of EMDs.

Widened usage could be further supported through changes to the defined eligible population, such as allowing more offence types or expanding to additional locations (noting the limitations of the technology and requirement for EMDs to be provided in locations with YCRT and bail services). There is also potential to extend the application of EMDs beyond bail arrangements, as is the case in other jurisdictions (e.g., to supervised orders or step-down pathways).

It would be beneficial to improve stakeholder understanding and address operational challenges before expanding to new cohorts, locations or applications. This would help ensure the EM trial is consistently understood and effectively delivered, reducing the risk of compounding existing challenges and supporting more sustainable implementation over time.

3. **Wrap-around supports contributed to the effectiveness of EM orders, but greater awareness and usage are needed.**

While wrap-around services were critical to the success of EMDs, usage was uneven. Participation in bail services designed to support high-risk, serious recidivist offenders occurred in only around half of EMD episodes, indicating that some young people in the trial did not access these supports. Additionally, bail service programs offering intensive case work to address underlying causes of offending, such as those involving family engagement, were less visible and accessed during the trial. Usage was low, and stakeholders made no references to these programs during consultations. This suggests there is potential to enhance engagement so that more families receive valuable support.

4. **The EM model could be strengthened to better support vulnerable cohorts and enable more responsive conditions**

Young people with poor mental health and First Nations status may require additional support to succeed with EMDs, given their lower completion rates and smaller differences in reoffending. Given the numerous eligibility criteria and other factors that may influence a young person's experiences and outcomes with EMD, it may be beneficial to simplify and/or expand suitability assessments to allow magistrates greater discretion to make holistic judgements for each young person.

Periodic reviews of EMD conditions (particularly curfew durations) could ensure conditions remain proportionate and responsive to individual progress. These reviews could also serve as incentives for compliance, with scope to adjust conditions based on behaviour.

5. **Operational improvements would enhance the effectiveness and sustainability of EM delivery.**

The trial was affected by operational challenges, including administrative burden, unclear roles, and inconsistent information sharing. These issues hindered timely responses to alerts and placed strain on staff, participants, and families. Delays in communication, such as alert handling and sentencing updates, led to double-handling and missed responses. Addressing these operational challenges (e.g., by streamlining processes, expanding fitting locations, and implementing shared protocols or live dashboards) could improve coordination, reduce burden, and support better engagement with the trial among participants, families and staff. Resolving these issues would also support improved cost-efficiency, particularly as the number of concurrent EMD episodes increases and economies of scale are realised.

6. **Shared inter-agency arrangements for monitoring and evaluation would support continuous improvement.**

While existing legal frameworks provide a foundation for coordination, the absence of a robust shared system has limited consistent and timely data sharing and evaluation across partners. Reviewing and updating the MoU for this trial would help formalise protocols and strengthen collaboration. Additional frameworks or systems may also be needed to support robust monitoring, adaptive delivery, and informed EM policy decisions.

1 Background & context

This section presents the evaluation background and context:

1. The EM trial was introduced to support structured supervision for high-risk young people on bail.
2. Partner agencies deliver the trial to eligible young people in selected QLD locations.
3. The trial has expanded through a series of legislative changes since mid-2021.

These points are discussed in turn below.

1.1 The EM trial was introduced to support structured supervision for high-risk young people on bail

EMDs were introduced in May 2021 as part of the then QLD Government's approach to reduce serious youth crime and keep Queenslanders safe

The QLD Government has invested in a range of youth justice responses to prevent and reduce youth offending across QLD's communities. Most young offenders only commit a small number of offences and are diverted away from the youth justice system. However, a small proportion commit serious offences and reoffend. The EM trial was designed as a pilot to target this relatively small cohort of SROs – both to help them complete their orders, and to improve community safety. The trial allows courts to impose an EMD as a condition of bail for eligible young offenders.

EMDs provide a mechanism for monitoring movement and supporting structured supervision

An EMD is a technology used to monitor the location of people, typically adults involved in criminal justice. The trial applied EMDs to youth offenders on bail. Unlike other forms of supervision, EMDs allow 24/7 monitoring of an individual's location, which creates a greater ability to assess compliance with restrictive conditions regarding location, movement, time-limitations, or associations with places or people.

The device used in the QLD trial is the Buddi Limited smart tag. It is a compact, waterproof, and tamper-resistant device that is designed for straightforward installation and removal. EMDs use a combination of radio frequency (RF), global positioning system (GPS), Wi-Fi, and global system for mobile communication (GSM) technologies to determine the wearer's location. Wearers of EMDs install an RF beacon at their residence – the device tethers to the beacon when the wearer is at home, which supports curfew monitoring and helps conserve battery life. Charging is managed through a two-piece system that includes an on-body charger (OBC) and a dock, allowing the device to be charged without removal. The devices require power and mobile connectivity to generate alerts. Alerts generated by EMDs are based on the specific bail conditions imposed by the court. If a breach occurs, the device triggers an alert that is reviewed and responded to by authorities.

Two types of alerts may be generated. Confirmed alerts require an action for resolution or escalation and are generally compliance-related. These may include low battery alerts (when the wearer fails to charge), exclusion zone alerts (when the wearer enters a restricted area), and inclusion zone alerts (when the wearer leaves their curfew location). These are considered genuine and require a response. Cancelled alerts are system-generated alerts that, after investigation, are generally found not to be compliance-related. These may include strap alerts triggered by device fitting or removal, GPS drift, or passing by (but not entering) an exclusion zone. These do not require further action.

EMDs must be used within the scope and limitations of their design. Their effectiveness may depend on several factors such as the legislation and conditions that govern their use; the capacity of staff and systems to respond to alerts; the wearer's risk profile and willingness to comply; and the availability of wrap-around supports to address underlying risk factors for offending. Importantly, EMDs do not prevent offending on their own. They are tools for monitoring, and their impact is shaped by how they are implemented and supported.

The EM trial is an adaptation of monitoring arrangements used in other contexts

EMD technology has been used to support structured supervision in Australia across a range of adult justice settings. In QLD, EMDs are used to monitor adult offenders on parole, adult offenders under the *Dangerous Prisoners (Sexual Offenders) Act 2003*, and those subject to domestic and family violence orders. QCS and QPS oversee these programs. Other jurisdictions also permit EM for adults.

Four jurisdictions, being South Australia (SA), Western Australia (WA), Victoria (VIC) and the Northern Territory (NT), permit EM of young offenders in certain circumstances:

- In SA, EM is used as part of home detention, which can be ordered as a sentence, bail condition or conditional release from a training centre.
- In WA, EM is only available for a sentenced child and may be used for supervised release orders.
- In VIC, EM is used in trial form since 2025 as part of bail conditions for eligible young people.
- In the NT, EM may be used for children on bail or on sentence.

The application of EM in SA and VIC is most comparable to its application in the QLD trial, as all three jurisdictions incorporate some form of case management or wrap-around support in the programs. In other jurisdictions besides VIC (which allows EMDs for 14-18 year olds), the age at which young people may be subject to EMDs is not clearly defined in legislation or practice. While laws often imply that minors can be included (through youth justice, bail or home detention schemes), they generally do not specify lower age limits.

Evidence suggests that EMDs be combined with support services, such as case management and therapeutic programs

The monitoring function of EMDs tracks whether young people remain at home during high-risk periods, which can help reduce opportunities for offending and limit exposure to criminogenic environments such as detention. While this monitoring can contribute to improved short-term outcomes, EMDs are fundamentally a compliance tool. They do not, on their own, address the complex drivers of youth offending. Multiple studies have recommended that EMDs be used in conjunction with wrap-around supports. Wrap-around supports serve two critical functions:

- Provide practical support to help EMD wearers comply with their conditions – this might include providing transport to ensure participants can meet their curfew requirements.
- Provide therapeutic interventions to address underlying causes of offending – this might include interventions to work through complex challenges such as trauma, substance use, and disengagement from education or employment.

When used together, EMDs and wrap-around supports aim to support both short-term compliance with bail conditions and long-term reductions in offending.

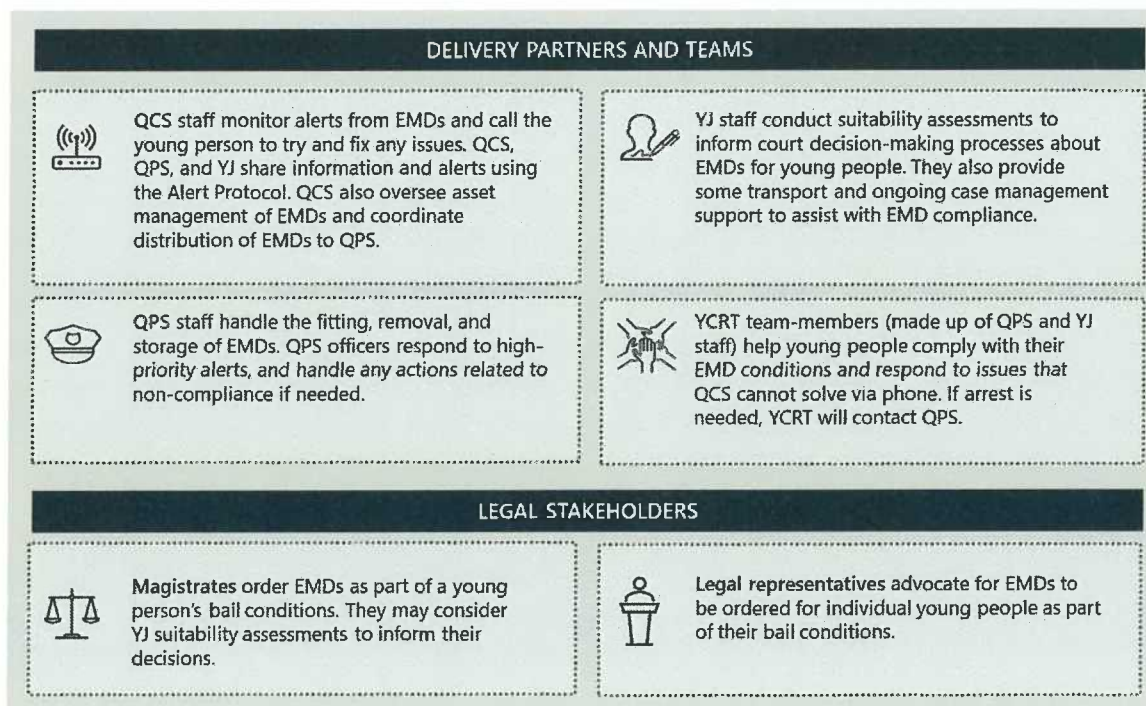
1.2 Partner agencies and teams deliver the trial to eligible young people in selected QLD locations

The EM trial is delivered by a network of partner agencies and teams

Staff from YJ, QPS and QCS play various roles supporting participants while they have an EMD. These agencies share information and alerts using a set process called the Alert Protocol, and each oversee different elements

of the trial program. Legal stakeholders such as magistrates and lawyers play key roles in advocating for and imposing EMD orders. Figure 1 below summarises these roles.

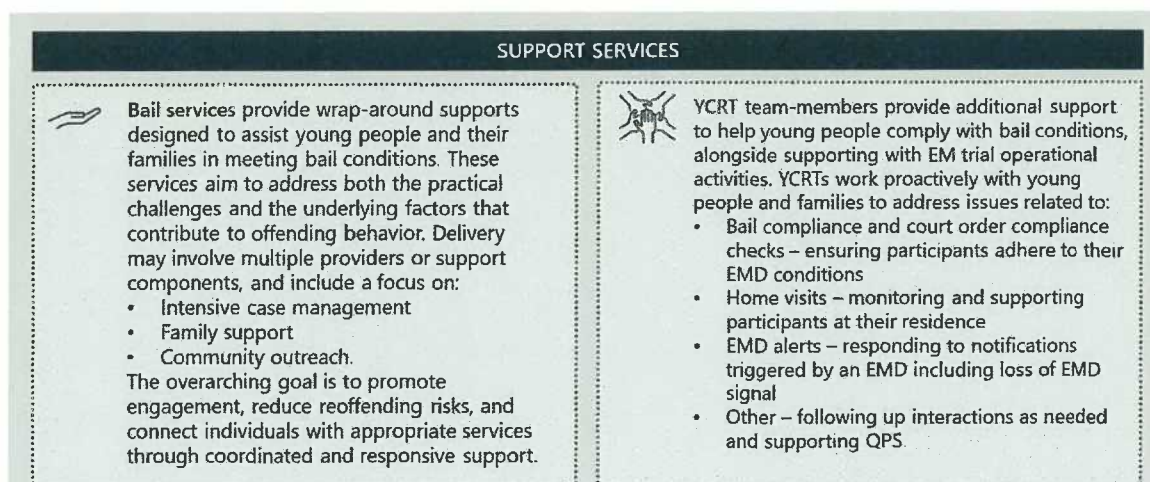
Figure 1 | Roles of partner agencies in the EM trial



Other interventions were introduced to monitor, supervise, and support participants in the trial

Alongside the partner agencies outlined above, various services complement the EM trial and provide additional assistance with monitoring, supervising, and supporting high-risk repeat offenders. These include YCRTs (who have a dual role) and bail services. The inclusion of these supports reflects the EM trial's evidence-based design, which integrates complementary EM and wrap-around services to support stronger bail compliance and reduced reoffending. Figure 2 summarises the roles of these services.

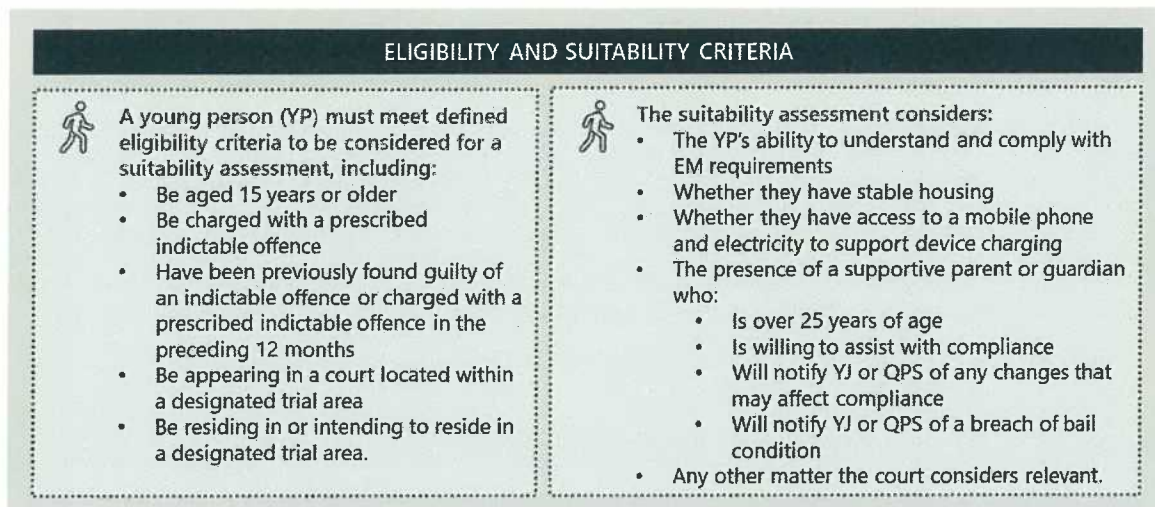
Figure 2 | Roles of support services in the EMD trial



Young people are assessed for eligibility and suitability before participating in the EM trial

To receive an EMD, a young person must first meet eligibility criteria. If eligible, the court may order a suitability assessment. Once the suitability assessment is completed, the court will decide whether to order an EMD condition. Figure 3 below summarises the current eligibility and suitability considerations, noting changes to the age and offence requirements have come into effect over the course of the trial (as further explored in Figure 6).

Figure 3 | Eligibility and suitability criteria



The trial currently operates in 13 locations across QLD

In SEQ, the trial covers locations including Brisbane North, Brisbane South, Ipswich, Logan, Gold Coast, and Moreton. In regional areas outside of SEQ, the trial covers locations including Mount Isa, Townsville, Mackay, Rockhampton, Fraser Coast, Cairns, and Toowoomba. Figure 4 outlines these locations.

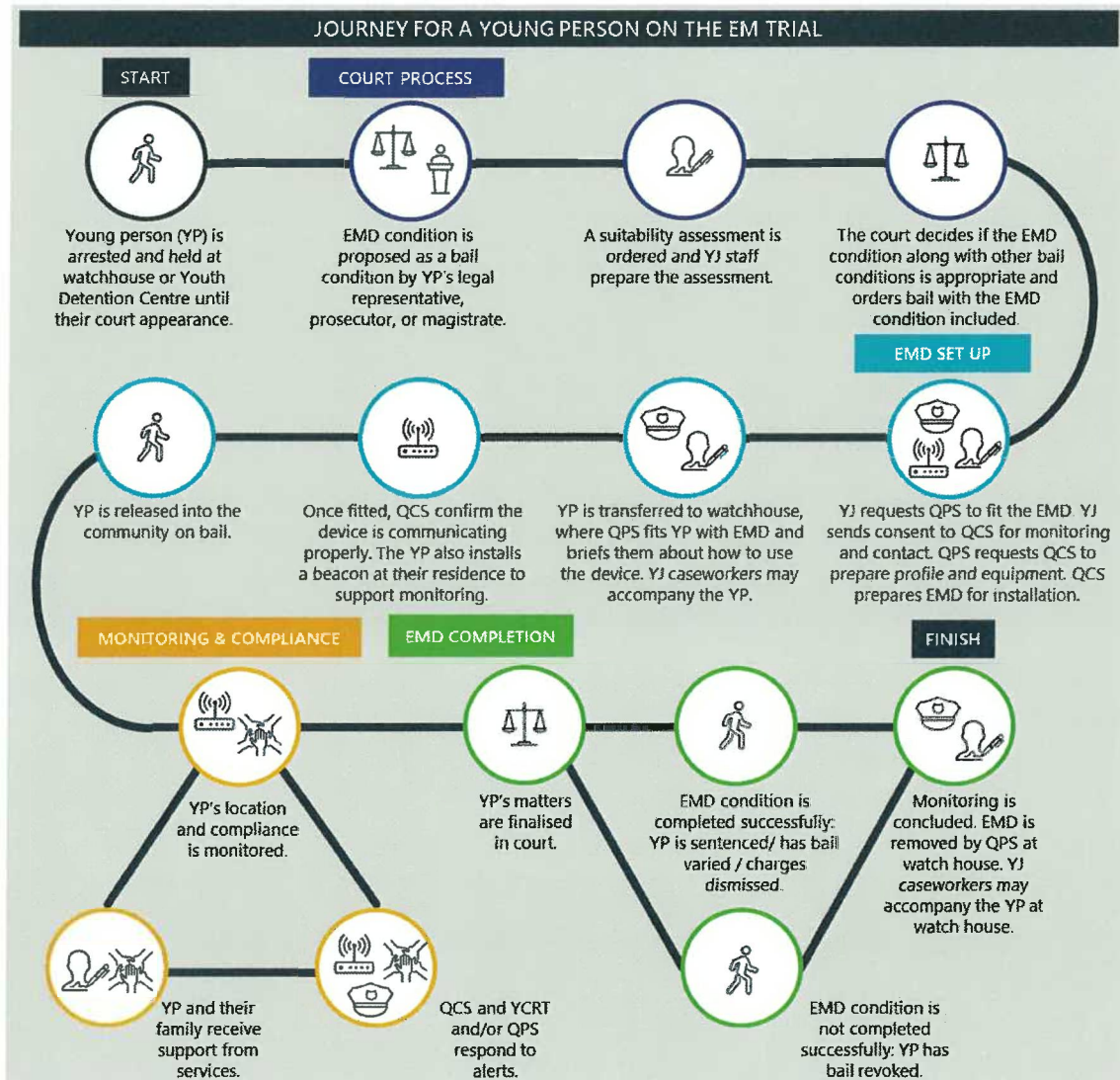
Figure 4 | EM trial locations



A young person's journey in the trial begins with arrest and concludes with device removal

Figure 5 outlines these stages in more detail and the key stakeholders involved in each stage.

Figure 5 | EMD journey for a young person



1.3 The EM trial has expanded through a series of legislative changes since mid-2021

The trial has run for four years and now sits under the *Making Queensland Safer* agenda

The initial design of the trial was grounded in the prevention and intervention principles outlined in *A Safer Queensland: Youth Justice Strategy 2024–2028* (to be superseded). Over the four years since the trial commenced, legislative reforms introduced under the *Making Queensland Safer* agenda in late 2024 marked a recalibration of focus towards increased prioritisation of community safety and victim rights. These reforms aimed to:

- Prioritise victims' rights in sentencing decisions
- Introduce adult sentencing options for serious youth offences

- Remove detention as a last resort, giving courts greater discretion to impose custodial sentences
- Launch new early intervention and rehabilitation programs, operating alongside punitive measures.

The trial has progressively expanded in duration and scope since its launch

The trial has expanded over time to include longer timeframes, more locations, and younger age groups since its introduction in 2021. A key driver of these expansions has been the need to build a stronger evidence base around the effectiveness of EMDs. An initial evaluation, peer-reviewed by former police commissioner Bob Atkinson AO APM, was conducted after 12 months but found the participant sample too small to confirm whether EMDs deter reoffending, despite some early signs of benefit.¹² Subsequently, it was determined that no conclusions regarding the appropriateness or effectiveness of EMDs could be made unless a sample size of at least 130 was reached. Now, after nearly four and a half years of operation, EM trial participation has approached this threshold, enabling a more reasonable basis for assessing outcomes and drawing indicative conclusions. Figure 6 outlines the evolution of the EM trial.

Figure 6 | Evolution of the EM trial and policy context



¹² Electronic monitoring trial evaluation. Youth Justice Research and Evaluation Department Youth Justice. November 2022. At <https://www.youthjustice.qld.gov.au/our-department/research-evaluations/evaluations/electronic-monitoring-trial>

2 Evaluation purpose & method

This section describes the purpose, method and limitations for the evaluation.

1. YJVS engaged Nous to support the evaluation of the EM trial.
2. The evaluation took a mixed methods approach.
3. The evaluation had limitations.

These points are discussed in turn below.

2.1 YJVS engaged Nous to support the evaluation of the trial

YJVS engaged Nous to evaluate the trial. The evaluation aimed to determine whether the trial met its objectives, particularly in relation to reducing offending while on bail. In addition, the evaluation explored the influence of supports such as YCRTs and bail services on the operation and effectiveness of the trial. The evaluation was intended to inform decision-making about the future of the trial.

Key evaluation objectives included exploring:

- What an EMD is including its various (and possible) functional uses
- What application and usage of EMDs has occurred so far
- How effective operation of the trial has been
- What outcomes EMDs are producing, particularly in relation to bail, offending and victimisation
- What the financial implications of EMDs are
- What future considerations are relevant, noting the government will form its own view.

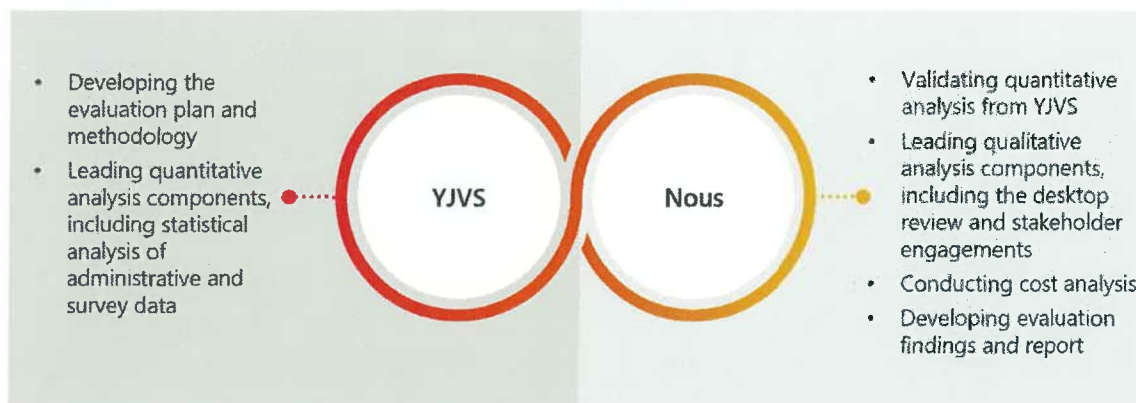
The timeframe for the evaluation was initially scheduled to run from November 2024 to April 2025, aligning with the program's sunset clause. However, with the introduction of the *Youth Justice (Monitoring Devices) Amendment Bill 2025*, the timeframe was extended to October 2025 to enable consideration of data arising from the August 2024 program amendments.¹³

2.2 The evaluation took a mixed methods approach

YJVS developed the initial evaluation plan, which Nous provided feedback on. The evaluation plan outlined the evaluation methodology, including the mixed methods approach using quantitative and qualitative data and methods. Under this approach, YJVS led the quantitative component, while Nous led the qualitative component and the development of the evaluation report. Nous also validated YJVS's work on the quantitative component. The qualitative component underwent an internal YJVS ethics approval process. Figure 7 below summarises the key activities undertaken by Nous and YJVS. Additional detail about the evaluation method is provided in the appendices.

¹³ Youth Justice (Monitoring Devices) Amendment Bill 2025. QLD Government. Available at, <https://www.legislation.qld.gov.au/view/html/bill.first.exp/bill-2025-005>

Figure 7 | Overview of evaluation methodology and roles of YJVS and Nous



2.3 The evaluation had limitations

The limitations of the evaluation and their implications are listed in Table 1 below.

Table 1 | Limitations of the evaluation

Limitation	Implications
Trial context and generalisability	All findings should be interpreted within the context of a trial with intentionally narrow eligibility, suitability, and judicial thresholds. Results may not be generalisable to broader populations.
Potential selection bias in consultation with young people and families	Young people and family-members were recruited through YJ to participate in consultations and hence the sample may be biased to those who were more engaged with these services.
Limited representation of participant sub-groups such as those outside of SEQ	Young people and family-members who participated in consultations were concentrated in SEQ. This reflects the concentration of trial participants in SEQ. The evaluation consulted staff from all 13 EM locations across QLD to achieve coverage of different geographic locations.
Combined view of EMDs and wrap-around supports	The evaluation was not designed to isolate the impact of EMDs from the impact of wrap-around supports. This aligns with the design of the EM trial, which embeds wrap-around services into the delivery model. Future evaluations may consider methods to distinguish the relative contributions of each component to further refine program design, if necessary.
Differences between EMD and comparison groups	To assess the effects of the EM trial, EMD episodes were compared to other bail episodes across key outcome measures. This included both raw comparisons and propensity score matching analysis. Raw comparisons may be biased by baseline differences between the two groups (e.g., in SRO score or location). Propensity score matching analysis controls for observed differences, thereby reducing bias, but cannot adjust for unobserved differences (e.g., in motivation) and therefore may not fully eliminate bias. As such, all comparisons should be interpreted with appropriate caution.

3 Findings: usage of the EM trial

This section presents the evaluation findings regarding usage:

1. A limited number of young people have participated in the trial, within an already narrow eligible population.
2. Reasons for low usage are evident at the thresholds of suitability assessments and court decision making.
3. EMD conditions were largely used with medium length orders to reinforce curfews.

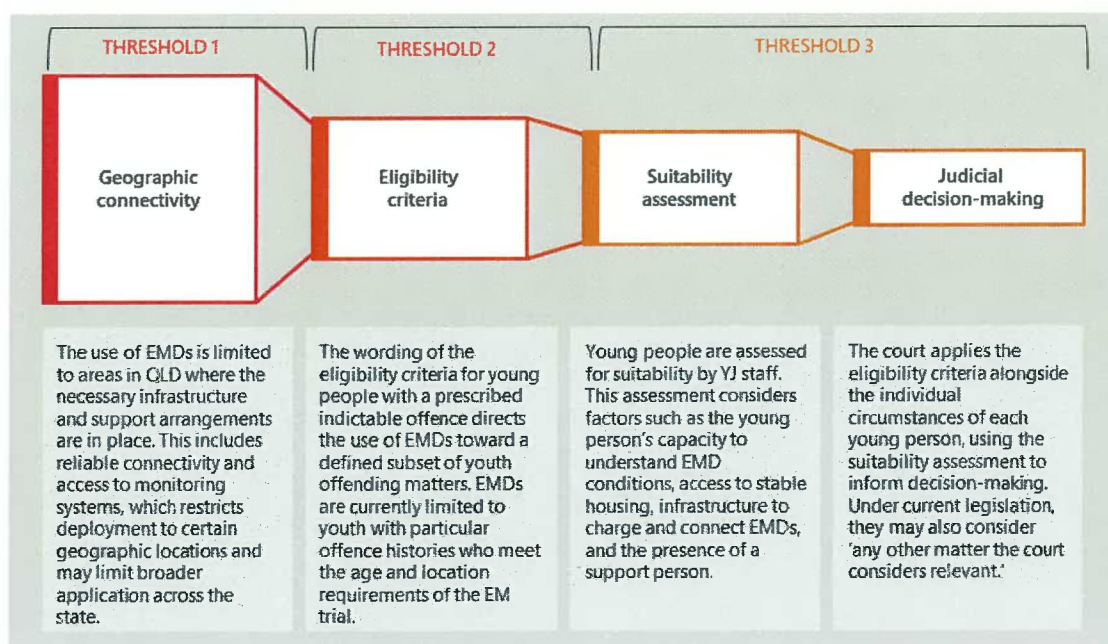
These points are discussed in turn below.

3.1 A limited number of young people have participated in the trial, within an already narrow eligible population

Trial participation is determined by connectivity, eligibility, suitability, and judicial discretion

By design, participation in the EM trial is limited to a small group of young people who reside in trial locations and meet the eligibility and suitability criteria, in addition to other factors magistrates may consider.¹⁴ Figure 8 summarises the key factors for consideration within each of these thresholds for participation.

Figure 8 | Thresholds for participation in the EM trial



¹⁴ Youth Justice Act 1992. QLD Government. At, <https://www.legislation.qld.gov.au/view/html/inforce/current/act-1992-044>

Stakeholder interviews, including with magistrates, highlighted that community safety, young people's attitudes, and family capacity to support EMD conditions are critical factors in judicial decision-making. Where these considerations were met, magistrates expressed support for considering EMDs to:

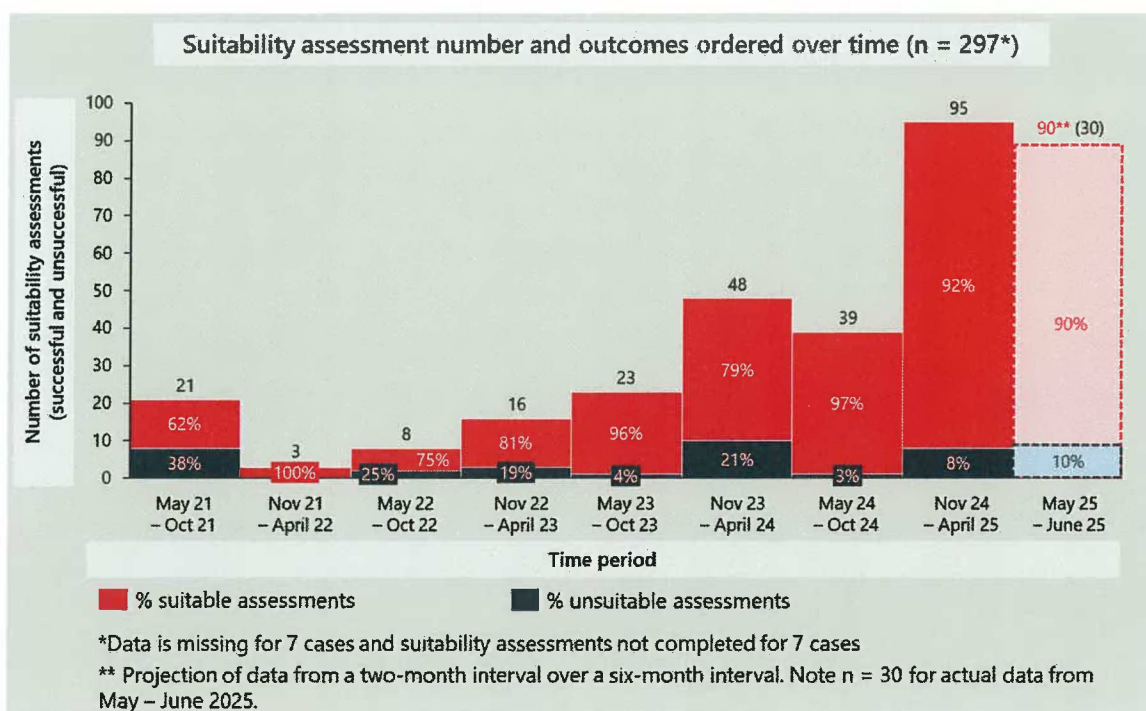
- Reinforce bail conditions, particularly curfews
- Respond to families seeking assistance to help their children curb offending behaviour
- Provide an alternative to detention, where appropriate, noting high rates of bail refusal.

The number of young people considered for EMDs has been limited overall but increased over time

From trial commencement on 17 May 2021 until 30 June 2025, a total of 297 suitability assessments were ordered for eligible young people. Most assessments were ordered during the later years of the trial from mid-2024 to mid-2025, with consistently lower numbers in the earlier years from mid-2021 to mid-2023.

Of all assessments ordered, 85% (248) found the young person suitable for an EMD. This proportion also increased over time, following the same trend as overall usage. Figure 9 below shows the number of assessments ordered and the proportion of suitable vs unsuitable assessments over time. Note that data from May-June 2025 is projected from a 2-month interval to a 6-month interval for comparability.

Figure 9 | Suitability assessment outcomes over time



Possible contributors to the increase in suitability assessments include expansion of the EM trial to additional locations and young people, under policy changes enacted with the *Queensland Community Safety Bill* in August 2024;¹⁵ and legal representatives becoming more familiar with the EM trial over time, and more inclined to consider their use as part of bail conditions. The increasing proportion of successful assessments may reflect YJ staff becoming better equipped to prepare young people to meet the suitability

¹⁵ QLD Community Safety Bill 2024. QLD Legislation. At, <https://www.legislation.qld.gov.au/view/html/bill.third/bill-2024-018>

criteria over time; or stakeholders improving their understanding of which young people will be suitable and hence who they should request suitability assessments for.

Usage of EMD conditions has increased over time but still remained limited overall

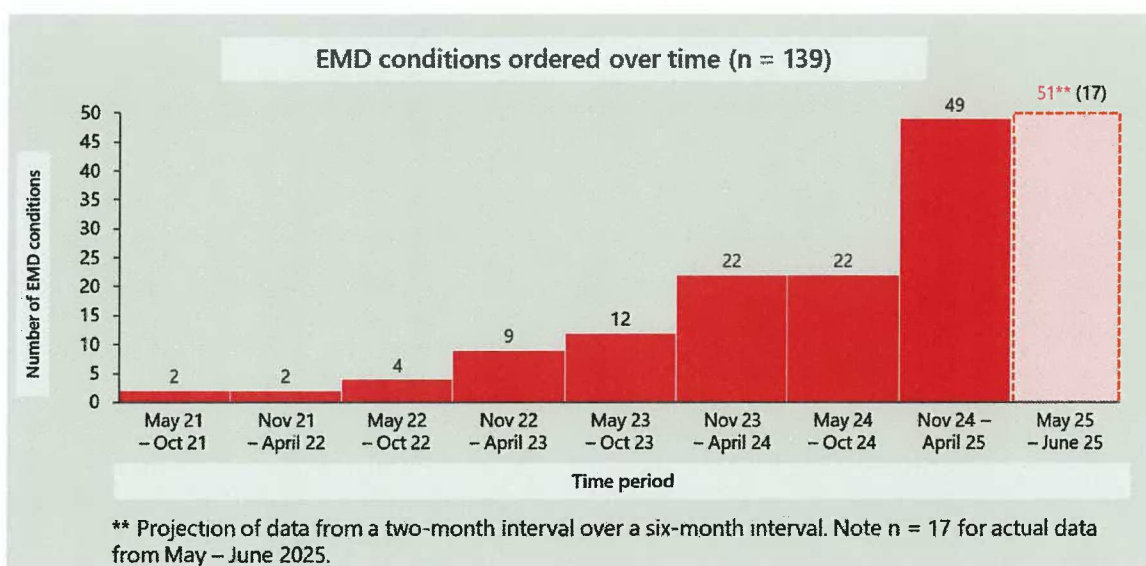
Overall, 55% (137) of suitability assessments that found a young person suitable resulted in an EMD condition. In the remaining cases where youth were found suitable but an EMD was not ordered, 60% (92) had bail refused, 20% (31) were granted bail without an EMD, 4% (6) were sentenced, and 16% (24) were refused for other reasons. As with suitability assessments, the number of EMD conditions ordered increased over time, with higher usage in later stages of the trial.

Overall, 139 EMD conditions were ordered for 116 young people, with some receiving more than one order. In two cases an EMD condition was ordered despite being deemed unsuitable. In these cases, YJ staff report magistrates overruled a finding that there was no suitable support person, making adjustments to bail conditions and encouraging the support person to agree to them.

The total use of EMDs represents a relatively low use among the total eligible population. To illustrate this, the total number of EMD conditions represents an amount equal to 13% of SROs identified during the same period. This indicative comparison is calculated based on the annual estimated number of young people with EMD conditions (54) and the annual estimated number of SROs at all EM trial sites (412). While the eligibility criteria for the EM trial may include both SROs and non-SROs aged 15-17, meaning that this comparison is indicative only, it still provides an approximate gauge to contextualise EMD usage.¹⁶ Ultimately, this comparison reinforces the view that EMD conditions were ordered selectively for an already narrowly defined target cohort. This same position was also affirmed by some YJ staff, who described usage of EMD conditions seeming low in areas where they were located, with some indicating no conditions had been ordered at all.

Figure 10 below shows the number of EMD conditions ordered over time. Note that data from May-June 2025 is projected from a 2-month interval to 6-month interval for comparability.

Figure 10 | Total EMD conditions ordered over time

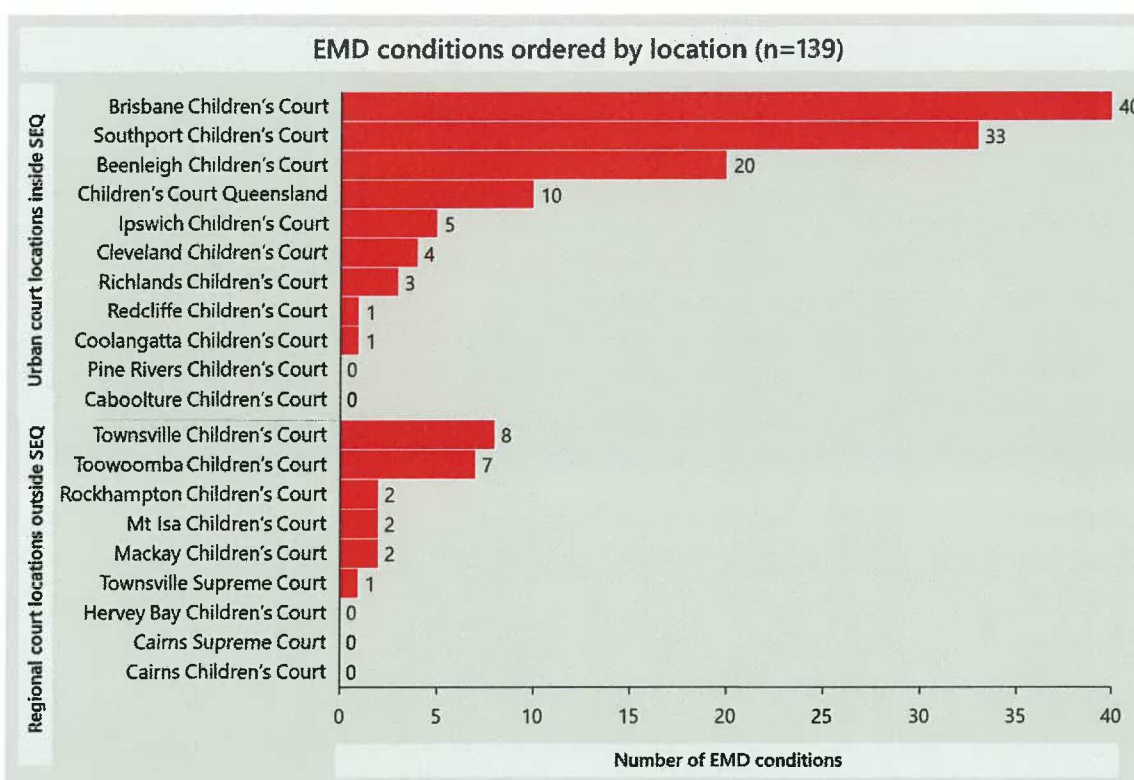


¹⁶ For comparison, VIC estimated that up to 50 young people would be able to participate in their trial of electronic monitoring over a two-year period. Premier of VIC. At, <https://www.premier.vic.gov.au/electronic-monitoring-keep-bailed-youths-track>

When EMD conditions were ordered, they were concentrated in South East QLD

The EM trial is available in 13 locations across QLD. Across all locations, a total of 84% (117) of EMD conditions were ordered in urban SEQ, compared to 16% (22) in regional areas outside SEQ. This indicates EMD conditions were more likely to be ordered for young people in SEQ, likely due to factors influencing suitability and judicial decision-making (as unpacked in section 3.2). Figure 11 below outlines usage of EMD conditions by location.

Figure 11 | EMD conditions ordered by location



3.2 Reasons for low usage are evident at the thresholds of suitability assessments and court decision making

While eligibility is a necessary starting point, interviews with magistrates and other stakeholders revealed reasons why some young people may not be found suitable or receive an EMD condition despite being eligible. Young people may be found unsuitable due to practical and contextual barriers.

These barriers include:

- Unreliable telecommunications infrastructure:** QCS representatives noted that EMDs rely on mobile connectivity, which can be limited in regional and remote areas, and preclude young people from being deemed suitable. This concern was echoed by multiple QPS and YJ staff, who agreed that EMD effectiveness depends on where the young person is located (see adjacent quote).

'If devices cannot connect to the network, they simply cannot function. Suitability assessments play a key role in ensuring that individuals subject to EMD live in and visit areas with reliable mobile coverage.'

QCS representative

- **Housing requirements:** The requirement to nominate a single, stable accommodation address can be difficult for vulnerable young people, particularly those in emergency accommodation or with non-traditional family structures. Staff noted that this requirement may not align with First Nations cultural practices, where young people may move between multiple homes. While some flexibility has been observed in practice, it remains unclear whether multiple addresses can be formally nominated.
- **Mobile phone access:** Legal representatives observed that young people often have their phones seized during arrest, which can temporarily disqualify them from EMD suitability. The task for YJ staff to replace phones is complicated by ID requirements, telecom coordination, and lack of support, especially for those in residential care. Staff also noted that tight court timeframes make it difficult to arrange phone access in time for assessments.
- **Lack of a reliable support person:** YJ staff described the key role of support people in helping young people comply with EMD conditions. They reported being hesitant to pass some young people as suitable, knowing they would likely struggle to comply with EMD conditions without reliable support.
- **Capacity to understand:** YJ staff reported that while some young people can recite information from rote memory, this does not always reflect genuine comprehension.

Some YJ staff suggested suitability assessments focus too heavily on assessment against the binary metrics outlined above. Some raised concerns that the current approach lacks flexibility to consider contextual factors, such as a young person's attitude, potential to succeed, or broader circumstances. As a result, the suitability assessment may exclude young people who could benefit and include some who may not.

The court may decide not to order EMD conditions due to barriers such as lack of information about EMD outcomes

Courts play an important role in determining whether to order an EMD and consider multiple factors that balance the positive and negative implications of their use. Out of a small sample of magistrates interviewed, there were expressions of support for EMDs as an important option to consider as part of bail conditions; however, several factors may influence the court's decision not to order them. These factors include:

- **Lack of evidence of positive EMD outcomes:** Magistrates suggested that defence lawyers often proposed EMDs as part of standard bail conditions but lacked clear justification or understanding of their utility. Magistrates reported the nature of their role means they mostly see negative outcomes, such as breach of bail, device damage, or offending while wearing an EMD; they rarely receive feedback on positive impacts – this may reduce confidence in their use.
- **Questions about the effectiveness and viability of EMDs in regional locations:** YJ staff highlighted the difficulty of escorting young people long distances from courts or detention centres to watch houses, particularly when air travel is involved and strict regulations limit how young people can fly while wearing an EMD. Limited telecommunications infrastructure may also impact the perceived reliability of monitoring. These challenges may influence judicial confidence in ordering EMDs where fitting and monitoring are less convenient, effective or timely.
- **Differences in views about custody versus conditional release:** Legal representatives recalled sensing initial hesitation within the courts about whether EMDs were appropriate for young people when the trial was introduced. Some magistrates expressed concern about the burden and stigma associated with EMDs (for young people required to manage and wear the device). These factors may influence decisions about whether to remand a young person in custody or release them into the community with or without monitoring conditions.

- **Varying levels of information and knowledge:** Magistrates and lawyers described receiving minimal guidance and opportunities for information sharing about the trial due to a lack of formal communication and training. One reported relying on informal sessions and self-directed learning, which contributed to a cautious approach when considering EMD orders, particularly in unfamiliar or complex cases (see adjacent quote). Legal stakeholders expressed an interest in having greater access to information about the performance of EMDs and arrangements to support their effective operation, in order to make more informed decisions in advocating for and/or ordering their use.

'Realistically, the only education we receive about anything is self-education ...There are limited ways to get the knowledge out to us without us seeking it out.'

Magistrate

3.3 EMD conditions were largely used with medium length orders to reinforce curfews

EMDs were mainly used to accompany medium-length orders

The average duration of an EMD order was 67 days, with a median duration of 53 days. This means that the majority of young people spent approximately 8 weeks under an EMD condition. In turn, it is clear that EMD conditions were largely used with medium length orders. However, there were some outliers to this general trend, with the shortest order being 5 days and longest being 449 days.

Most bail services and YJ staff cautioned against extended periods of EMD duration. Some suggested that EMDs should only be fitted for short, targeted periods as young people became less compliant when made to wear the device for an extended time. Conversely, parents generally described wishing their children received longer EMD orders, observing how they needed time to adjust and break patterns of behaviour to achieve meaningful long-term change (see adjacent quote). Young people themselves did not express clear views either way about the duration of their EMD conditions.

'It just was not long enough...That sense of safety net dissipated too soon. Once the EMD was off, my son was in that loop again straight away.'

Family-member

When EMDs were used, they were almost always ordered with a curfew condition

All EMD episodes, excluding two, received a curfew condition with their EMD order which required them to stay at a particular address between certain hours of the day or night. Stakeholders reported that, in some cases, young people subject to curfew conditions were permitted to leave their residence with a nominated person, such as a parent, carer, family-member, or bail services staff-member, if specified in their individual court order.

Of all EMD episodes, 39% (54) had a 24-hour curfew, 39% (54) a 12-hour curfew, and 21% (29) a curfew of another duration. This aligns with the intended use of EMDs (noted above) in monitoring location to track compliance with bail conditions. The consistent pairing of EMDs with curfew conditions reflects how magistrates most often view EMDs as a means to enforce and monitor location-based compliance, rather than as a general tool for behaviour change or other purposes. This pattern suggests that, in practice, magistrates apply their discretion to order EMDs in cases where they see a clear and appropriate use case, primarily for tracking adherence to curfew requirements, further narrowing the circumstances in which EMDs are applied.

4 Findings: outcomes of the EM trial

This section presents the evaluation findings regarding outcomes:

1. EMD conditions were associated with high bail completion, reduced offending, lower victimisation, and less time in custody.
2. EMD condition outcomes varied depending on demographic, characteristic and curfew factors.
3. EMD outcomes were influenced by the young person's motivation, family situation, and engagement with supports.
4. The EM trial had unintended outcomes both positive and negative.

These points are discussed in turn below.

4.1 EMD conditions were associated with high bail completion, reduced offending, lower victimisation, and less time in custody

EMDs were associated with high bail completion

Overall, 114 EMD orders had been completed as of 30 June 2025, with 25 episodes ordered but not yet completed. Of the 114 with completed EMD orders, 72% (82) resulted in successful completion of bail conditions. Successful completion was defined as being sentenced, having bail varied or having the charges dismissed. Of the successful episodes, 53% (60) were sentenced, 18% (21) had their bail varied and 1% (1) had their charges dismissed. The remaining 28% (32) of episodes were unsuccessful, all due to having bail revoked.

Reinforcing the idea that EMDs were associated with high bail completion, a sample of staff from YJ, QPS, and QCS generally viewed EMD conditions as effective and noted they supported compliance for at least some young people. While some bail services staff raised concerns, most agreed EMDs were effective for certain individuals.

EMD conditions were associated with reduced offending severity and frequency

To assess the effects of the EM trial on reoffending and victimisation, the EMD episodes for which order outcomes were known (the EMD group, $n = 114$) were compared to other bail episodes that began during the trial period (the comparison group, $n = 1,368$). The EMD group had a reoffending rate (63%) that was 18 percentage points lower than the comparison group (81%). Statistical modelling that accounted for episode characteristics found that the EMD condition resulted in a 24% lower likelihood of reoffending than the comparison group (a 21 percentage point reduction in reoffending rate). This difference was statistically significant and also controlled for observed differences between the EMD and comparison groups. This suggests that an EMD condition can reduce the reoffending rate of young people during bail.

Episodes in the EMD group committed an average of 4.4 offences during bail, while those in the comparison group committed an average of 7.4 offences. In addition, 14% (16) of episodes in the EMD group allegedly committed a serious offence during the monitoring period compared to 26% (350) in the comparison group.

These findings suggest EMDs were associated with a lower rate, frequency and severity of offending. Reinforcing this idea, most young people and family-members said that EMD conditions helped young people avoid offending, even though some young people in the EMD group still offended while being monitored.

EMD conditions were associated with lower victimisation

Of the episodes in the EMD group, 40% (46) committed offences involving victims during bail, while of those in the comparison group, 66% (909) committed offences involving victims. On average, episodes in the EMD group committed 1.5 offences with victims during bail, while those in the comparison group committed 3.7 offences with victims. This means that EMD episodes committed 2.2 fewer offences with victims on average than those in the comparison group.

EMD conditions were associated with reduced time in custody

46% (52) of EMD episodes spent time in custody during bail, compared to 96% (109) in the three months before the episode. Furthermore, EMD episodes spent an average of 8.7 days in custody during bail, compared to 36.9 days in the three months before the episode. This shows a reduction in time spent in custody during an EMD episode compared to the period before monitoring.

Offending during an EMD episode was strongly associated with being held in custody, and vice versa. 98% (41) of EMD episodes who did not offend during their monitoring period also did not spend any time in custody. Conversely, 71% (51) of those who did offend during their monitoring period spent time in custody.

The Atkinson Report on Youth Justice found that even short periods of remand in custody were linked to future remand episodes and more serious offending.¹⁷ Stakeholders also supported this view, generally agreeing that EMD conditions reduce the number of young people remanded in custody, with some suggesting that all young people with EMD conditions would otherwise have been detained. While other stakeholders reported EMDs themselves may carry some criminogenic risks, young people who receive an EMD are already deeply involved in the justice system. (As noted above, to be eligible for an EMD, a young person must have at least one previous conviction for an indictable offence or have been charged with a prescribed indictable offence in the preceding 12 months, meaning they are already considered high-risk.)

4.2 EMD condition outcomes varied depending on demographic, characteristic and curfew factors

Offending and bail completion outcomes varied between young people with different demographics and characteristics

Outcomes related to offending and bail completion under EMD conditions varied, as shown in Figure 12 and Figure 13. However, the reoffending rate was lower in the EMD group across all cohorts.

¹⁷ Report on Youth Justice, from Bob Atkinson AO, APM, Special Advisor to Di Farmer MP, Minister for Child Safety, Youth and Women and Minister for Prevention of Domestic and Family Violence. 8 June 2018. Available at, <https://www.publications.qld.gov.au/ckan-publications-attachments-prod/resources/5229878d-099e-4c2f-902c-94d2bedddfa3/17170-youth-justice-report-5.pdf>

Figure 12 | Percentage point difference in reoffending rates between EMD and comparison groups by demographic

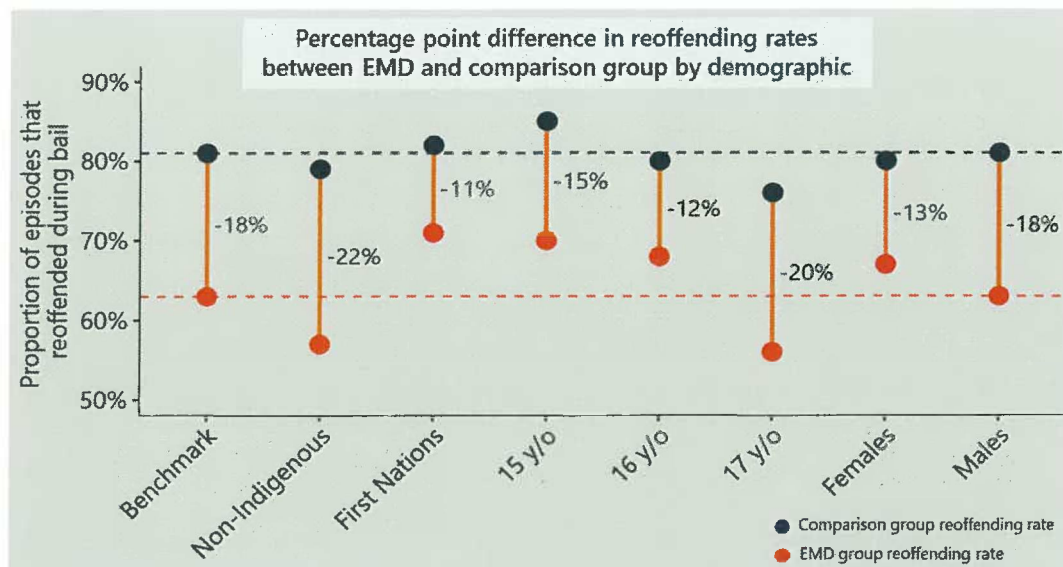
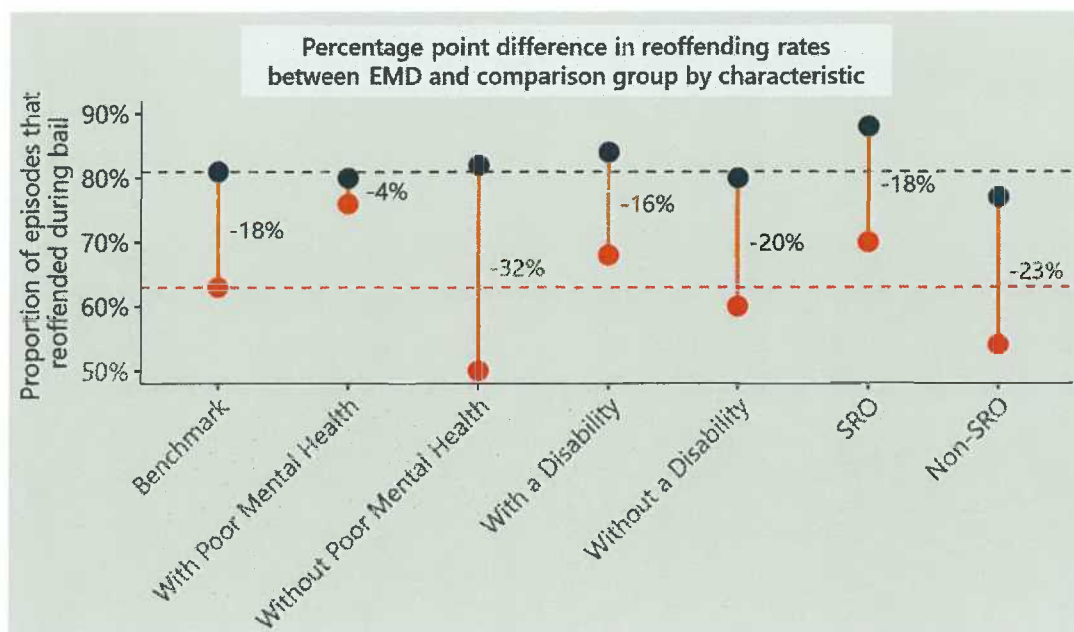


Figure 13 | Percentage point difference in reoffending rates between EMD and comparison groups by characteristic



Episodes with identified mental health challenges showed the smallest difference in reoffending outcomes under EMD conditions. In the EMD group, 76% (41) of episodes with poor mental health reoffended, compared to 80% (444) in the comparison group. This represents a modest 4 percentage point difference. First Nations youth and 16-year-olds had the next smallest difference in reoffending rates, with 11 percentage points and 12 percentage point respectively.

In contrast, episodes without poor mental health reoffended in 50% (25) of cases in the EMD group, compared to 82% (636) in the comparison group. This represents a 32 percentage point difference. These

findings suggest that EMDs are more effective at reducing reoffending among episodes without mental health challenges. Reinforcing this idea, stakeholders noted that the stress and isolation linked to curfews and inclusion zones may worsen existing mental health conditions, potentially limiting the impact of EMDs on reoffending for episodes with existing mental health challenges.

The bail completion rates of EMD episodes showed similar variation between sub-groups, as shown in Figure 14 and Figure 15.

Figure 14 | Bail completion rates of EMD episodes by demographic

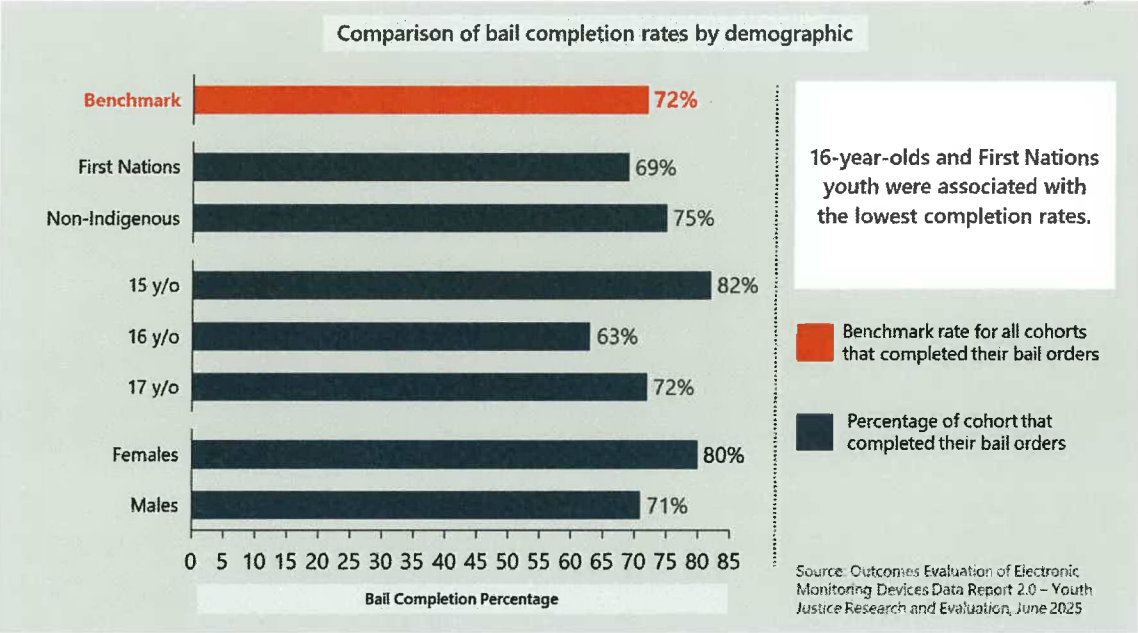
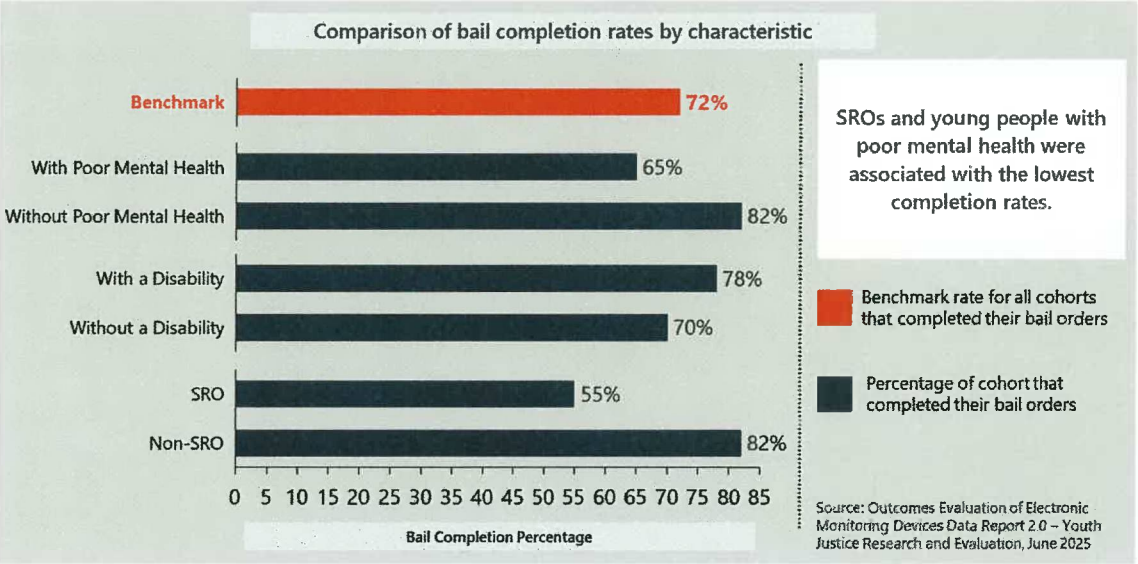


Figure 15 | Bail completion rate of EMD episodes by characteristic



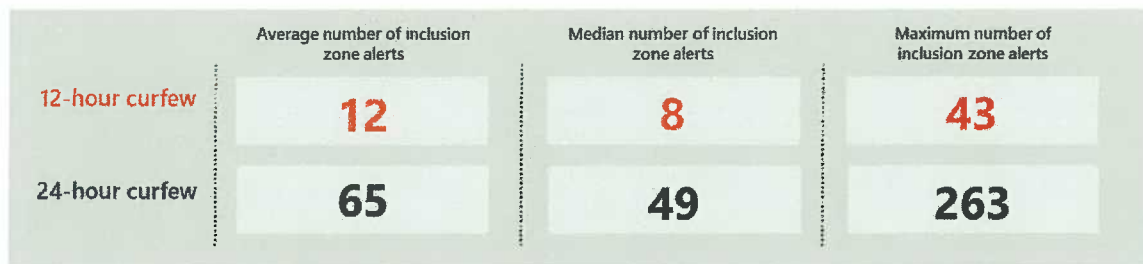
Bail completion rates were lowest among 16-year-olds, SROs, and episodes with poor mental health. Only 63% (26) of 16-year-olds successfully completed their EMD episodes, compared to 82% (27) of 15-year-olds and 72% (26) of 17-year-olds, although stakeholders reported maturity was more indicative of success than

age alone. Similarly, 64% (41) of SRO episodes completed bail successfully, compared to 82% (41) of non-SROs. Episodes with poor mental health had a 65% (35) completion rate, while those without poor mental health completed at an 82% (41) completion rate. These patterns suggest that age, offending history, and mental health status are factors influencing EMD completion.

There was a relationship between curfew length and compliance, with 12-hour curfews associated with better compliance outcomes than 24-hour curfews

As mentioned above, EMD conditions are almost always accompanied by a curfew condition. Compared to 12-hour curfews, 24-hour curfews were associated with a disproportionately higher frequency of alerts. Figure 16 below summarises the distribution of inclusion alerts for 24-hour and 12-hour curfews.

Figure 16 | Difference between 12-hour and 24-hour curfew inclusion zone alerts



Episodes with 24-hour curfews were associated with over five times as many inclusion zone alerts across each category. Inclusion zone alerts are generated by the EMD wearer departing their curfew location. Those with 12-hour curfews had a median of 8 confirmed inclusion zone alerts, with the median 41 alerts fewer than the alerts from 24-hour curfew episodes. Although episodes on 24-hour curfews may have had more complex risk factors affecting their compliance, this data suggests they generally struggled more with adhering to curfew requirements.

4.3 EMD outcomes were influenced by the young person's motivation, family situation and engagement with supports

EMDs facilitated compliance through increased monitoring, supervision, and support

Stakeholders reported that other contributors to the effectiveness of EMDs in supporting bail compliance and deterring offending included:

- **Surveillance** – Young people said they feared if they offended while wearing an EMD they would be caught immediately.
- **Reduced peer influence** – Young people said EMDs reduce their contact with peers who encourage them to offend (e.g., due to these peers' own fears of surveillance).
- **Provision of a physical reminder** – Some young people said the EMD served as a physical reminder of their bail conditions or the surveillance they were under.

'I was told the EMD was my last straw. I expected to go to detention instead, so I was excited to get the EMD. Now I think more about what I am doing. I say no to meeting my mates when they are out, and I have complied with all of my conditions.'

Young person

Outcomes were strongly influenced by the young person's intrinsic motivation, family environment and the presence of a role model

Many stakeholders reported that EMDs are more effective for young people who demonstrate a willingness and capacity to succeed. For example, legal stakeholders suggested EMDs work best for young people with more protective factors (such as a stable family environment). However, YJ staff said it can be difficult to predict who will succeed with an EMD, with some young people with a history of bail non-compliance performing surprisingly well on the trial.

Stakeholders reported that reliable support people are critical to the effectiveness of EMDs, helping to hold young people accountable and support compliance with their EMD conditions. Some young people indicated that receiving support from relatives they admired motivated them to try and complete the trial.

One participant recalled having weekly phone calls with his grandmother about the EMD, which was 'important' and 'helpful' to keep him on track. YJ staff also indicated that support people were vital to reminding young people to charge their EMDs daily and troubleshooting issues with YCRTs. Relatedly, some participants indicated a desire to respect and be mindful of their support people. They described wanting to wear long pants to conceal their EMD in public as to avoid embarrassing their support people, which suggests how support people may influence young people's behaviour and by extension their compliance.

'When he did have it, he was able to go out in the community with a little bit of confidence in himself in knowing that he's not going to get himself into trouble.'

Family-member

YCRT engagement was associated with successful completion of EMD conditions and reduced offending

Episodes that engaged with YCRTs were more likely to complete their conditions successfully. 74% (77) of episodes that engaged with YCRTs completed their orders successfully, compared to 50% (5) of episodes that did not engage. However, only 10 completed episodes did not engage, which is a small sample for comparative purposes.

Further reinforcing this association, successful episodes had a higher average number of YCRT interactions (17.2) than those that were unsuccessful (10.6). This data again indicates that more frequent engagement with YCRTs may contribute to better outcomes, possibly by providing consistent support and monitoring to avoid issues of non-compliance that may escalate to revocation of bail.

Additionally, episodes that engaged with YCRTs were less likely to reoffend during their EMD period. Data shows that 62% (64) of those that engaged with YCRT reoffended, compared to 80% (8) of those that did not engage. Both had a median of 2 offences, however, the episodes that engaged with YCRTs had a slightly higher average number of offences (4.5) compared to those that did not engage (4.2). This higher average offence number may suggest YCRTs worked with more complex cases. These findings are consistent with a previous evaluation that found YCRTs supported an overall reduction in the average number of youth offences.¹⁸

Bail services engagement was associated with successful completion of EMD conditions and reduced offending

Episodes that engaged with bail services were more likely to complete their conditions successfully.¹⁹ 81% (50) of episodes that engaged with bail services completed their EMD conditions, while only 62% (32) of episodes that did not engage with bail services completed their EMD conditions. This data suggests that episodes that engaged with bail services were notably more likely to complete their EMD conditions, with

¹⁸ Youth co-responder teams evaluation. Department of Children, Youth Justice, and Multicultural Affairs. At, <https://www.youthjustice.qld.gov.au/our-department/research-evaluations/evaluations/ycrts>

¹⁹ Bail services data draws on engagement with the IBI program.

bail services engagement appearing to play a supportive or stabilising role in helping young people comply with requirements. This idea was reinforced through consultations with YJ staff and family-members who reported that bail services helped young people and families continue on the program (see quote below).

Additionally, there was a relationship between engagement with bail services and decreased offending. 58% (36) of episodes that engaged with bail services reoffended during their EMD period, compared to 69% (36) of those that did not engage with bail services. Further, episodes that engaged with bail services had a lower average number of offences (3.7) compared to those that did not engage (5.3). These findings align with evidence from a previous evaluation that found participation in bail services was likely to result in a reduction in offence frequency and seriousness.²⁰

‘Without bail services, curfews would be especially difficult. Young people can only leave for approved activities, so these services are vital for giving families a break.’

YJ staff-member

Stakeholders emphasised the centrality of wrap-around supports to the effectiveness of EMDs

Stakeholders generally agreed wrap-around supports are essential to the effectiveness of EMDs. For example, 58% (15) of survey respondents (YJ staff) agreed EMDs would not work as well without wrap-around services, compared to 15% (4) who disagreed, although this sample size was small. Similarly, families described wrap-around supports such as YCRT and bail services as reliable and valuable.

Magistrates also viewed YCRTs as a constructive service for conducting EMD checks, noting that their qualified staff can use interactions with young people to encourage positive behaviour change. Similarly, YCRT team-members themselves also observed that young people who might not otherwise engage with wrap-around services do so while on EMD conditions as they provide opportunities for them to leave their house under curfew conditions. They said that young people may then maintain this engagement after their EMD conditions are complete, having built rapport with workers and enjoyed the programs. Young people and families described how their interactions with wrap-around services motivated them to maintain positive behaviours during and after their EMD conditions (see adjacent quote).

‘I have my favourite workers. They take me out to help me with my goals. They make it easier and help get me back in line. I do programs like emotional regulation training at the park with them.’

Young person


Alongside recognising the role of wrap-around services in supporting compliance, multiple stakeholders also acknowledged the role of YCRT team members in delivering operational activities such as responding to alerts.

4.4 The EM trial had unintended outcomes both positive and negative

Stakeholders identified positive unintended outcomes of EMDs, including strengthened engagement with wrap-around services, more time spent with family, and peace-of-mind for parents and families. These benefits led some to suggest EMD conditions could be used more widely, such as post-detention, potentially as part of step-down pathways to help reintegrate young people into the community.

Negative unintended outcomes included technical issues (e.g., cancelled alerts), difficulty complying with strict curfews, physical discomfort, stress for family-members, and increased risk of incarceration for young people without stable housing (due to suitability criteria). Broader concerns included EMDs being viewed as a ‘badge of honour’, and EMDs creating stigma that limited pro-social participation (including in education).

²⁰ IBI and BSS Evaluation. Nous Group. 2024.



Some YJ staff held a view that lawyers may also progress legal matters less urgently (because young people with EMDs are not in custody).

Some stakeholders expressed concern that heightened monitoring through EMDs could increase the likelihood of young people being charged with additional offences. While this was a perceived risk, the trial data indicated that serious offending during EMD episodes was relatively uncommon at 14% of episodes and magistrates noted that breaches of bail were rarely the sole reason for court returns, typically occurring alongside other offences. Additionally, while 59 EMD episodes recorded a breach of bail, only 22 resulted in bail revocation. In the context of the thousands of alerts generated over the course of the trial (see Section 5), breach of bail resulting in revocation was rare. This suggests that discretion was often applied.

Views on the cultural safety of EMDs varied. Some stakeholders said First Nations young people may be excluded (due to suitability criteria). Consistent with this, participation rates were lower among First Nations young people. Conversely, others noted EMDs can support connection to family and community by avoiding remand in custody.

5 Findings: operation of the EM trial

This section presents the evaluation findings regarding operation:

1. Core trial activities were cumbersome and resource-intensive to deliver.
2. Additional wrap-around support was delivered to help young people comply with EMD conditions, especially by YCRTs.
3. The operational burden of the trial was palpable.

These points are discussed in turn below.

5.1 Core trial activities were cumbersome and resource-intensive to deliver

Device fitting was reportedly challenging and resource-intensive, though most young people adapted to the devices over time

Stakeholders involved in EMD fitting broadly reported that the process needs streamlining. In a survey, QPS and YJ staff frequently cited challenges with EMD fitting, describing it as a 'lengthy and logistical nightmare' that can take 'many hours' per young person. They also highlighted the need for improved interdepartmental communication and broader training for watch house staff to support fitting and removal.

Delays of up to seven days in organising device fitting and removal were reported due to shortages of trained staff, alongside issues with device availability in some regions. However, QCS has advised that devices have been made available at all locations, which suggests issues with inventory management and/or communication.

YJ staff expressed a desire for greater flexibility in fitting locations, suggesting that fittings could occur at court or detention centres to avoid transporting young people to watch houses, which was described as particularly burdensome in regional areas (see quote above). One family-member recounted travelling a long distance for a quick refitting, and questioned why YJ staff conducting routine bail checks could not perform the adjustment.

Young people generally reported fewer issues with the device fitting than staff. Less than half of young people and families interviewed raised an issue with the EMD fitting process, and most suggested that the process was lengthy but not overly cumbersome. Multiple young people described being required to return

'When an EMD is ordered, QPS often has to transport young people to a different location to have the device fitted in the watch house. If that's not possible by car, there are major barriers to how a young person can fly with the device...We had a young person spend an extra five days in custody just waiting for flights.'

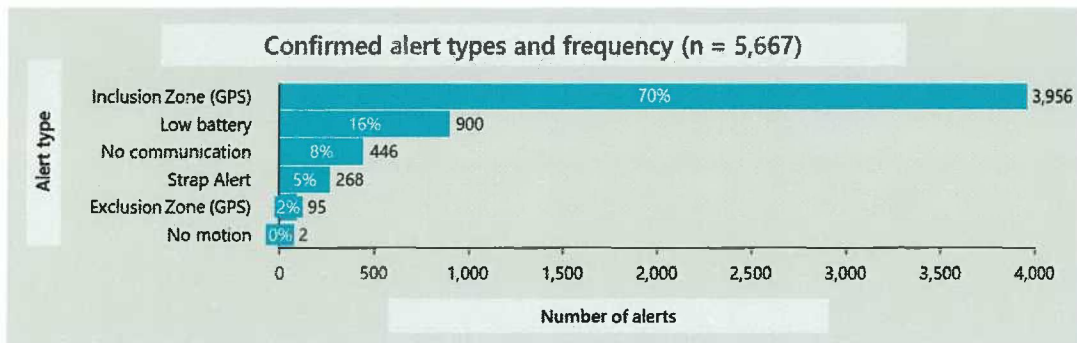
YJ staff-member

to the watch house after their initial fitting to have their EMD adjusted, sometimes up to four times, due to alleged technical issues or discomfort with how the device was fitted. Despite these teething issues, most of the young people and families interviewed expressed that the device itself was generally reliable and worked properly, once it had been fitted or refitted correctly. The vast majority of young people expressed that the device was bothersome to wear, especially at first, but they 'got used to it' in time. A small number of young people did experience ongoing discomfort and difficulty sleeping with their device even after it had been fitted correctly.

Staff, young peoples and families had to manage a high volume of EMD alerts generated, with varying experiences of the alert system

On average, staff managed 50 confirmed and 56 cancelled alerts per EMD episode, with a total of 12,020 alerts triggered between May 2021 and June 2025. This total includes 5,667 confirmed alerts and 6,353 cancelled alerts. 70% (3,956) of confirmed alerts related to inclusion zone alerts, while others involved low battery, communication failures, or strap issues. This suggests that the vast majority of alerts related to young people not being within a specified inclusion area at a given time, as determined by their curfew. Every alert required action from QCS, QPS or YCRT. Figure 17 below shows the total confirmed alerts generated across the trial.

Figure 17 | Confirmed alert types



In addition, nearly all EMD episodes involved police street checks and intelligence requests, and over half involved a breach of bail occurrence, highlighting the ongoing cycle of monitoring and follow-up. 96% (110) of EMD episodes involved police street checks where police respond to unusual activity, with each EMD condition experiencing an average of 14 checks. 88% (110) of EMD episodes involved intelligence requests, where QPS was seeking information on the young person. 52% (59) of EMD episodes involved a breach of bail occurrence.

Staff generally reported that alerts were handled well, though there were mixed views about the clarity and consistency of protocols, especially for low-level alerts. QPS staff held mixed views on whether low-level alerts (such as low battery or minor breaches) are managed without escalation, suggesting a lack of clarity in protocols. However, they generally reported their interactions helped young people comply with EM orders, and many believed they could distinguish between technical faults and intentional breaches. QCS staff generally agreed that the Alert Protocol effectively prioritises high-risk alerts over minor issues. However, they felt that current EMD systems are ineffective, highlighting a potential area for review and improvement.²¹

²¹ These insights were primarily drawn from a survey with a small sample of QPS and QCS staff. Due to the small sample size, exact results are not reported; instead, findings are discussed thematically. These views do not necessarily reflect QCS's general position.

A small number of young people and families reported recurring technical problems with alerts

The types of issues observed by families and young people mainly related to connectivity, such as alleged false inclusion zone alerts generated by GPS drifts and spikes. Young people recalled being contacted by YCRTs to investigate notifications of device tampering or curfew breaches, while they claimed to be simply 'lying in bed'. Young people also reported issues with signal loss, particularly when commuting through regional areas, but even when at home.

YJ Managers also referenced some issues with patchy connectivity. They also recalled having to regularly assist young people with charging their devices daily to maintain alerts connection, as they struggled to remember to do so themselves.

5.2 Additional wrap-around support was delivered to help young people comply with EMD conditions, especially by YCRTs

YCRTs engaged extensively with young people

YCRTs recorded 1,991 engagements with young people in the EM trial. Across all EMD episodes, 91% (127) engaged with YCRT services, with an average of 14 engagements per episode. Most episodes engaged between 1–9 (65 episodes) or 10–19 times (31 episodes).

Of all interactions, nearly 55% (1,087) related to bail compliance, averaging 9 engagements per episode. These interactions form part of routine monitoring and support and are not necessarily indicative of bail non-compliance. Additionally, 20% (384) of YCRT engagements were service calls initiated by other QPS crews. Follow-ups on prior issues accounted for 12% (245), and EMD alerts triggered by monitoring devices made up 4% (87). Other engagement types, such as home visits, signal issues, and transport, each represented less than 2% of total interactions. This distribution highlights YCRTs' primary focus on bail compliance and reactive support in coordination with QPS.

Bail services engaged with around half of EMD episodes

Engagement with bail services was less widespread than YCRT.²² 51% (71) of all EMD episodes engaged with bail services, with most (64) of these accessing intensive case management support and a small number accessing intensive family (11) or community connector (3) supports. As some episodes engaged with multiple types of support, the cohorts are not mutually exclusive.

Lower engagement with community-connector based supports is somewhat anticipated, as these are typically designed for young people at earlier stages of risk and may not be directly targeted at those already subject to EM. However, the limited usage of more intensive family-focused supports is less expected, especially given their role in helping young people and their families navigate complex challenges and maintain compliance. During consultations, no young people or family-members referenced these types of supports, suggesting that awareness of them may be low. Additionally, some young people indicated a general apathy to participate in bail services altogether, preferring to have independent time to themselves, which may further explain the low usage.

5.3 Operational demands and challenges were substantial

The EM trial created a high administrative burden

As a technology-based monitoring mechanism, the use of EMDs necessitates effective operational arrangements to administer and maintain them. This operational burden is carried largely by QCS through

²² Bail services data draws on engagement with the IBI program.

monitoring and QPS and YCRT teams through supervision and response, but it also impacts young people and their families. Concerns about the operational burden of the trial and intrusive nature of EMDs were held across all stakeholders. Key administrative issues raised included:

- Large volumes of paperwork which require manual printing and scanning
- Substantial time investment from staff learning EMD processes around their other role commitments
- Expectations for YJ staff to support watch house fittings outside and beyond their rostered hours
- Difficulty organising mobile phones, sim cards and identification documents to satisfy suitability assessment criteria in short timeframes.

Some YJ and QPS staff expressed concerns that *current resources were inadequate to ensure effective and efficient operation of the trial*. During consultations, YJ staff highlighted that the administrative burden of the program was not fully reflected in its design and noted impacts on staff wellbeing, particularly when caseworkers were required to stay late to attend watch house fittings.

There was a lack of information and training to support implementation

The operating model for the trial was achieved by accessing technology and resources through QCS, QPS and YJVS. The initial introduction of the trial was rapid and without time to identify many workflows or processes. Various stakeholder groups highlighted a lack of appropriate training and resources, which in some cases contributed to a lack of role clarity:

- **YJ Managers reflected that the EM trial was rolled out rapidly,** and they had minimal opportunities to discuss and clarify procedures with program designers. While staff observed that their confidence and competency is increasing over time and with practice, they noted that each service location is likely to provide a different response which can lead to inconsistencies in delivery. Implementation challenges for YJ staff were notably consistent across both older sites which had participated in the trial from 2021-2023 and newer sites that joined from 2024.

'There's always been something missed in communication or in process...I was surprised how complicated it felt.'

YJ staff-member
- **Legal representatives felt unprepared to support EMDs in court** due to lack of program communication to inform their own knowledge base. They described being ignorant of wrap-around services designed to support the EM trial after it was rolled out, which limited their ability to holistically advocate for the initiative as a legal condition. One magistrate observed that defence lawyers could benefit from clearer guidance about the trial including suitability assessments.

'People cannot advocate for EMDs if they do not know they work, or they will be laughed out of court.'

Legal representative
- **YCRT team members indicated that they received insufficient information about breaches and alerts,** which has reduced their sense of role clarity, particularly regarding which agency is responsible for handling alert notifications in the first instance. YCRT team members recalled instances of double handling alerts between themselves and QCS and other QPS teams.
- **QPS staff suggested their teams have been investing heavily in statewide training** to address some of the resource gaps outlined above. They revealed that a taskforce has provided training to other delivery agencies across QLD to equip staff with program knowledge, which is reflective of the growth of the trial. While this training responds to a recognised need for greater capability, the small sample of staff interviewed did not comment on it directly, potentially indicating limited awareness or reach. These staff continued to express a desire for more training, suggesting further efforts may be needed to ensure training initiatives are well-communicated and accessible across all relevant teams.

- QCS staff noted that other agencies would benefit from additional training in EMD equipment. They observed that YCRT and QPS staff sometimes lacked the technical expertise to troubleshoot complex alert issues, which could delay resolution. Many QCS staff felt that current resources and supports were insufficient to enable their effective participation in the trial.²³ Resourcing challenges were also reported by YJVS and QPS staff.

Difficulties with communication, role clarity and information sharing were major barriers to effectiveness and efficiency

Delivery staff highlighted poor information sharing between agencies as another major barrier to effective EMD use. QPS staff noted that red tape and uncertainty around data protocols often hinder timely responses to alerts. They advocated for clearer, more efficient data-sharing arrangements, emphasising the shared mission of QPS, QCS, and YCRT to support EMD operations collaboratively.

QCS staff echoed these concerns, highlighting the need for improved visibility of alert notifications across agencies. They suggested that reducing data-sharing barriers could improve responsiveness and enhance community safety. Many QCS staff felt that communication between agencies did not support effective EM practice, and interagency coordination was the most frequently cited challenge in monitoring alerts and supporting compliance.²⁴

Agency feedback also noted that the current system for monitoring and communicating EMD alerts and breaches is sub-standard and carries risks. Although the multi-agency working group developed detailed guidelines and information-sharing protocols, including workflow charts for QPS and YCRT outlining roles and suggested actions, stakeholders still reported confusion around responsibilities and limited understanding of how alerts should be actioned. This underscores the need for a reliable central control and monitoring system to minimise risks and ensure alerts are actioned appropriately.

While existing legal frameworks do provide a foundation for interagency coordination, their practical application has at times constrained consistent information exchange. It was suggested that the MoU, which governs data sharing protocols for the trial, could be reviewed and updated.

Despite these issues, staff attitudes toward collaboration were generally positive. Most YJ staff felt that agencies and stakeholders worked well together to support young people with EMDs. Consultations reflected a similarly mixed picture: YJ Managers described YCRT team members as ‘good partners’ who helped build understanding of program procedures. Some legal representatives and YCRTs reported feeling disconnected from other agencies, particularly QCS.

Some young people and families expressed frustration with agency communication processes

Young people reflected that their messages to QPS, QCS, and YJ teams were sometimes poorly documented, and as a result, they had been reprimanded or breached for inclusion or exclusion zone violations, despite notifying the teams of their whereabouts and explaining mitigating circumstances. Family-members also reported double handling of alert handling by YCRT and QCS teams. They described receiving multiple phone calls to check their whereabouts, despite having already communicated their movements to one team (see adjacent quote).

‘It is obvious the monitoring team and police do not communicate... Every time we left the premises we would get two calls, despite already calling to explain our movements. That to me was ridiculous and a pain.’

Family-member

²³ These insights were primarily drawn from a survey with a small sample of QCS staff. These views do not necessarily reflect QCS’s general position.

²⁴ These insights were primarily drawn from a survey with a small sample of QCS staff. These views do not necessarily reflect QCS’s general position.

While views about YCRTs were largely favourable, some stakeholders noted YCRTs can at times over-service, causing irritation for young people and their families. Some parents questioned the need for regular phone and house calls to monitor compliance, which seemed to double handle the role of EMD tracking. They also indicated YCRT team members can visit at inconvenient hours, which can be an imposition on household members. Some bail services staff also suggested a regular YCRT presence in communities could be traumatic for residents and households who may be sensitive to police.

'I struggle to understand why there are so many bail checks when he's already being monitored 24/7. I've been waiting up until 10 or 11pm every night just to answer them knocking...We were doing the 24-hour curfew too.'

Family-member

Despite challenges, stakeholders identified enablers to implementation including inter-agency support and cooperation from young people

Despite the challenges outlined above, YJ staff recognised that troubleshooting support from YJVS has been helpful in providing ad hoc real time assistance. They described YJVS staff as 'approachable' and 'practical' in explaining procedure documents over the phone when contacted for support. YJ Managers also recognised that having a close working relationship with legal representatives and magistrates was helpful in enabling opportunities to review EMD conditions (if needed depending on how young people were responding to the trial). They suggested it would be beneficial to have some periodic reviews built into EMD processes to formalise these processes. One magistrate suggested that bail reviews or progress updates could help magistrates see the full picture and incentivise good behaviour.

6 Findings: costs of the EM trial

This section presents the evaluation findings regarding costs:

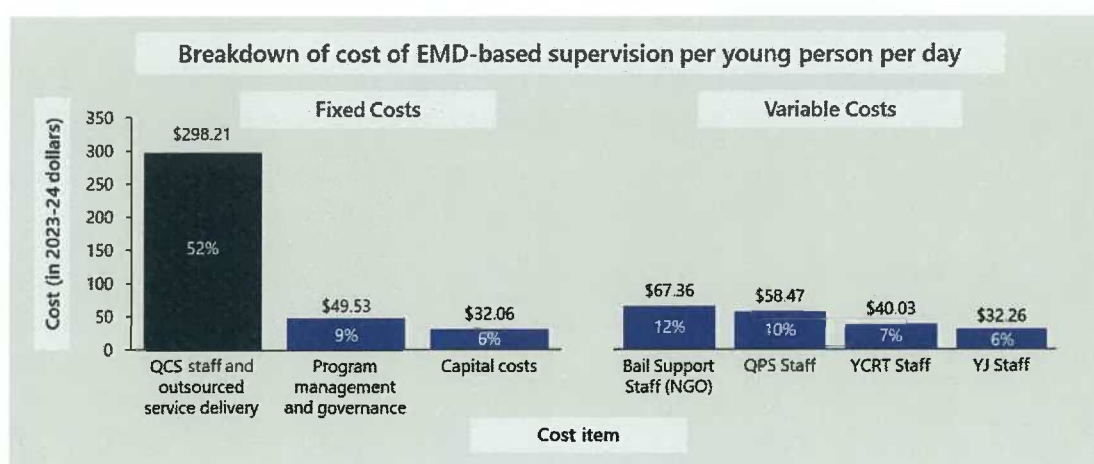
1. The cost of EMD-based supervision includes staff, capital, devices and program administration.
2. The cost of EMD-based supervision per episode is substantially lower than for detention-based supervision.
3. The cost of EMD-based supervision per episode per day could be expected to decline with increases in scale.

These points are discussed in turn below.

6.1 The cost of EMD-based supervision includes staff, capital, devices and program administration

QCS staff and outsourced service delivery costs (including device costs) are the biggest contributor to the cost of the EM trial per young person per day. This reflects the trial's workload in managing the thousands of alerts generated by EMDs. The next biggest contributor was other staffing, reflecting the intentional emphasis on intensive, person-centred support. The full cost breakdown is presented in Figure 18.

Figure 18 | Breakdown of cost of EMD-based supervision per young person per day at current scale²⁵

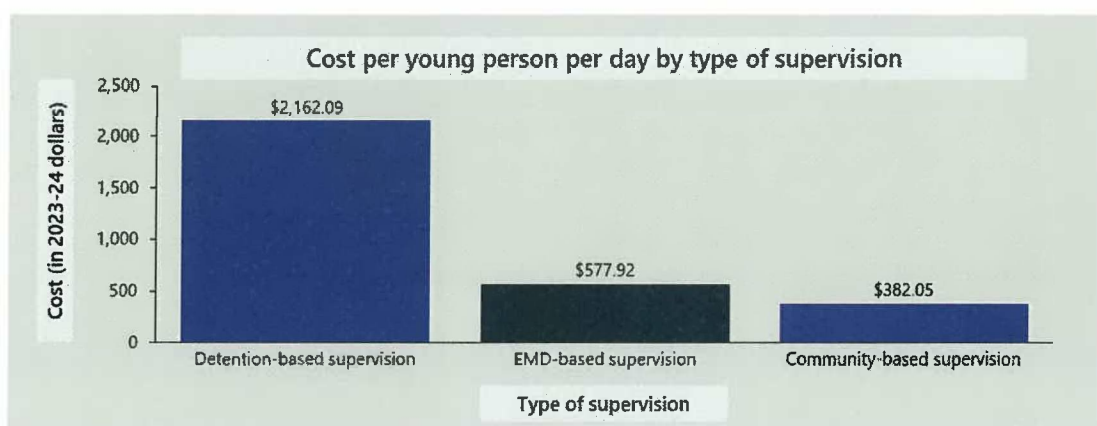


²⁵ The methodology to estimate the cost of EMD-based supervision is described in Appendix F.

6.2 The cost of EMD-based supervision per episode is substantially lower than for detention

At the current scale of approximately 20 concurrent EMD conditions per day, the estimated cost of EMD-based supervision is \$577.92 per young person per day. Based on Report on Government Services (ROGS) estimates, this is roughly 50% higher than the cost of community-based supervision (\$382.05 per day) but substantially lower than the cost of detention-based supervision (\$2,162.09 per day) as shown in Figure 19. This suggests that EMDs may offer a relatively cost-effective alternative to remand in custody for reducing reoffending among eligible young people.

Figure 19 | Cost of EMD-based supervision per young person per day compared to alternatives²⁶

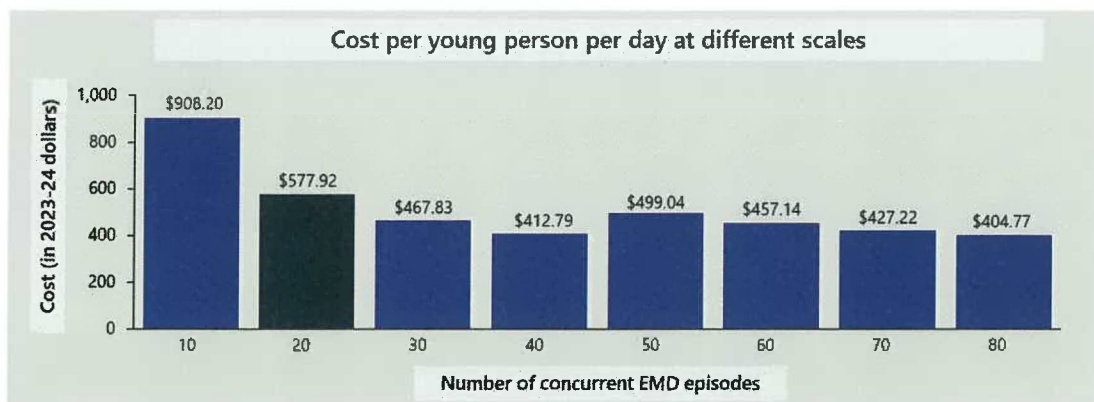


6.3 The cost of EMD-based supervision per episode could be reduced through economies of scale and operational efficiencies

The cost of EMD-based supervision per young person per day would be expected to decline as the number of concurrent EMD episodes increases, as shown in Figure 20. This is due to economies of scale across capital, staffing, equipment, program management and governance. However, beyond 40 concurrent EMD conditions, additional EMD units and QCS staff would be needed. Further information about the cost analysis, including underpinning assumptions, is included in Appendix F.

²⁶ Estimates of the cost of detention-based and community-based supervision were taken from Productivity Commission, Report on Government Services 2025, 17 Youth Justice Services, 2025, at <https://www.pc.gov.au/ongoing/report-on-government-services/2025/community-services/youth-justice>

Figure 20 | Comparative cost per young person per day



Additional reductions in the cost of EMD-based supervision per young person per day could be achieved through reductions in operational burden (as discussed in Section 5) or alternative delivery models. Some jurisdictions have trialed outsourcing alert monitoring, but results have been mixed.

In NSW, a privately funded EM model (in which accused persons paid for their own monitoring) was discontinued following the collapse of provider BailSafe, which left participants unmonitored for a week. This prompted legislative reform to ban privately arranged EM for bail conditions. However, this model differs significantly from government-funded and overseen arrangements.²⁷

QLD's adult bail EM program, managed by QPS and delivered by Ventia, illustrates how outsourced models can be effective when embedded within strong governance structures. Ventia provides 24/7 monitoring, field support, and continuity planning, and has scaled its services in response to increased demand, including during COVID-19.²⁸

These examples indicate that outsourcing can offer scalable and cost-effective solutions when supported by robust oversight and public funding. Conversely, models lacking regulatory safeguards and relying on user-pays arrangements may pose risks to continuity and equity. Future consideration of alternative delivery models should assess both cost efficiency and the strength of governance, continuity planning, and access provisions.

²⁷ NSW Government. NSW Government introduces bill to ban private electronic monitoring. At, [NSW Government introduces bill to ban private electronic monitoring | Communities and Justice](#)

²⁸ Ventia. Meeting the increasing demand for personal electronic monitoring. At, <https://www.ventia.com/what-we-do/projects/meeting-the-increasing-demand-for-personal-electronic-monitoring>

Appendix A : Glossary

Table 2 provides a list of acronyms used in this report.

Table 2 | List of acronyms

Acronym	Definition
ATSILS	Aboriginal and Torres Strait Islander Legal Service: provider of culturally appropriate legal assistance and advocacy for First Nations peoples.
BSS	Bail Support Service: a service providing support to young people on bail to help them comply with conditions and address underlying risks
CBP	Conditional Bail Program: a structured bail program used as a comparison group in the evaluation
EM	Electronic monitoring: the use of electronic technology to track the location and compliance of individuals under supervision
EMD	Electronic monitoring / electronic monitoring device: the physical device fitted to young people as a bail condition to track their location and compliance
GPS	Global positioning system: satellite-based navigation system used in EMDs to determine location
GSM	Global system for mobile communications: a standard developed to describe protocols for second-generation (2G) digital cellular networks used by mobile devices, including EMDs
IBI	<i>Intensive Bail Initiative: a program providing wrap-around practical and therapeutic supports to high-risk young people on bail</i>
MoU	Memorandum of understanding: the agreement governing data sharing and coordination between agencies in the EM trial
NGO	Non-government organisation
NT	Northern Territory
OBC	On-body charger: a component of the EMD charging system that allows the device to be charged without removal
QCS	QLD Corrective Services: the agency responsible for corrections, including operational support for the EM trial
QLD	Queensland
QPS	QLD Police Service: the state police agency involved in delivering and monitoring the EM trial
RF	Radio frequency: a technology used in EMDs to communicate with beacons
ROGS	Report on Government Services: a Productivity Commission publication providing comparative data on government service performance
SA	South Australia

Acronym	Definition
SEQ	South East QLD
SRO	Serious repeat offender: a young person identified as having a high risk of reoffending, based on offence history and risk assessment tools
VIC	Victoria
WA	Western Australia
YCRT	Youth Co-Responder Team: specialised teams of Youth Justice and QPS staff providing support and compliance checks for young people on bail, including those with EMDs
YJ-PRA	Youth Justice – Police Reporting and Analysis: a data system used to track offending and interactions with police among participants
YJ	Youth Justice Service Centre: local service centres delivering youth justice services and supporting the EM trial
YJVS	Department of Youth Justice and Victim Support: the QLD government department responsible for youth justice and victim support services, including oversight of the EM trial
YLS/CMI	Youth Level of Service/Case Management Inventory: an evidence-based tool for assessing risk of reoffending and guiding supervision/intervention planning

Appendix B: Evaluation method

YJVS developed the evaluation plan and methodology

The plan outlined the mixed-methods approach for the evaluation which combined quantitative data from administrative sources with qualitative insights from stakeholder interviews and focus groups. The plan included a program logic model, key evaluation questions (KEQs), and a detailed data collection and analysis matrix. The plan also set out governance arrangements, timelines, and roles to ensure the evaluation is robust and aligned with the trial's objectives.

YJVS analysed administrative and survey data

Quantitative data was collected from the following sources to provide information about participants in the EM trial:

- Youth Justice – Police Reporting and Analysis (YJ-PRA) data on offending observed among participants
- Data that indicates participation in YCRTs or IBI (obtained from the relevant program areas)
- Data from QCS regarding alerts
- Data from QPS regarding police interactions during order
- Surveys (completed by YJ staff, QPS, QCS)

The available data was accurate to 30 June 2025.

Nous validated YJVS' quantitative analysis

Nous provided independent validation of YJVS's quantitative analysis processes to test whether it was methodologically sound. The steps of this validation process involved:

- Reviewing and providing feedback on YJVS's draft evaluation plan and its approach to the quantitative analysis.
- Generating the same tables and statistics as reported in YJVS's data outputs and checking them for consistency.
- Triangulating YJVS's quantitative analysis with insights from stakeholder consultations.

This validation of quantitative analysis, while rigorous, could not guarantee the detection of errors in the underlying data unless the numbers were clearly inconsistent. However, it helped ensure the analysis process was sound and the data in the evaluation report was accurate.

Nous undertook a desktop review to understand the current context

Findings in this report are informed by a review of current program documentation for the trial. Nous also undertook a rolling review of relevant policy documents as they were released, including the Youth Justice Amendment Bill and Adult Crime, Adult Time legislation. Further, Nous completed a high-level scan of academic and grey literature which further informed the evaluation's understanding of best practice principles for supporting young people in the justice system.

Nous interviewed 46 service provider staff from 13 locations

Nous interviewed 18 staff from YJ from 13 different locations. Nous also interviewed 6 YCRT representatives, 12 IBI and Bail Support Service (BSS) providers, 2 representatives from Legal Aid, 1 representative from the Aboriginal and Torres Strait Islander Legal Service (ATSILS), 1 from QCS and 4 from QPS, and 3 magistrates. A full list of stakeholders engaged is at Appendix J.

Nous interviewed 25 young people and families across four locations

Nous conducted 25 interviews with young people and families on the trial. Nous facilitated interviews through support staff across multiple YJ service provider locations: Gold Coast, Logan, South Brisbane, Toowoomba and Townsville.

This included a mix of in-person and telephone engagements, depending on the individual circumstances of participants. Nous conducted interviews with young people and families according to best practice stakeholder engagement principles and sought ethics approvals from YJVS prior to the interview process.

Nous conducted cost analysis to understand the cost implications of the trial

Nous analysed the various costs incurred by the QLD Government delivery partners to support the trial. This analysis involved exploring both fixed costs (such as infrastructure) and variable costs (such as staffing costs) to inform an overall view. Data for the financial analysis was extracted from publicly available budget information, interviews with relevant stakeholders, and line-item data requests from delivery partners.

Nous developed the evaluation findings

Nous developed evaluation findings using both quantitative and qualitative evidence. The evaluation report was developed independently, with key input and feedback provided from YJVS at key points to ensure accuracy.

Appendix C: Key evaluation questions

The key evaluation questions are shown in Table 3.

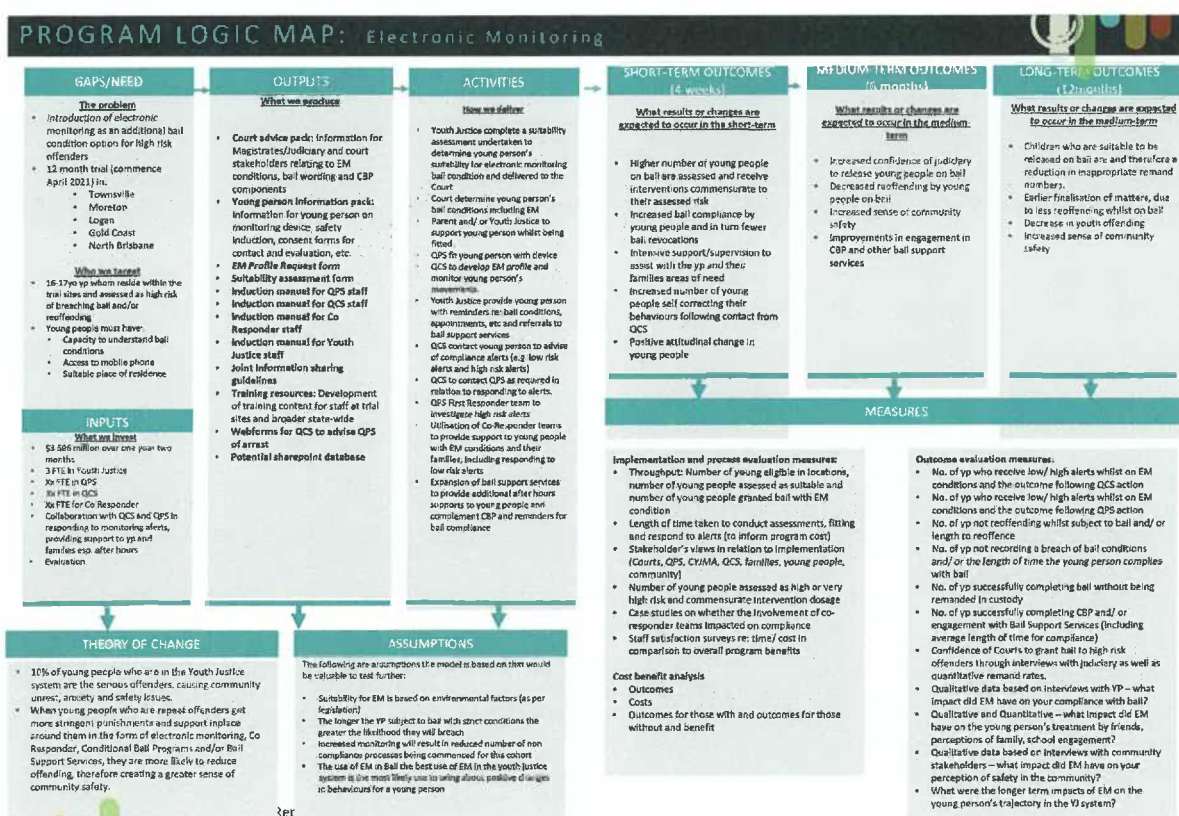
Table 3 | Key evaluation questions (KEQs)

Theme	Key evaluation questions
Usage	<ul style="list-style-type: none"> Is the program operating as intended? If not, why not? What changes (if any) need to be made to transition the EM trial to a permanent initiative? How many young people were fitted with EMDs during the trial period? How long were EMDs placed on participants? What are the differences in the use of EMDs by geographical location? How many suitability assessments were completed, and how many young people were deemed suitable for EMDs? Are the relevant activities being delivered (e.g., timely suitability assessments, reliable device fitting, location alerts)? To what extent have the appropriate inputs been available for efficient function of the EM trial (e.g., governance, qualified staff, technology)?
Outcomes	<ul style="list-style-type: none"> Are we seeing a reduction in youth crime and increased community safety? Does the use of EMDs reduce the number of young people remanded in custody? How does compliance with bail conditions vary among young people with EMD devices? How does the rate of successful completion of EMD orders vary among participants? Is there a relationship between compliance and successful completion? Does duration of EMD use have a relationship with successful completion? Are there demographic or contextual factors (e.g., SROs, First Nations status) that influence completion? What is the rate of offending / reoffending during EMD placement? Are there demographic or contextual factors (e.g., SROs, First Nations status) that influence offending / reoffending while on orders? Is there a difference in offending / reoffending while under orders when comparing young people with EMDs to those without? Is there a relationship between offending / reoffending while on orders and successful completion? Is there a relationship between offending / reoffending while on orders and the duration of EMD placement? Do young people with an EMD reoffend differently after their orders are complete compared to before? How is EM perceived by the community, cultural organisations, families, and young people? Are there any unexpected impacts, both negative and positive?
Engagement	<ul style="list-style-type: none"> To what extent are target stakeholders engaging with the EM trial? How often do EMD participants access YCRTs or IBI services? Does involvement in YCRTs, or IBI impact compliance?

Theme	Key evaluation questions
	<ul style="list-style-type: none"> Does involvement in YCRTs or IBI impact successful completion? Does involvement in YCRTs, or IBI impact offending / reoffending while on orders?
Implementation	<ul style="list-style-type: none"> Is the program being implemented as intended? If not, why not? What, if any, are the barriers to effective implementation? And what are the key enablers for addressing these barriers? To what extent have the appropriate inputs been available to successfully implement the EM trial (e.g., governance, qualified staff, technology)? To what extent are target stakeholders engaging with the EM trial? Are the relevant outputs being delivered (e.g., robust suitability assessment, reliable device fitting, location alerts)? Has EM been established with stable staffing and the infrastructure in place to operate efficiently? How has the initiative adapted to be relevant to the contexts across the five locations it operates in? What is driving these adaptations? Is the initiative successful in engaging with the target group?

Appendix D : Program logic

Figure 21 | Program logic designed by the Department at the commencement of the EM trial – note that the program logic may not reflect the current operation of the EM trial.



Appendix E: Quasi-experimental analysis

To assess the effects of the EM trial on reoffending and victimisation, EMD episodes were compared to other bail episodes from the trial period

A comparison group was constructed comprising young people with similar characteristics to those in the EMD cohort. Specifically, the evaluation compared 114 EMD episodes with 1,368 episodes from young people who commenced a bail order during the trial period under the CBP. The CBP was selected as a suitable comparison due to its structured supports and program linkages, which are comparable to those offered through EMD. To maintain distinct cohorts, any young person with an EMD episode was excluded from the CBP group.

A propensity score matching analysis was conducted to assess the impact of an EMD condition on offending behaviour. The offending behaviour of young people with an EMD was compared to that of similar young people in the comparison group. Similarity was assessed based on characteristics including age, sex, First Nations status, SRO Index scores, and Youth Level of Service/Case Management Inventory (YLS/CMI) ratings. The SROI is a point-in-time score assessing the seriousness and frequency of offending by 10–17-year-olds, based on age, offence history, and custody nights, with scores ≥ 6 indicating a 'Serious Repeat Offender'. The YLS/CMI is an evidence-based tool that rates a young offender's risk of reoffending (Low–Very High) across eight domains of risk and need to guide supervision and intervention planning. Young people are discussed by cohorts of these characteristics in this report. Table 4 below describes the key demographic characteristics of the EMD and comparison group by cohorts.

Table 4 | EMD and comparison group characteristics (by cohort)

EMD group		Comparison group	
First Nations	44.7%	First Nations	60.4%
16 years of age	36.0%	15 years of age	43.8%
Male	86.8%	Male	73.6%
Experiencing a disability	36.0%	Experiencing a disability	25.9%
Experiencing poor mental health	47.4%	Experiencing poor mental health	40.5%
Located in South-East Region	54.0%	Located in South-East Region	21.0%
SRO	56.1%	SRO	37.2%
Rated as 'High Risk' or 'Very High Risk' on the YLS/CMI	77.2%	Rated as 'High Risk' or 'Very High Risk' on the YLS/CMI	68.4%

Appendix F : Cost Analysis

F.1 Background to the analysis

The aim of the cost analysis was to estimate the cost per young person subject to an EMD condition per day, defined as the recurrent expenditure on the EM trial per day, divided by the average daily number of young people subject to EMD conditions. This metric was selected to provide a consistent and policy-relevant measure of unit cost, rather than to calculate the total cost of the trial to date or the total cost per participant. The analysis was limited to direct financial and non-financial costs to delivery partners – it did not consider costs to non-government stakeholders, such as burden on young people and families. Nor did it consider avoided costs, such as reduced expenditure on detention.

The analysis was guided by the Productivity Commission's ROGS, with the intention of aligning resulting estimates with ROGS indicators such as 'cost per young person subject to detention-based supervision' and 'cost per young person subject to community-based supervision'. However, it was not possible to fully replicate the ROGS methodology within available time and data.

It is important to note that only some of these costs captured in the analysis represent direct financial costs to the QLD Government. For example, some staff costs (such as those for YJ, QPS and YCRT) represent notional costs based on reallocation of existing resources – these do not reflect new expenditure but indicate the opportunity cost of staff time diverted to support the EM trial; in contrast, QCS staff costs reflect direct financial costs, as these roles were created specifically for the trial.

F.2 Assumptions underpinning the analysis

Table 5 presents the assumptions underpinning the cost analysis.

Table 5 | Assumptions underpinning the cost analysis

Domain	Assumption	Value	Rationale
Fixed costs	Capital costs	\$7.45m invested in 2020-21	As reported in previous evaluation of EM trial. Fixed for any number of concurrent EMD episodes. Assumed to depreciate at rate of 3% per year (i.e., \$7.45m investment is included in analysis as \$223,500 per year) – as reported by QCS. Updated to 2024-25 dollars for consistency with other assumptions.
	QCS staff and outsourced service delivery costs	\$2.232m in 2024-25	As reported by QCS. Budgeted amount provided in 2024-25 for baseline operational support and monitoring services to support a 24/7 one-post roster (potential capability to monitor up to 40 concurrent EMD episodes). Value approximately doubles per year for a 24/7 two-post roster to increase

Domain	Assumption	Value	Rationale
Variable costs			<p>monitoring capability to up to 100 concurrent EMD episodes.</p> <p>Assumed to capture all staff involvement with trial, including preparation of profile and equipment, responding to alerts, and outsourced service delivery costs.</p>
	YJ staff costs	\$2,214.90 per episode in 2024-25	<p>Based on assumption of:</p> <ul style="list-style-type: none"> 8 hours upfront and 4 hours per week for average duration of EMD condition at \$38 per hour (as reported in job posting for YJ youth worker) plus 25% on-costs.
	QPS staff costs	\$4,013.80 per episode in 2024-25	<p>Based on assumption of:</p> <ul style="list-style-type: none"> 2 people for 4 hours to fit EMD for every episode, 4 hours to refit EMD for every 4th episode, and 2 hours for each of 18.378 QPS interactions per episode at \$38 per hour (as reported in job posting for Assistant Watchhouse Officer) plus 25% on-costs.
	Bail services staff costs	\$4,623.96 per episode in 2024-25	<p>Based on assumption of:</p> <ul style="list-style-type: none"> 8 hours per week for average duration of EMD condition (9 weeks) at \$48 per hour (as reported in job posting for Bail Support youth worker at one of the non-government organization (NGO) service providers) plus 25% on-costs.
	YCRT staff costs	\$2,747.78 per episode in 2024-25	<p>Based on assumption of:</p> <ul style="list-style-type: none"> 2 people of 2 hours for each of 14.324 YCRT interactions per episode at \$47.96 per hour (average of YJ and QPS hourly wage) plus 25% on-costs.
	Other staff costs	\$0 per episode	<p>Based on assumption that time invested by other QLD Government staff, such as magistrates and prosecutors, is unaffected by the trial (made due to limitations in the available time and data).</p>

Domain	Assumption	Value	Rationale
	On-costs	25%	Applied to all staff costs (except QCS) to reflect 12% superannuation, leave entitlements and other staff on-costs.
	Program management and governance	25%	Applied to all recurrent costs (excluding capital and QCS costs) to reflect indirect organisational costs such as program administration, corporate services and other overheads. Rate was selected as conservative (i.e., high) estimate of overheads in absence of detailed time-used data.
Excluded costs	N/A	N/A	<p>Other QLD Government budget measures have been excluded from the analysis to avoid double counting. For example, the QLD Government invested:</p> <ul style="list-style-type: none"> \$3.819m over 14 months (expired 30 June 2022) to deliver the equipment and monitoring capability for up to 100 high-risk youth offenders in five trial allocations. \$2.342m over one year (2024-25) to strengthen the court and administrative support provided during the expansion of the youth electronic monitoring program (including \$822,000 for Legal Aid QLD). \$2.4m over one year (2024-25) to expand the required bail support services for the expanded use of electronic monitoring of young offenders on bail. <p>These estimates were assumed to be for staff and outsourced service delivery costs already captured by other assumptions listed above.</p>
Other	Inflation	2.4%	The estimate of cost per young person subject to an EMD condition per day has been updated from 2024-25 dollars to 2023-24 dollars to ensure comparability with the most recent estimates from ROGS. This estimate of year-on-year inflation has been taken from ROGS.
	Average length of EMD episode	67 days	Based on YJVS data analysis.

F.3 Sensitivity Analysis

A sensitivity analysis was conducted to test how changes in key cost drivers would affect the estimated daily cost per young person subject to an EMD condition (see Table 6). The model was most sensitive to changes in QCS staff and outsourced delivery costs, with a 20% variation in this variable resulting in a 10% change in the daily cost. This is expected, as this cost represents the largest cost item on an annual basis. Other variables – including capital costs, staff time allocations, and hourly rates for YJ, QPS, and YCRT – had a much smaller impact on the overall cost estimate, typically resulting in changes of only 1–3%. These results indicate that the model is robust to most underlying assumptions, with cost estimates remaining relatively stable unless there are significant changes to the largest cost drivers.

Table 6 | Sensitivity analysis for model inputs

Variable	% change	-20%	Benchmark	+20%	% change
Capital cost	-1%	\$569.75	\$575.72	\$581.69	1%
QCS staff and outsourced delivery costs	-10%	\$516.08	\$575.72	\$635.36	10%
YJ time per EMD condition	-1%	\$567.66	\$575.72	\$583.79	1%
QPS time per EMD condition	-3%	\$561.10	\$575.72	\$590.34	3%
Bail services time per EMD condition	-3%	\$558.88	\$575.72	\$592.56	3%
YCRT time per EMD condition	-2%	\$565.72	\$575.72	\$585.73	2%
Average length of EMD condition	6%	\$608.24	\$575.72	\$554.04	-4%
Program management and governance	-2%	\$565.82	\$575.72	\$585.63	2%
YJ hourly staff cost	-2%	\$562.66	\$575.72	\$588.78	2%
QPS hourly staff cost	-3%	\$556.09	\$575.72	\$595.35	3%
YCRT hourly staff cost	-2%	\$565.72	\$575.72	\$585.73	2%
Bail services hourly staff cost	-3%	\$558.88	\$575.72	\$592.56	3%
On-costs	-2%	\$565.82	\$575.72	\$585.63	2%
Depreciation rate	-1%	\$569.75	\$575.72	\$581.69	1%
Inflation rate	0%	\$578.55	\$575.72	\$572.89	0%

Appendix G: Quantitative analysis

This appendix details the quantitative analysis undertaken to answer each KEQ. The data sources used to answer the KEQs include:

- Youth Justice Performance and Reporting data
- Administrative data, drawn from the YCRT, IBI, QPS and the QCS.

G.1 Usage

Please note analysis in this section is conducted at the suitability assessment case level and does not represent the number of unique young people in the sample – this is referred to as a 'case'. Up until data extraction on 30 June 2025 there had been 297 cases where an EMD suitability assessment was ordered.

Table 7 | Frequency of suitability assessments by outcome

Suitability assessment outcome	Frequency	Percentage
Suitable	248	85.22%
Unsuitable	36	12.37%
Not completed	7	2.41%
Total	291	100.00%

*Data missing for 6 cases

Table 8 | Frequency of suitability assessments by initiator

Suitability assessment initiator	Frequency	Percentage
Court ordered	172	58.11%
Not court ordered	122	41.22%
Not completed	2	0.68%
Total	296	100.00%

*Data missing for 1 case

Table 9 | Frequency of suitability assessments by how young people appeared to court

Young person appearance modality	Frequency	Percentage
In person	144	49.15%
Video link	141	48.12%
No appearance	8	2.73%

Young person appearance modality	Frequency	Percentage
Total	293	100.00%

*Data missing for 4 cases

Table 10 | Frequency of suitability assessments by court participating in the EM trial

Court Location	Frequency	Percentage
Brisbane Children's Court	95	31.99%
Southport Children's Court	56	18.86%
Beenleigh Children's Court	33	11.11%
Townsville Children's Court	28	9.43%
Children's Court QLD	17	5.72%
Ipswich Children's Court	14	4.71%
Toowoomba Children's Court	11	3.70%
Mt Isa Children's Court	7	2.36%
Cleveland Children's Court	7	2.36%
Mackay Children's Court	5	1.68%
Hervey Bay Children's Court	4	1.35%
Redcliffe Supreme Court	3	1.01%
Cairns Children's Court	3	1.01%
Richlands Supreme Court	3	1.01%
Rockhampton Children's Court	3	1.01%
Pine Rivers Children's Court	2	0.67%
Townsville Supreme Court	2	0.67%
Caboolture Children's Court	2	0.67%
Cairns Supreme Court	1	0.34%
Coolangatta Children's Court	1	0.34%
Total	297	100.00%

Table 11 | Frequency of suitability assessments by EMD condition order status

EMD condition order status	Frequency	Percentage
Not ordered	153	52.40%
Ordered	139	47.60%
Total	292	100.00%

*Data missing for 5 cases

Table 12 | Frequency of unique individuals by number of times an EMD condition was ordered

EMD condition episode number	Frequency	Percentage
1	98	84.48
2	15	12.93
3	2	1.72
5	1	0.86
Total	116	100.00

*Data missing for 5 cases

Table 13 | Frequency of suitability assessments by EMD condition order status and suitability assessment outcome

EMD condition order status	Suitability assessment outcome			
	Suitable	Unsuitable	Not completed	Total
Not ordered	110 (44.53%)	34 (94.44%)	7 (100.00%)	151 (52.07%)
Ordered	137 (55.47%)	2 (5.56%)	0 (0.00%)	139 (47.93%)
Total	247 (100.00%)	36 (100.00%)	7 (100.00%)	290 (100.00%)

*Data missing for 7 cases

Table 14 | Frequency of suitability assessments by reason an EMD condition was not ordered

Reason EMD condition was not ordered	Frequency	Percentage
Bail refused	92	60.13%
Bailed without EMD	31	20.26%
Sentenced	6	3.92%

Reason EMD condition was not ordered	Frequency	Percentage
Other	24	15.69%
Total	153	100.00%

Table 15 | Frequency of cases with an EMD condition order by order completion status as at 30 June 2025

EMD condition order completion status	Frequency	Percentage
Order complete	114	82.01%
Order incomplete	25	17.99%
Total	139	100.00%

Table 16 | Average duration of EMD condition orders in days

	Frequency	Mean	Median	Std. Dev.	Min	Max
Days with EMD condition order	114	66.5	53	63.4	5	449

Table 17 | Frequency of cases with an EMD condition order by curfew hours attached to order

Curfew periods	Curfew time (hours)	Frequency	Percentage
24hr	24	54	38.85%
6pm – 6am	12	36	25.90%
7pm – 7am	12	17	12.23%
7pm – 6am	11	10	7.19%
8pm – 6am	10	7	5.04%
6pm – 7am	13	5	3.60%
9pm – 6am	9	4	2.88%
10pm – 8am	10	1	0.72%
5pm – 8am	15	1	0.72%
8pm – 8am	12	1	0.72%
9pm – 5am	8	1	0.72%

Curfew periods	Curfew time (hours)	Frequency	Percentage
No curfew	0	2	1.44%
Total		139	100.00%

Table 18 | Average duration of curfew per day per EMD condition order

	Frequency	Mean	Median	Std. Dev.	Min	Max
Curfew time (hours)	139	16.2	12	6.4	0	24

Table 19 | Frequency of cases with an EMD condition order by YJSCs that supported the case

Service Centre	Frequency	Percentage
Logan YJSC	43	30.94%
Gold Coast YJSC	29	20.86%
Brisbane North YJSC	17	12.22%
Townsville North YJSC	8	5.76%
Western Districts YJSC	8	5.76%
Toowoomba YJSC	7	5.04%
Redlands YJSC	6	4.32%
Brisbane South YJSC	5	3.60%
Ipswich YJSC	4	2.88%
Caboolture YJSC	2	1.44%
Mackay YJSC	2	1.44%
Mt Isa YJSC	2	1.44%
Redcliffe YJSC	2	1.44%
Rockhampton YJSC	2	1.44%
Cherbourg YJSC	1	0.72%
Townsville South YJSC	1	0.72%
Total	139	100.00%

Table 20 | Frequency of successful suitability assessments over time by court that participated in the EM trial

Court	Period									Total
	May 21 – Oct 21	Nov 21 – April 22	May 22 – Oct 22	Nov 22 – April 23	May 23 – Oct 23	Nov 23 – April 24	May 24 – Oct 24	Nov 24 – April 25	May 25 – June 25	
Brisbane Children's Court	3	1	1	4	13	12	14	30	5	83
Southport Children's Court	1	0	0	0	1	12	13	14	5	46
Beenleigh Children's Court	1	1	1	7	3	0	1	11	5	30
Townsville Children's Court	4	1	1	1	1	0	3	3	3	17
Children's Court QLD	0	0	2	1	3	5	0	2	2	15
Ipswich Children's Court	0	0	0	0	0	0	0	8	5	13
Toowoomba Children's Court	0	0	0	0	0	5	0	4	1	10
Mt Isa Children's Court	0	0	0	0	0	2	1	3	0	6
Cleveland Children's Court	0	0	0	0	0	0	1	4	0	5
Mackay Children's Court	0	0	0	0	0	0	1	3	0	4
Hervey Bay Children's Court	0	0	0	0	0	0	0	1	0	1
Redcliffe Children's Court	1	0	0	0	1	1	0	0	0	3
Cairns Children's Court	0	0	0	0	0	0	2	0	0	2
Richlands Children's Court	0	0	0	0	0	0	2	1	0	3

Court	Period									Total
	May 21 – Oct 21	Nov 21 – April 22	May 22 – Oct 22	Nov 22 – April 23	May 23 – Oct 23	Nov 23 – April 24	May 24 – Oct 24	Nov 24 – April 25	May 25 – June 25	
Pine Rivers Children's Court	2	0	0	0	0	0	0	0	0	2
Rockhampton Children's Court	0	0	0	0	0	0	0	1	1	2
Townsville Supreme Court	0	0	1	0	0	0	0	0	0	1
Caboolture Children's Court	1	0	0	0	0	0	0	1	0	2
Cairns Supreme Court	0	0	0	0	0	1	0	0	0	1
Coolangatta Children's Court	0	0	0	0	0	0	0	1	0	1
Total	13	3	6	13	22	38	38	87	27	247

*Data missing for 1 case

Table 21 | Frequency of unsuccessful suitability assessments over time by court that participated in the EM trial

Court	Period									Total
	May 21 – Oct 21	Nov 21 – April 22	May 22 – Oct 22	Nov 22 – April 23	May 23 – Oct 23	Nov 23 – April 24	May 24 – Oct 24	Nov 24 – April 25	May 25 – June 25	
Brisbane Children's Court	1	0	0	1	1	3	0	3	1	10
Southport Children's Court	0	0	0	0	0	7	0	1	1	9
Townsville Children's Court	7	0	1	2	0	0	1	0	0	11

Court	Period									Total
	May 21 – Oct 21	Nov 21 – April 22	May 22 – Oct 22	Nov 22 – April 23	May 23 – Oct 23	Nov 23 – April 24	May 24 – Oct 24	Nov 24 – April 25	May 25 – June 25	
Toowoomba Children's Court	0	0	0	0	0	0	0	1	0	1
Mt Isa Children's Court	0	0	0	0	0	0	0	1	0	1
Cleveland Children's Court	0	0	0	0	0	0	0	0	1	1
Mackay Children's Court	0	0	0	0	0	0	0	1	0	1
Hervey Bay Children's Court	0	0	0	0	0	0	0	1	0	1
Townsville Supreme Court	0	0	1	0	0	0	0	0	0	1
Total	8	0	2	3	1	10	1	8	3	36

Table 22 | Frequency of EMD condition orders over time by court that participated in the EM trial

Court	Period									Total
	May 21 – Oct 21	Nov 21 – April 22	May 22 – Oct 22	Nov 22 – April 23	May 23 – Oct 23	Nov 23 – April 24	May 24 – Oct 24	Nov 24 – April 25	May 25 – June 25	
Brisbane Children's Court	0	0	1	2	8	6	7	15	1	40
Southport Children's Court	0	0	0	0	1	9	8	12	3	33
Beenleigh Children's Court	0	1	1	6	1	0	1	5	5	20
Townsville Children's Court	1	1	0	0	0	0	3	1	2	8

Court	Period									Total
	May 21 – Oct 21	Nov 21 – April 22	May 22 – Oct 22	Nov 22 – April 23	May 23 – Oct 23	Nov 23 – April 24	May 24 – Oct 24	Nov 24 – April 25	May 25 – June 25	
Children's Court QLD	0	0	1	1	2	3	0	2	1	10
Ipswich Children's Court	0	0	0	0	0	0	0	1	4	5
Toowoomba Children's Court	0	0	0	0	0	3	0	4	0	7
Mt Isa Children's Court	0	0	0	0	0	1	0	1	0	2
Cleveland Children's Court	0	0	0	0	0	0	1	3	0	4
Mackay Children's Court	0	0	0	0	0	0	0	2	0	2
Redcliffe Children's Court	1	0	0	0	0	0	0	0	0	1
Richlands Children's Court	0	0	0	0	0	0	2	1	0	3
Rockhampton Children's Court	0	0	0	0	0	0	0	1	1	2
Townsville Supreme Court	0	0	1	0	0	0	0	0	0	1
Coolangatta Children's Court	0	0	0	0	0	0	0	1	0	1
Total	2	2	4	9	12	22	22	49	17	139

Table 23 | Frequency of EMD condition refusals over time by court that participated in the EM trial

Court	Period									Total
	May 21 – Oct 21	Nov 21 – April 22	May 22 – Oct 22	Nov 22 – April 23	May 23 – Oct 23	Nov 23 – April 24	May 24 – Oct 24	Nov 24 – April 25	May 25 – June 25	
Brisbane Children's Court	4	1	0	3	6	9	7	20	5	55
Southport Children's Court	1	0	0	0	0	11	5	3	3	23
Beenleigh Children's Court	1	0	0	1	2	0	0	7	0	11
Townsville Children's Court	10	0	2	3	1	0	1	2	1	20
Children's Court QLD	0	0	1	0	1	2	0	1	1	6
Ipswich Children's Court	0	0	0	0	0	0	0	8	1	9
Toowoomba Children's Court	0	0	0	0	0	2	0	1	1	4
Mt Isa Children's Court	0	0	0	0	0	1	1	3	0	5
Cleveland Children's Court	0	0	0	0	0	0	0	1	1	2
Mackay Children's Court	0	0	0	0	0	0	1	2	0	3
Hervey Bay Children's Court	0	0	0	0	0	0	0	4	0	4
Redcliffe Children's Court	0	0	0	0	1	1	0	0	0	2
Cairns Children's Court	0	0	0	0	0	0	3	0	0	3
Pine Rivers Children's Court	2	0	0	0	0	0	0	0	0	2

Court	Period									Total
	May 21 – Oct 21	Nov 21 – April 22	May 22 – Oct 22	Nov 22 – April 23	May 23 – Oct 23	Nov 23 – April 24	May 24 – Oct 24	Nov 24 – April 25	May 25 – June 25	
Townsville Supreme Court	0	0	1	0	0	0	0	0	0	1
Caboolture Children's Court	1	0	0	0	0	0	0	1	0	2
Cairns Supreme Court	0	0	0	0	0	1	0	0	0	1
Total	19	1	4	7	11	27	18	53	13	153

G.2 Outcomes

Please note analysis in this section is conducted at the completed EMD condition order episode level and does not represent the number of unique young people in the sample – this is referred to as a ‘EMD episode’. This means multiple young people have been on an EMD condition more than once. Up until data extraction on 30 June 2025, there had been 114 episodes where young people had completed an EMD condition order.

To assess outcomes, a comparison group was used consisting of participants who began a bail order during the trial period, specifically the CBP – this is referred to as CBP episode. In total, there were 1,368 CBP episodes in the comparison group.

Table 24 | Frequency of episodes by number of episodes per participant during trial period and treatment cohort

Episode number	Number of participants	
	CBP cohort (comparison)	EMD cohort (treatment)
1	674	97
2	341	12
3	172	3
4	86	1
5	51	1
6	29	0
7	11	0
8	3	0
9	1	0
Total	1368	114

Table 25 | Frequency of episodes by First Nations status and treatment cohort

First Nations Stratus	CBP cohort (comparison)	EMD cohort (treatment)	Total
Other	542 (39.62%)	63 (55.26%)	605 (40.82%)
Indigenous	826 (60.38%)	51 (44.74%)	877 (59.18%)
Total	1368 (100.00%)	114 (100.00%)	1482 (100.00%)

Table 26 | Frequency of episodes by age and treatment cohort

Age at trial start	CBP cohort (comparison)	EMD cohort (treatment)	Total
15	599 (43.79%)	33 (28.95%)	632 (42.65%)
16	462 (33.77%)	41 (35.96%)	503 (33.94%)
17	284 (20.76%)	36 (31.58%)	320 (21.59%)
18	23 (1.68%)	4 (3.51%)	27 (1.82%)
Total	1368 (100.00%)	114 (100.00%)	1482 (100.00%)

Table 27 | Frequency of episodes by sex and treatment cohort

Sex	CBP cohort (comparison)	EMD cohort (treatment)	Total
Female	361 (26.39%)	15 (13.16%)	376 (25.37%)
Male	1007 (73.61%)	99 (86.84%)	1106 (74.63%)
Total	1368 (100.00%)	114 (100.00%)	1482 (100.00%)

Table 28 | Frequency of episodes by region and treatment cohort

Region	CBP cohort (comparison)	EMD cohort (treatment)	Total
Brisbane and Moreton Bay Region	298 (21.78%)	23 (20.18%)	321 (21.66%)
Far North QLD Region	160 (11.70%)	1 (0.88%)	161 (10.86%)
North QLD Region	169 (12.35%)	9 (7.89%)	178 (12.01%)
South East Region	278 (20.32%)	63 (55.26%)	341 (23.01%)
South West Region	293 (21.42%)	13 (11.40%)	306 (20.65%)
Sunshine Coast and Central Region	136 (9.94%)	1 (0.88%)	137 (9.24%)
Unknown	34 (2.49%)	4 (3.51%)	38 (2.56%)
Total	1368 (100.00%)	114 (100.00%)	1482 (100.00%)

Table 29 | Frequency of episodes by Serious Repeat Offender status and treatment cohort

Serious Repeat Offender flag (as at episode commencement)	CBP cohort (comparison)	EMD cohort (treatment)	Total
Not serious	858 (62.72%)	50 (43.86%)	908 (61.27%)
Serious	510 (37.28%)	64 (56.14%)	574 (38.73%)
Total	1368 (100.00%)	114 (100.00%)	1482 (100.00%)

Table 30 | Frequency of episodes by overall YLS/CMI risk rating status and treatment cohort

Overall risk rating (from YLS/CMI, RA closest to episode start)	CBP cohort (comparison)	EMD cohort (treatment)	Total
0. Not available	88 (6.43%)	13 (11.40%)	101 (6.82%)
1. Low	38 (2.78%)	0 (0.00%)	38 (2.56%)
2. Moderate	306 (22.37%)	13 (11.40%)	319 (21.52%)
3. High	640 (46.78%)	51 (44.74%)	691 (46.63%)
4. Very high	296 (21.64%)	37 (32.46%)	333 (22.47%)
Total	1368 (100.00%)	114 (100.00%)	1482 (100.00%)

Table 31 | Frequency of episodes by disability status and treatment cohort

Disability flag (from YLS/CMI, RA closest to episode start)	CBP cohort (comparison)	EMD cohort (treatment)	Total
No	972 (71.05%)	63 (55.26%)	1035 (69.84%)
Yes	354 (25.88%)	41 (35.96%)	395 (26.65%)
Not available	42 (3.07%)	10 (8.77%)	52 (3.51%)
Total	1368 (100.00%)	114 (100.00%)	1482 (100.00%)

Table 32 | Frequency of episodes by mental health status and treatment cohort

Poor mental health flag (from YLS/CMI, RA closest to episode start)	CBP cohort (comparison)	EMD cohort (treatment)	Total
No	772 (56.43%)	50 (43.86%)	822 (55.47%)
Yes	554 (40.50%)	54 (47.37%)	608 (41.03%)

Poor mental health flag (from YLS/CMI, RA closest to episode start)	CBP cohort (comparison)	EMD cohort (treatment)	Total
Not available	42 (3.07%)	10 (8.77%)	52 (3.51%)
Total	1368 (100.00%)	114 (100.00%)	1482 (100.00%)

Table 33 | Frequency of QCS alerts by alert status

Alert status	Frequency	Percentage
Confirmed alerts	5,667	47.15%
Cancelled alerts	6,353	52.85%
Total	12,020	100.00%

Table 34 | Average count of alerts per EMD episode by alert status

Alert status	Frequency	Mean	Median	Std. Dev.	Min	Max
Confirmed alerts	114	49.7	27.5	62.0	0	322
Cancelled alerts	114	55.7	31.0	74.1	0	437

Table 35 | Frequency of confirmed alerts by alert type

Alert type	Frequency	Percentage
Inclusion Zone (GPS)	3,956	69.80%
Low battery	900	15.88%
No communication	446	7.87%
Strap Alert	268	4.73%
Exclusion Zone (GPS)	95	1.68%
No motion	2	0.04%
Total	5667	100.00%

Table 36 | Average frequency of confirmed inclusion zone alerts per EMD episode by curfew period

Curfew period	Frequency	Mean	Median	Std. Dev.	Min	Max
24hr curfew	46	64.6	49	64.2	0	263
12hr curfew	45	11.8	8	11.1	0	43

Table 37 | Frequency of EMD episodes by occurrence of QPS street checks

QPS street check during episode	Frequency	Percentage
Street check did not occur	4	3.51%
Street check occurred	110	96.49%
Total	114	100.00%

Table 38 | Frequency of EMD episodes by occurrence of QPS intelligence requests

QPS intelligence request during episode	Frequency	Percentage
Intelligence request did not occur	14	12.28%
Intelligence request occurred	100	87.72%
Total	114	100.00%

Table 39 | Frequency of EMD episodes by occurrence of breach of bail

Breach of bail during episode	Frequency	Percentage
Breach of bail did not occur	54	47.79%
Breach of bail occurred	59	52.21%
Total	113	100.00%

Table 40 | Frequency of police activities for EMD cohort by activity type

Police activity	Frequency	Percentage
Street checks	1,590	75.97%
Intelligence requests	258	12.33%
Breach of bail	245	11.70%
Total	2,093	100.00%

Table 41 | Average number of police interactions per EMD episode

Interaction type	Frequency	Mean	Median	Std. Dev.	Min	Max
Street checks	114	13.9	7	17.9	0	114
Intelligence requests	114	2.2	2	2.9	0	26

Interaction type	Frequency	Mean	Median	Std. Dev.	Min	Max
Breach of bail	113	2.2	1	4.2	0	26

*Breach of bail data is missing for one case

Table 42 | Frequency of EMD episodes by reason for EMD condition ending

Reason for EMD condition ending	Frequency	Percentage
Young person sentenced	60	52.63%
Bail revoked	32	28.07%
Bail varied	21	18.42%
Charges dismissed	1	0.88%
Total	114	100.00%

Table 43 | Frequency of EMD episodes by condition outcome and occurrence of breach of bail during EMD condition

Reason for EMD condition ending	Breach of bail did not occur	Breach of bail occurred	Total
Young person sentenced	33 (61.11%)	27 (45.76%)	60 (53.10%)
Bail varied	11 (20.37%)	10 (16.95%)	21 (18.58%)
Bail revoked	9 (16.67%)	22 (37.29%)	31 (27.43%)
Charges dismissed	1 (1.85%)	0 (0.00%)	1 (0.88%)
Total	54 (100.00%)	59 (100.00%)	113 (100.00%)

*Data missing for one case

Table 44 | Frequency of EMD episodes by completion status

Outcome status	Frequency	Percentage
Successful	82	71.93%
Unsuccessful	32	28.07%
Total	114	100.00%

Table 45 | Frequency of QCS alerts by alert status and EMD episode completion status

Alert status	Successful completion		Unsuccessful completion		Total	
	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
Confirmed alerts	4422	54.79%	1245	45.21%	5667	47.15%
Cancelled alerts	4844	45.21%	1509	54.79%	6353	52.85%
Total	9266	100.00%	2754	100.00%	12020	100.00%

Table 46 | Average Number of alerts per EMD episode by EMD episode completion status and alert status

EMD episode completion status	Alert status	Frequency	Mean	Median	Std. Dev.	Min	Max
Successful completion	Confirmed alerts	82	53.9	30.5	67.5	1	322
	Cancelled alerts	82	59.1	31.5	79.3	1	437
Unsuccessful completion	Confirmed alerts	32	38.9	21.5	44.1	0	169
	Cancelled alerts	32	47.2	25.5	59.0	0	261

Table 47 | Frequency of confirmed alerts for successfully completed EMD episodes by alert type (n = 82)

Confirmed alert type	Frequency	Mean	Median	Min	Max
Inclusion zone	3049	37.2	14	0	263
Low battery	708	8.6	4.5	0	88
No communication	338	4.1	1	0	49
Strap alerts	236	2.9	1	0	55
Exclusion zone	89	1.1	0	0	53
No movement	2	0.02	0	0	1

Table 48 | Frequency of confirmed alerts for unsuccessful EMD episodes by alert type (n = 32)

Confirmed alert type	Frequency	Mean	Median	Std. Dev.	Min	Max
Inclusion zone	907	28.3	15.5	0	123	907
Low battery	192	6	3.5	0	33	192
No communication	108	3.4	1.5	0	24	108
Strap alerts	32	1	0	0	6	32

Confirmed alert type	Frequency	Mean	Median	Std. Dev.	Min	Max
Exclusion zone	6	0.2	0	0	6	6
No movement	0	0	0	0	0	0

Table 49 | Average number of days in custody during an EMD episode by episode completion status

Episode completion status	Frequency	Mean	Median	Std. Dev.	Min	Max
Successful completion	82	6.9	0	19.3	0	123
Unsuccessful completion	32	13.5	3	27.8	0	116

Table 50 | Average number of police interactions per successful EMD episode by interaction type (n=82)

Interaction type	Total interactions	Mean	Median	Min	Max
Street checks	1296	15.8	8	0	114
Intelligence requests	195	2.4	2	0	26
Breach of bail	169	2.1	0	0	26

Table 51 | Average number of police interactions per unsuccessful EMD episode by interaction type (n=32)

Interaction type	Total interactions	Mean	Median	Min	Max
Street checks	294	9.2	6.5	0	39
Intelligence requests	63	2.0	2	0	7
Breach of bail	76	2.4	2	0	9

*Note breach of bail data missing for 1 participant

Table 52 | Average number of days with an EMD per EMD episode by completion status

Completion status	Frequency	Mean	Median	Std. Dev.	Min	Max
Successful completion	82	75.4	57	70.4	6	450
Unsuccessful completion	32	47.3	40	33.4	8	121

Table 53 | Frequency of EMD episodes by completion status and First nations status

First Nations status	Successful completion	Unsuccessful completion	Total
Other	47 (74.60%)	16 (25.40%)	63 (100.00%)
Indigenous	35 (68.63%)	16 (31.37%)	51 (100.00%)
Total	82 (71.93%)	32 (28.07%)	114 (100.00%)

Table 54 | Frequency of EMD episodes by completion status and age

Age	Successful completion	Unsuccessful completion	Total
15	27 (81.82%)	6 (18.18%)	33 (100.00%)
16	26 (63.41%)	15 (36.59%)	41 (100.00%)
17	26 (72.22%)	10 (27.78%)	36 (100.00%)
18	3 (75.00%)	1 (25.00%)	4 (100.00%)
Total	82 (71.93%)	32 (28.07%)	114 (100.00%)

Table 55 | Frequency of EMD episodes by completion status and sex

Sex	Successful completion	Unsuccessful completion	Total
Female	12 (80.00%)	3 (20.00%)	15 (100.00%)
Male	70 (70.71%)	29 (29.29%)	99 (100.00%)
Total	82 (71.93%)	32 (28.07%)	114 (100.00%)

Table 56 | Frequency of EMD episodes by completion status and disability status

Disability flag	Successful completion	Unsuccessful completion	Total
No	44 (69.84%)	19 (30.16%)	63 (100.00%)
Yes	32 (78.05%)	9 (21.95%)	41 (100.00%)
Not available	6 (60.00%)	4 (40.00%)	10 (100.00%)
Total	82 (71.93%)	32 (28.07%)	114 (100.00%)

Table 57 | Frequency of EMD episodes by completion status and mental health status

Poor mental health flag	Successful completion	Unsuccessful completion	Total
No	41 (82.00%)	9 (18.00%)	50 (100.00%)
Yes	35 (64.81%)	19 (35.19%)	54 (100.00%)

Poor mental health flag	Successful completion	Unsuccessful completion	Total
Not available	6 (60.00%)	4 (40.00%)	10 (100.00%)
Total	82 (71.93%)	32 (28.07%)	114 (100.00%)

Table 58 | Frequency of EMD episodes by completion status and Serious Repeat Offender status

Serious Repeat Offender status	Successful completion	Unsuccessful completion	Total
Non-serious	41 (82.00%)	9 (18.00%)	50 (100.00%)
Serious	41 (64.06%)	23 (35.94%)	64 (100.00%)
Total	82 (71.93%)	32 (28.07%)	114 (100.00%)

Table 59 | Frequency EMD episodes by completion status and overall risk rating

Overall YLS/CMI risk rating	Successful completion	Unsuccessful completion	Total
0. Not available	8 (61.54%)	5 (38.46%)	13 (100.00%)
1. Low	0 (0.00%)	0 (0.00%)	0 (0.00%)
2. Moderate	10 (76.92%)	3 (23.08%)	13 (100.00%)
3. High	38 (74.51%)	13 (25.49%)	51 (100.00%)
4. Very high	26 (70.27%)	11 (29.73%)	37 (100.00%)
Total	82 (71.93%)	32 (28.07%)	114 (100.00%)

Table 60 | Frequency of EMD episodes by completion status and region

Region	Successful completion	Unsuccessful completion	Total
Brisbane and Moreton Bay	17 (73.91%)	6 (26.09%)	23 (100.00%)
Far North QLD	6 (66.67%)	3 (33.33%)	9 (100.00%)
North QLD	50 (79.37%)	13 (20.63%)	63 (100.00%)
South East	7 (53.85%)	6 (46.15%)	13 (100.00%)
South West	2 (50.00%)	2 (50.00%)	4 (100.00%)
Sunshine Coast and Central	0 (0.00%)	1 (100.00%)	1 (100.00%)
Unknown	0 (0.00%)	1 (100.00%)	1 (100.00%)
Total	82 (71.93%)	32 (28.07%)	114 (100.00%)

Table 61 | Frequency of EMD episodes by alleged offending status

Alleged offending status	Frequency	Percentage
Did not offend	42	36.84%
Offended	72	63.16%
Total	114	100.00%

Table 62 | Average frequency of alleged offences during per EMD episode

	Frequency	Mean	Median	Std. Dev.	Min	Max
Alleged offences during an EMD episode	144	4.4	2	6.1	0	34

Table 63 | Frequency of EMD episode by seriousness of alleged offending

Seriousness	Frequency	Percent
Not Serious	98	85.96%
Serious	16	14.04%
Total	114	100.00%

Table 64 | Frequency of EMD episodes with serious alleged offences by type

Description of alleged most serious offence	Frequency	Percentage
Breach of bail (remainder)	17	23.61%
Armed robbery	8	11.11%
Illegal use of a motor vehicle	8	11.11%
Property damage, nec (remainder)	7	9.72%
Enter shop with intent	7	9.72%
Enter dwelling with intent, without violence or threats	6	8.33%
Going armed in public	3	4.17%
Break and enter shop	2	2.78%
Assault occasioning actual bodily harm	2	2.78%
Assault police	1	1.39%
Break and enter dwelling, without violence or threats	1	1.39%
Dangerous driving	1	1.39%

Description of alleged most serious offence	Frequency	Percentage
Deprivation of liberty/false imprisonment	1	1.39%
Failure to appear	1	1.39%
Obtain benefit by deception (remainder)	1	1.39%
Possession of drug utensils	1	1.39%
Aggravated unarmed robbery	1	1.39%
Serious assault not resulting in injury (remainder)	1	1.39%
Serious assault resulting in injury (remainder)	1	1.39%
Theft (except motor vehicles), nec (remainder)	1	1.39%
Theft from a person (excluding by force) (remainder)	1	1.39%
Total	72	100.00%

Table 65 | Frequency of EMD episodes by occurrence alleged offences typically with victims during bail

Offence with a victim	Frequency	Percentage
Without victims	68	59.65%
With victims	46	40.35%
Total	114	100.00%

Table 66 | Frequency of EMD episodes by street checks during episode and episode completion status

Street check	Successful completion	Unsuccessful completion	Total
Street check did not occur	1 (1.22%)	3 (9.38%)	4 (3.51%)
Street check occurred	81 (98.78%)	29 (90.62%)	110 (96.49%)
Total	82 (100.00%)	32 (100.00%)	114 (100.00%)

Table 67 | Frequency of EMD episodes by intelligence requests during episode and episode completion status

Intelligence requests	Successful completion	Unsuccessful completion	Total
Intelligence request did not occur	7 (8.54%)	7 (21.88%)	14 (12.28%)
Intelligence request occurred	75 (91.46%)	25 (78.12%)	100 (87.72%)

Intelligence requests	Successful completion	Unsuccessful completion	Total
Total	82 (100.00%)	32 (100.00%)	114 (100.00%)

Table 68 | Frequency of EMD episodes by breach of bail during episode and episode completion status

Breach of bail	Successful completion	Unsuccessful completion	Total
Breach did not occur	45 (54.88%)	9 (29.03%)	54 (47.79%)
Breach occurred	37 (45.12%)	22 (70.97%)	59 (52.21%)
Total	82 (100.00%)	32 (100.00%)	114 (100.00%)

*Data missing for 1 case

Table 69 | Frequency of EMD episodes by intelligence requests during episode and offended during episode

Street check	Did not offend	Offended	Total
Street check did not occur	1 (2.38%)	3 (4.17%)	4 (3.51%)
Street check occurred	41 (97.62%)	69 (95.83%)	110 (96.49%)
Total	42 (100.00%)	72 (100.00%)	114 (100.00%)

Table 70 | Frequency of EMD episodes by period of custody during episode

Custody during EMD	Frequency	Percentage
Did not spend time in custody	62	54.39%
Spent time in custody	52	45.61%
Total	114	100.00%

Table 71 | Average number of days in custody per EMD episode

	Frequency	Mean	Median	Std. Dev.	Min	Max
Days in custody	114	8.7	0	22.1	0	123

Table 72 | Frequency of EMD episodes by time in custody during episode and alleged offending during episode

Custody during EMD episode	Did not offend	Offended	Total
Did not spend time in custody	41 (97.62%)	21 (29.17%)	62 (54.39%)

Custody during EMD episode	Did not offend	Offended	Total
Spent time in custody	1 (2.38%)	51 (70.83%)	52 (45.61%)
Total	42 (100.00%)	72 (100.00%)	114 (100.00%)

Table 73 | Frequency of EMD episodes by alleged offending before episode

Offending before EMD episode	Frequency	Percentage
Did not offend	12	10.53%
Offended	102	89.47%
Total	114	100.00%

Table 74 | Average number of alleged offences before EMD episode per episode

	Frequency	Mean	Median	Std. Dev.	Min	Max
Alleged offences before an EMD episode	114	13.07	10	13.31	0	68

Table 75 | Frequency of EMD episodes by seriousness of alleged offending before EMD episode

Seriousness of alleged offending before EMD episode	Frequency	Percentage
Not Serious	61	53.51%
Serious	53	46.49%
Total	114	100.00%

Table 76 | Frequency of EMD episodes by type of most serious alleged offence before EMD episode

Description of alleged most serious offence before EMD episode	Frequency	Percentage
Armed robbery	20	19.61%
Enter dwelling with intent, without violence or threats	19	18.63%
Enter shop with intent	12	11.76%
Assault occasioning actual bodily harm	9	8.82%
Dangerous driving	8	7.84%
Illegal use of a motor vehicle	4	3.92%
Going armed in public	4	3.92%
Common assault	3	2.94%

Description of alleged most serious offence before EMD episode	Frequency	Percentage
Assault police	3	2.94%
Failure to appear	2	1.96%
Break and enter shop	2	1.96%
Breach of bail (remainder)	2	1.96%
Serious assault resulting in injury (remainder)	2	1.96%
Stalking	1	0.98%
Assault occasioning grievous bodily harm	1	0.98%
Property damage, nec (remainder)	1	0.98%
Threatening behaviour	1	0.98%
Theft from retail premises	1	0.98%
Wounding	1	0.98%
Break and enter dwelling, without violence or threats	1	0.98%
Sell, possess and/or use prohibited weapons/explosives	1	0.98%
Manufacture illicit drugs	1	0.98%
Serious assault not resulting in injury (remainder)	1	0.98%
Driving without due care and attention	1	0.98%
Deprivation of liberty/false imprisonment	1	0.98%
Total	102	100.00%

Table 77 | Frequency of EMD episodes by alleged offences before EMD episode involving victimisation

Alleged offence before EMD episode with a victim	Frequency	Percentage
Without victims	19	16.67%
With victims	95	83.33%
Total	114	100.00%

Table 78 | Average alleged offence with victims before EMD episode per EMD episode

	Frequency	Mean	Median	Std. Dev.	Min	Max
Alleged offences with victims before EMD episode	114	7.7	5	8.8	0	47

Table 79 | Frequency of EMD episodes by periods of custody before EMD episode

Period of custody before EMD episode	Frequency	Percentage
Did not spend time in custody	5	4.39%
Spent time in custody	109	95.61%
Total	114	100.00%

Table 80 | Average number of days in custody before EMD episode per EMD episode

	Frequency	Mean	Median	Std. Dev.	Min	Max
Number of days in custody before an EMD episode	114	36.9	29.5	29.6	0	91

Table 81 | Frequency of EMD episodes by alleged offending before EMD episode and time spent in custody before EMD episode

Period of custody before EMD episode	Did not offend	Offended	Total
Did not spend time in custody	0 (0.00%)	5 (4.90%)	5 (4.39%)
Spent time in custody	12 (100.00%)	97 (95.10%)	109 (95.61%)
Total	12 (100.00%)	72 (100.00%)	114 (100.00%)

Table 82 | Frequency of episodes by offending during bail and treatment cohort

Offended during bail	CBP cohort (comparison)	EMD cohort (treatment)	Total
Did not offend	261 (19.08%)	42 (36.84%)	303 (20.45%)
Offended	1107 (80.92%)	72 (63.16%)	1179 (79.55%)
Total	1368 (100.00%)	114 (100.00%)	1482 (100.00%)

Table 83 | Average number of alleged offences during bail by treatment cohort

Alleged offences during bail	Frequency	Mean	Median	Std. Dev.	Min	Max
EMD cohort (treatment)	114	4.439	2	6.054	0	34

Alleged offences during bail	Frequency	Mean	Median	Std. Dev.	Min	Max
CBP cohort (comparison)	1368	7.369	5	9.409	0	137

Table 84 | Frequency of CBP episodes by seriousness of alleged offending during bail

Seriousness of offending	Frequency	Percentage
Not Serious	1018	74.42%
Serious	350	25.58%
Total	1368	100.00%

Table 85 | Frequency of CBP episodes by type of most serious alleged offences

Description of alleged most serious offence	Frequency	Percentage
Enter dwelling with intent, without violence or threats	183	16.53%
Illegal use of a motor vehicle	125	11.29%
Armed robbery	100	9.03%
Breach of bail (remainder)	87	7.86%
Enter shop with intent	82	7.41%
Assault occasioning actual bodily harm	81	7.32%
Break and enter shop	50	4.52%
Theft (except motor vehicles), nec (remainder)	54	4.88%
Dangerous driving	48	4.34%
Failure to appear	42	3.79%
Going armed in public	39	3.52%
Common assault	30	2.71%
Break and enter dwelling, without violence or threats	14	1.26%
Assault police	13	1.17%
Non-aggravated robbery	13	1.17%
Property damage, nec (remainder)	11	0.99%
Serious assault not resulting in injury (remainder)	10	0.90%
Other	125	11.29%

Description of alleged most serious offence	Frequency	Percentage
Total	1107	100.00%

*Note data is missing for the 261 young people in the CC who did not commit an alleged offence during bail

Table 86 | Frequency of CBP episodes by alleged offences during bail with victims

Offence with a victim	Frequency	Percentage
Without victims	459	33.55%
With victims	909	66.45%
Total	1368	100.00%

Table 87 | Average number of alleged offences with victims per episode by treatment cohort

Treatment cohort	Frequency	Mean	Median	Std. Dev.	Min	Max
EMD cohort (treatment)	114	1.5	0	2.9	0	16
CBP cohort (comparison)	1368	3.7	1	5.3	0	52

Table 88 | Frequency of episodes with periods of custody during bail by treatment cohort

Spent time in custody during episode	CBP cohort (comparison)	EMD cohort (treatment)	Total
Did not spend time in custody	614 (44.88%)	62 (54.39%)	676 (45.61%)
Spent time in custody	754 (55.12%)	52 (45.61%)	806 (54.39%)
Total	1368 (100.00%)	114 (100.00%)	1482 (100.00%)

Table 89 | Average number of days in custody during bail by treatment cohort

Treatment cohort	Frequency	Mean	Median	Std. Dev.	Min	Max
EMD cohort (treatment)	114	8.7	0	22.09	0	123
CBP cohort (comparison)	1368	17.02	1	40.19	0	404

Table 90 | Frequency of episodes by time in custody during bail, treatment cohort and alleged offending during episode

Spent time in custody during episode	CBP cohort (comparison)		EMD cohort (treatment)	
	Did not offend	Offended	Did not offend	Offended
Did not spend time in custody	244 (93.49%)	370 (33.42%)	41 (97.62%)	21 (29.17%)
Spent time in custody	17 (6.51%)	737 (66.58%)	1 (2.38%)	51 (70.83%)
Total	261 (100.00%)	1107 (100.00%)	42 (100.00%)	72 (100.00%)

Table 91 | Frequency of episodes by First Nations status, treatment cohort and alleged offending during episode

First Nations status	CBP cohort (comparison)		EMD cohort (treatment)	
	Did not offend	Offended	Did not offend	Offended
Non-Indigenous	113 (20.85%)	429 (79.15%)	27 (42.86%)	36 (57.14%)
First Nations	148 (17.92%)	678 (82.08%)	15 (29.41%)	36 (70.59%)
Total	261 (19.08%)	1107 (80.92%)	42 (36.84%)	72 (63.16%)

Table 92 | Frequency of episodes by age, treatment cohort and alleged offending during episode

Age	CBP cohort (comparison)		EMD cohort (treatment)	
	Did not offend	Offended	Did not offend	Offended
15	92 (15.36%)	507 (84.64%)	10 (30.30%)	23 (69.70%)
16	93 (20.13%)	369 (79.87%)	13 (31.71%)	28 (68.29%)
17	68 (23.94%)	216 (76.06%)	16 (44.44%)	20 (55.56%)
18	8 (34.78%)	15 (65.22%)	3 (75.00%)	1 (25.00%)
Total	261 (19.08%)	1107 (80.92%)	42 (36.84%)	72 (63.16%)

Table 93 | Frequency of episodes by sex, treatment cohort and alleged offending during episode

Sex/gender	CBP cohort (comparison)		EMD cohort (treatment)	
	Did not offend	Offended	Did not offend	Offended
Female	73 (20.22%)	288 (79.78%)	5 (33.33%)	10 (66.67%)
Male	188 (18.67%)	819 (81.33%)	37 (37.37%)	62 (62.63%)

Sex/gender	CBP cohort (comparison)		EMD cohort (treatment)	
	Did not offend	Offended	Did not offend	Offended
Total	261 (19.08%)	1107 (80.92%)	42 (36.84%)	72 (63.16%)

Table 94 | Frequency of episodes by disability status, treatment cohort and alleged offending during episode

Disability status	CBP cohort (comparison)		EMD cohort (treatment)	
	Did not offend	Offended	Did not offend	Offended
No	191 (19.65%)	781 (80.35%)	25 (39.68%)	38 (60.32%)
Yes	55 (15.54%)	299 (84.46%)	13 (31.71%)	28 (68.29%)
Not available	15 (35.71%)	27 (64.29%)	4 (40.00%)	6 (60.00%)
Total	261 (19.08%)	1107 (80.92%)	42 (36.84%)	72 (63.16%)

Table 95 | Frequency of episodes by mental health status, treatment cohort and alleged offending during episode

Poor mental health status	CBP cohort (comparison)		EMD cohort (treatment)	
	Did not offend	Offended	Did not offend	Offended
No	136 (17.62%)	636 (82.38%)	25 (50.00%)	25 (50.00%)
Yes	110 (19.86%)	444 (80.14%)	13 (24.07%)	41 (75.93%)
Not available	15 (35.71%)	27 (64.29%)	4 (40.00%)	6 (60.00%)
Total	261 (19.08%)	1107 (80.92%)	42 (36.84%)	72 (63.16%)

Table 96 | Frequency of episodes by Serious Repeat Offender (SRO) status, treatment cohort and alleged offending during episode

SRO status	CBP cohort (comparison)		EMD cohort (treatment)	
	Did not offend	Offended	Did not offend	Offended
Not serious	201 (23.43%)	657 (76.57%)	23 (46.00%)	27 (54.00%)
Serious	60 (11.76%)	450 (88.24%)	19 (29.69%)	45 (70.31%)
Total	261 (19.08%)	1107 (80.92%)	42 (36.84%)	72 (63.16%)

Table 97 | Frequency of episodes by overall YLS/CMI risk rating, treatment cohort and alleged offending during episode

Overall YLS/CMI risk rating	CBP cohort (comparison)		EMD cohort (treatment)	
	Did not offend	Offended	Did not offend	Offended
0. Not available	21 (23.86%)	67 (76.14%)	4 (30.77%)	9 (69.23%)
1. Low	16 (42.11%)	22 (57.89%)	0 (0.00%)	0 (0.00%)
2. Moderate	72 (23.53%)	234 (76.47%)	8 (61.54%)	5 (38.46%)
3. High	114 (17.81%)	526 (82.19%)	22 (43.14%)	29 (56.86%)
4. Very high	38 (12.84%)	258 (87.16%)	8 (21.62%)	29 (78.38%)
Total	261 (19.08%)	1107 (80.92%)	42 (36.84%)	72 (63.16%)

Table 98 | Frequency of episodes by region, treatment cohort and alleged offending during episode

Region	CBP cohort (comparison)		EMD cohort (treatment)	
	Did not offend	Offended	Did not offend	Offended
Brisbane and Moreton Bay	62 (20.81%)	236 (79.19%)	9 (39.13%)	14 (60.87%)
Far North QLD	20 (12.50%)	140 (87.50%)	3 (33.33%)	6 (66.67%)
North QLD	40 (23.67%)	129 (76.33%)	26 (41.27%)	37 (58.73%)
South East	52 (18.71%)	226 (81.29%)	3 (23.08%)	10 (76.92%)
South West	44 (15.02%)	249 (84.98%)	1 (25.00%)	3 (75.00%)
Sunshine Coast and Central	36 (26.47%)	100 (73.53%)	0 (0.00%)	1 (100.00%)
Unknown	7 (20.59%)	27 (79.41%)	0 (0.00%)	1 (100.00%)
Total	261 (19.08%)	1107 (80.92%)	42 (36.84%)	72 (63.16%)

Table 99 | Frequency of EMD episodes by alleged offending during episode and successful completion of episode

Alleged offending during episode	Successful completion	Unsuccessful completion	Total
Did not offend	39 (47.56%)	3 (9.38%)	42 (36.84%)

Alleged offending during episode	Successful completion	Unsuccessful completion	Total
Offended	43 (52.44%)	29 (90.62%)	72 (63.16%)
Total	82 (100.00%)	32 (100.00%)	114 (100.00%)

Table 100 | Average number of alleged offences during EMD episode by successful completion of episode

EMD episode completion status	Frequency	Mean	Median	Std. Dev.	Min	Max
Successful completion	82	3.6	1	6.1	0	34
Unsuccessful completion	32	6.7	5.5	5.5	0	23

Table 101 | Frequency of EMD episodes by seriousness of alleged offending during episode and successful completion of episode

Seriousness	Successful completion	Unsuccessful completion	Total
Not serious	76 (92.68%)	22 (68.75%)	98 (85.96%)
Serious	6 (7.32%)	10 (31.25%)	16 (14.04%)
Total	82 (100.00%)	32 (100.00%)	114 (100.00%)

Table 102 | Frequency of EMD episodes by type of serious alleged offending during episode and successful completion of episode

QASOC description of MSO (alleged) during episode	Successful completion	Unsuccessful completion
Breach of bail (remainder)	16 (37.21%)	1 (3.45%)
Illegal use of a motor vehicle	6 (13.95%)	2 (6.90%)
Enter dwelling with intent, without violence or threats	5 (11.63%)	1 (3.45%)
Armed robbery	4 (9.30%)	4 (13.79%)
Enter shop with intent	4 (9.30%)	3 (10.34%)
Property damage, nec (remainder)	3 (6.98%)	4 (13.79%)
Assault occasioning actual bodily harm	2 (4.65%)	0 (0.00%)
Possession of drug utensils	1 (2.33%)	0 (0.00%)
Theft (except motor vehicles), nec (remainder)	1 (2.33%)	0 (0.00%)

QASOC description of MSO (alleged) during episode	Successful completion	Unsuccessful completion
Going armed in public	1 (2.33%)	2 (6.90%)
Dangerous driving	0 (0.00%)	1 (3.45%)
Break and enter shop	0 (0.00%)	2 (6.90%)
Aggravated unarmed robbery	0 (0.00%)	1 (3.45%)
Assault police	0 (0.00%)	1 (3.45%)
Break and enter dwelling, without violence or threats	0 (0.00%)	1 (3.45%)
Failure to appear	0 (0.00%)	1 (3.45%)
Theft from a person (excluding by force) (remainder)	0 (0.00%)	1 (3.45%)
Serious assault not resulting in injury (remainder)	0 (0.00%)	1 (3.45%)
Serious assault resulting in injury (remainder)	0 (0.00%)	1 (3.45%)
Obtain benefit by deception (remainder)	0 (0.00%)	1 (3.45%)
Deprivation of liberty/false imprisonment	0 (0.00%)	1 (3.45%)
Total	43 (100.00%)	29 (100.00%)

Table 103 | Frequency of EMD episodes by alleged offences with victims during episode and successful completion of episode

Alleged offences during episode	Successful completion	Unsuccessful completion	Total
Without victims	59 (71.95%)	9 (28.12%)	68 (59.65%)
With victims	23 (28.05%)	23 (71.88%)	46 (40.35%)
Total	82 (100.00%)	32 (100.00%)	114 (100.00%)

Table 104 | Frequency of EMD episodes by time spent in custody during episode and successful completion of episode

Time spent in custody during episode	Successful completion	Unsuccessful completion	Total
Did not spend time in custody	57 (69.51%)	5 (15.62%)	62 (54.39%)
Spent time in custody	25 (30.49%)	27 (84.38%)	52 (45.61%)
Total	82 (100.00%)	32 (100.00%)	114 (100.00%)

G.3 Engagement

Please note analysis in this section is conducted at the EMD condition order episode level and does not represent the number of unique young people in the sample – this is referred to as a 'EMD episode'. This means multiple young people have been on an EMD condition more than once. Up until data extraction on 30 June 2025, there had been 139 episodes where young people had an EMD condition order (complete or incomplete) and 114 episodes where young people had completed an EMD condition order.

Table 105 | Frequency of EMD episodes by participation in CBP

CBP during EMD episode	Frequency	Percentage
Not subject to the CBP	36	31.58%
Subject to the CBP	78	68.42%
Total	114	100.00%

Table 106 | Frequency of EMD episodes (complete or incomplete) by engagement with YCRTs

Engagement with YCRTs	Frequency	Percentage
Engaged with YCRTs	127	91.37%
Not engaged with YCRTs	12	8.63%
Total	139	100.00%

Table 107 | Frequency of EMD episodes by total YCRT engagements

Number of YCRT bail compliance engagements	Frequency	Percentage
No engagements	12	8.63%
1 - 9 engagements	65	46.76%
10 - 19 engagements	31	22.30%
20 - 29 engagements	14	10.07%
30 - 39 engagements	8	5.76%
40 - 49 engagements	2	1.44%
50 or more engagements	7	5.04%
Total	114	100.00%

Table 108 | Average number of YCRT engagements per EMD episode (complete or incomplete)

	Frequency	Mean	Median	Std. Dev.	Min	Max
YCRT engagements	139	14.3	8	19.6	0	119

Table 109 | Average frequency of YCRT engagements per EMD episode by type

Types of YCRT engagements	Average frequency of engagements per EMD episode	Total count of engagements for EM trial	Percentage of total engagements
Bail compliance	9.2	1087	54.58%
Call for service	4.4	384	19.29%
Follow up	3.0	245	12.31%
EMD alert	1.9	87	4.37%
Home visit	1.5	24	1.21%
No signal on EMD	1.3	22	1.10%
No contact	1.6	21	1.05%
Court ordered compliance check	1.1	20	1.00%
Incident in progress	1.5	18	0.90%
Transport	1.8	11	0.55%
EMSU contact	1.4	10	0.50%
Engagement in custody	1.1	10	0.50%
EMD compliance	1.7	10	0.50%
Street check	1.8	9	0.45%
Phone call from participant	1.3	8	0.40%
Targeted intelligence	1.6	8	0.40%
Participant updating details	1	5	0.25%
Other	1.3	12	0.60%
Total		1991	100.00%

Table 110 | Frequency of EMD episodes (complete or incomplete) by engagement with IBI

Engagement with IBI	Frequency	Percentage
Engaged with IBI	71	51.08%
Not engaged with IBI	68	48.92%

Engagement with IBI	Frequency	Percentage
Total	139	100.00%

Table 111 | Frequency of EMD episodes (complete or incomplete) by engagement with BSS

Engagement with BSS	Frequency	Percentage
Engaged with BSS	64	46.04%
Not engaged with BSS	75	53.96%
Total	139	100.00%

Table 112 | Frequency of EMD episodes (complete or incomplete) by engagement with FP

Engagement with FP	Frequency	Percentage
Engaged with FP	11	7.91%
Not engaged with FP	128	92.09%
Total	139	100.00%

Table 113 | Frequency of EMD episodes (complete or incomplete) by engagement with CC

Engagement with CC	Frequency	Percentage
Engaged with CC	3	2.16%
Not engaged with CC	136	97.84%
Total	139	100.00%

Table 114 | Frequency of EMD episodes by EMD episode completion status and YCRT engagement

Completion status	Engaged with YCRTs	Not engaged with YCRTs	Total
Successful completion	77 (74.04%)	5 (50.00%)	82 (71.93%)
Unsuccessful completion	27 (25.96%)	5 (50.00%)	32 (28.07%)
Total	104 (100.00%)	10 (100.00%)	114 (100.00%)

Figure 22 | Average frequency of YCRT engagements per EMD episode by EMD episode completion status

EMD episode completion status	Frequency	Mean	Median	Std. Dev.	Min	Max
Successful completion	82	17.3	10.5	21.40	0	119
Unsuccessful completion	32	10.6	5	13.5	0	62

Table 115 | Frequency of EMD episodes by EMD episode completion status and IBI engagement

EMD episode completion status	Engaged with IBI	Not engaged with IBI	Total
Successful completion	50 (80.65%)	32 (61.54%)	82 (71.93%)
Unsuccessful completion	12 (19.35%)	20 (38.46%)	32 (28.07%)
Total	62 (100.00%)	52 (100.00%)	114 (100.00%)

Table 116 | Frequency of EMD episodes with YCRT bail compliance engagements by episode completion status

Number of YCRT bail compliance engagements	Successful completion	Unsuccessful completion	Total
1 - 9 engagements	50 (69.44%)	19 (73.08%)	69 (70.41%)
10 - 19 engagements	12 (16.67%)	4 (15.38%)	16 (16.33%)
20 - 29 engagements	5 (9.94%)	2 (7.69%)	7 (7.14%)
30 or more engagements	5 (6.94%)	1 (3.85%)	6 (6.12%)
Total	72 (100.00%)	26 (100.00%)	98 (100.00%)

Table 117 | Average number of bail compliance engagements per EMD episode

	Frequency	Mean	Median	Std. Dev.	Min	Max
Bail compliance engagements	62	9.2	4.5	13.4	1	91

Table 118 | Average frequency of QCS alerts per EMD episode by YCRT engagement

YCRT engagement	QCS alert status	Total alerts	Mean	Median	Std. Dev.	Min	Max
Engaged with YCRT (n=104)	Confirmed alerts	5587	53.7	33.5	63.4	1	322
	Cancelled alerts	6282	60.4	34	76.0	3	437
Not engaged with YCRT (n=10)	Confirmed alerts	80	8	5	9.2	0	29
	Cancelled alerts	71	7.1	4.5	7.3	0	19

Table 119 | Average frequency of QPS interactions per EMD episode by YCRT engagement

YCRT engagement	Interaction type	Total interactions	Mean	Median	Std. Dev.	Min	Max
Engaged with YCRT (n=104)	Street checks	1543	14.8	8	18.4	0	114
	Intelligence requests	241	2.3	2	2.9	0	26
	Breach of bail	232	2.3	1	4.4	0	26
Not engaged with YCRT (n=10)	Street checks	47	4.7	3	5.7	0	20
	Intelligence requests	17	1.7	1	2.1	0	6
	Breach of bail	13	1.3	0.5	1.9	0	6

*Data is missing for one episode

Table 120 | Average frequency of QCS alerts per EMD episode by IBI engagement

IBI engagement	QCS alert status	Total alerts	Mean	Median	Std. Dev.	Min	Max
Engaged with IBI (n=62)	Confirmed alerts	3179	51.3	25	66.9	1	322
	Cancelled alerts	3235	52.2	28	68.6	3	304
Not engaged with IBI (n=52)	Confirmed alerts	2488	47.8	30.5	56.1	0	266
	Cancelled alerts	3118	60.0	36.5	80.7	0	437

Table 121 | Average frequency of QPS interactions per EMD episode by IBI engagement and QPS interaction type

IBI engagement	QPS interaction type	Total alerts	Mean	Median	Std. Dev.	Min	Max
Engaged with IBI (n=62)	Street checks	1002	16.2	8.5	19.1	0	114
	Intelligence requests	130	2.1	1	2.00	0	9
	Breach of bail	97	1.6	0	2.3	0	8
Not engaged with IBI (n=52)	Street checks	588	11.3	6	16.	0	87
	Intelligence requests	128	2.5	2	3.7	0	26
	Breach of bail	148	2.8	1	5.7	0	26

Table 122 | Frequency of EMD episodes by offending during EMD episode and YCRT engagement

Offending during an EMD episode	Engaged with YCRTs	Not engaged with YCRTs	Total
Offended	64 (61.54%)	8 (80.00%)	72 (63.16%)
Did not offend	40 (38.46%)	2 (20.00%)	42 (36.84%)
Total	104 (100.00%)	10 (100.00%)	114 (100.00%)

Table 123 | Average frequency of alleged offence during an EMD episode by YCRT engagement

YCRT engagement	Average	Median	Std. Dev.	Min	Max
Engaged with YCRTs	4.5	2	6.2	0	34
Not engaged with YCRTs	4.2	2	4.4	0	11

Table 124 | Frequency of EMD episodes by alleged offence during EMD episode and engagement with IBI

Offending during an EMD episode	Engaged with IBI	Not engaged with IBI	Total
Offended	36 (58.06%)	36 (69.23%)	72 (63.16%)
Did not offend	26 (41.94%)	16 (30.77%)	42 (36.84%)
Total	64 (100.00%)	52 (100.00%)	114 (100.00%)

Table 125 | Average frequency of alleged offence per EMD episode by engagement with IBI

IBI engagement	Frequency	Mean	Median	Std. Dev.	Min	Max
Engaged with IBI	62	3.7	2	5.2	0	23
Not engaged with IBI	52	5.3	3	6.9	0	34

Appendix H : YJ and QPS survey

This appendix details the survey analysis undertaken to answer each KEQ. Survey questions were grouped under five sub questions:

- Thinking about the use of EMDs as a bail condition for young people, rate how you agree or disagree with the following statements.
- Thinking about the use of EMDs as a tool to increase compliance with bail conditions, rate how you agree or disagree with the following statements.
- Thinking about the use of wrap-around support services like YCRTs and IBI rate how you agree or disagree with the following statements.
- Thinking about your role as a YJ staff-member, rate how you agree or disagree with the following statements.
- Thinking about your role as a QPS staff-member, rate how you agree or disagree with the following statements.

There were also six general questions including three open ended responses. Responses to the questions are presented below.

Thinking about the use of EMDs as a bail condition for young people, rate how you agree or disagree with the following statements

Table 126 | Responses to 'the effectiveness of EMDs depends on where the young person is located'

Response	Frequency	Percentage of responses
Strongly agree	6	22%
Somewhat agree	6	22%
Neither agree nor disagree	10	37%
Somewhat disagree	4	15%
Strongly disagree	1	4%
Total	27	100.00%

Table 127 | Responses to 'the criteria to assess suitability and eligibility for an EMD is fair and consistent'

Response	Frequency	Percentage of responses
Strongly agree	2	8%
Somewhat agree	11	42%
Neither agree nor disagree	6	23%
Somewhat disagree	4	15%
Strongly disagree	3	12%
Total	26	100.00%

Table 128 | Responses to 'courts feel safer granting bail to high-risk young people if EMDs are used'

Response	Frequency	Percentage of responses
Strongly agree	7	26%
Somewhat agree	7	26%
Neither agree nor disagree	4	15%
Somewhat disagree	5	19%
Strongly disagree	4	15%
Total	27	100.00%

Table 129 | Responses to 'the current EMD monitoring systems work effectively'

Response	Frequency	Percentage of responses
Strongly agree	0	0%
Somewhat agree	5	19%
Neither agree nor disagree	11	42%
Somewhat disagree	5	19%
Strongly disagree	5	19%
Total	26	100.00%

Table 130 | Responses to 'EMDs improve family relationships'

Response	Frequency	Percentage of responses
Strongly agree	0	0.00%
Somewhat agree	2	7.69%
Neither agree nor disagree	10	38.46%
Somewhat disagree	6	23.08%
Strongly disagree	8	30.77%
Total	26	100.00%

Table 131 | Responses to 'the use of EMDs helps to address community concerns about youth offending'

Response	Frequency	Percentage of responses
Strongly agree	1	4%
Somewhat agree	8	31%
Neither agree nor disagree	4	15%
Somewhat disagree	9	35%
Strongly disagree	4	15%
Total	26	100.00%

Table 132 | Responses to 'the EM trial is operating as intended'

Response	Frequency	Percentage of responses
Strongly agree	0	0%
Somewhat agree	8	31%
Neither agree nor disagree	8	31%
Somewhat disagree	3	12%
Strongly disagree	7	27%
Total	26	100.00%

Table 133 | Responses to 'there are adequate resources and supports in place to ensure effective and efficient operation of EM initiative'

Response	Frequency	Percentage of responses
Strongly agree	0	0%
Somewhat agree	7	27%
Neither agree nor disagree	6	23%
Somewhat disagree	8	31%
Strongly disagree	5	19%
Total	26	100.00%

Table 134 | Responses to 'Communication between relevant agencies supports effective practice for EM'

Response	Frequency	Percentage of responses
Strongly agree	1	3.85%
Somewhat agree	10	38.46%
Neither agree nor disagree	7	26.92%
Somewhat disagree	5	19.23%
Strongly disagree	3	11.54%
Total	26	100.00%

Table 135 | Responses to 'EMDs reduce the number of young people remanded in custody'

Response	Frequency	Percentage of responses
Strongly agree	1	4%
Somewhat agree	8	31%
Neither agree nor disagree	4	15%
Somewhat disagree	9	35%
Strongly disagree	4	15%
Total	26	100.00%

Thinking about the use of EMDs as a tool to increase compliance with bail conditions, rate how you agree or disagree with the following statements

Table 136 | Responses to 'young people with an EMD are less likely to have their orders revoked'

Response	Frequency	Percentage of responses
Strongly agree	0	0%
Somewhat agree	8	30%
Neither agree nor disagree	7	26%
Somewhat disagree	6	22%
Strongly disagree	6	22%
Total	27	100.00%

Table 137 | Responses to 'young people with EMDs follow bail conditions better than those without'

Response	Frequency	Percentage of responses
Strongly agree	3	11%
Somewhat agree	12	44%
Neither agree nor disagree	5	19%
Somewhat disagree	6	22%
Strongly disagree	1	4%
Total	27	100.00%

Table 138 | Responses to 'Young people improve their attitudes while subject to an EMD'

Response	Frequency	Percentage of responses
Strongly agree	2	7.69%
Somewhat agree	5	19.23%
Neither agree nor disagree	5	19.23%
Somewhat disagree	10	38.46%
Strongly disagree	4	15.38%
Total	26	100.00%

Table 139 | Responses to 'young people with EMDs are less likely to offend during the order'

Response	Frequency	Percentage of responses
Strongly agree	2	8%
Somewhat agree	10	38%
Neither agree nor disagree	4	15%
Somewhat disagree	9	35%
Strongly disagree	1	4%
Total	26	100.00%

Table 140 | Responses to 'support people are key to supporting EMD compliance'

Response	Frequency	Percentage of responses
Strongly agree	9	35%
Somewhat agree	10	38%
Neither agree nor disagree	5	19%
Somewhat disagree	2	8%
Strongly disagree	0	0%
Total	26	100.00%

Table 141 | Responses to 'young people with EMDs are less likely to reoffend after finishing orders'

Response	Frequency	Percentage of responses
Strongly agree	0	0%
Somewhat agree	5	19%
Neither agree nor disagree	6	23%
Somewhat disagree	9	35%
Strongly disagree	6	23%
Total	26	100.00%

Table 142 | Responses to 'curfew conditions are fair and appropriate'

Response	Frequency	Percentage of responses
Strongly agree	3	12%
Somewhat agree	13	50%
Neither agree nor disagree	8	31%
Somewhat disagree	2	8%
Strongly disagree	0	0%
Total	26	100.00%

Table 143 | Responses to 'EMDs reduce the number of young people remanded in custody'

Response	Frequency	Percentage of responses
Strongly agree	1	3.85%
Somewhat agree	8	30.77%
Neither agree nor disagree	4	15.38%
Somewhat disagree	9	34.62%
Strongly disagree	4	15.38%
Total	26	100.00%

Thinking about the use of wrap-around support services like YCRTs and IBI rate how you agree or disagree with the following statements

Table 144 | Responses to 'Young people subject to EMDs, and their families receive the right amount of support'

Response	Frequency	Percentage of responses
Strongly agree	1	3.70%
Somewhat agree	11	40.74%
Neither agree nor disagree	9	33.33%
Somewhat disagree	5	18.52%
Strongly disagree	1	3.70%
Total	27	100.00%

Table 145 | Responses to 'Wrap-around support services help young people comply with EMD conditions'

Response	Frequency	Percentage of responses
Strongly agree	2	7.69%
Somewhat agree	12	46.15%
Neither agree nor disagree	7	26.92%
Somewhat disagree	4	15.38%
Strongly disagree	1	3.85%
Total	26	100.00%

Table 146 | Responses to 'EMDs wouldn't work as well without wrap-around services'

Response	Frequency	Percentage of responses
Strongly agree	8	30.77%
Somewhat agree	7	26.92%
Neither agree nor disagree	7	26.92%
Somewhat disagree	2	7.69%
Strongly disagree	2	7.69%
Total	26	100.00%

Table 147 | Responses to 'Agencies and stakeholders collaborate well to help young people with an EMD'

Response	Frequency	Percentage of responses
Strongly agree	3	11.54%
Somewhat agree	10	38.46%
Neither agree nor disagree	5	19.23%
Somewhat disagree	6	23.08%
Strongly disagree	2	7.69%
Total	26	100.00%

Table 148 | Responses to 'Support people are as important as service providers for helping young people comply'

Response	Frequency	Percentage of responses
Strongly agree	11	40.74%
Somewhat agree	9	33.33%
Neither agree nor disagree	3	11.11%
Somewhat disagree	3	11.11%
Strongly disagree	1	3.70%
Total	27	100.00%

Thinking about your role as a YJ staff-member, rate how you agree or disagree with the following statements

Table 149 | Responses to 'YJ staff provide effective day-to-day management for young people on EMDs'

Response	Frequency	Percentage of responses
Strongly agree	4	23.53%
Somewhat agree	6	35.29%
Neither agree nor disagree	5	29.41%
Somewhat disagree	2	11.76%
Strongly disagree	0	0.00%
Total	17	100.00%

Table 150 | Responses to 'YJ staff help young people understand EMD conditions and consequences'

Response	Frequency	Percentage of responses
Strongly agree	10	58.82%
Somewhat agree	7	41.18%
Neither agree nor disagree	0	0.00%
Somewhat disagree	0	0.00%
Strongly disagree	0	0.00%
Total	17	100.00%

Table 151 | Responses to 'YJ staff act fast and effectively when there's non-compliance of EMD conditions'

Response	Frequency	Percentage of responses
Strongly agree	2	11.76%
Somewhat agree	5	29.41%
Neither agree nor disagree	4	23.53%
Somewhat disagree	2	11.76%
Strongly disagree	4	23.53%
Total	17	100.00%

Table 152 | Responses to 'YJ staff collaborate well with wrap-around services (YCRT, IBI) to support young people subject to an EMD'

Response	Frequency	Percentage of responses
Strongly agree	8	44.44%
Somewhat agree	4	22.22%
Neither agree nor disagree	2	11.11%
Somewhat disagree	2	11.11%
Strongly disagree	2	11.11%
Total	18	100.00%

Table 153 | Responses to 'Information sharing between agencies improves EM trial efficiency'

Response	Frequency	Percentage of responses
Strongly agree	6	35.29%
Somewhat agree	8	47.06%
Neither agree nor disagree	2	11.76%
Somewhat disagree	0	0.00%
Strongly disagree	1	5.88%
Total	17	100.00%

Thinking about your role as a QPS staff-member, rate how you agree or disagree with the following statements

Table 154 | Responses to 'low-level alerts like low battery or minor breaches are handled without escalation'

Response	Frequency	Percentage of responses
Strongly agree	2	22%
Somewhat agree	1	11%
Neither agree nor disagree	5	56%
Somewhat disagree	1	11%
Strongly disagree	0	0%
Total	9	100.00%

Table 155 | Responses to 'QPS interactions support young people to comply with EM orders'

Response	Frequency	Percentage of responses
Strongly agree	0	0%
Somewhat agree	5	56%
Neither agree nor disagree	4	44%
Somewhat disagree	0	0%
Strongly disagree	0	0%
Total	9	100.00%

Table 156 | Responses to 'QPS officers effectively identify the difference between technical issues and intentional non-compliance'

Response	Frequency	Percentage of responses
Strongly agree	2	22%
Somewhat agree	3	33%
Neither agree nor disagree	3	33%
Somewhat disagree	1	11%
Strongly disagree	0	0%
Total	9	100.00%

Table 157 | Responses to 'alerts are responded to by QPS quickly and effectively'

Response	Frequency	Percentage of responses
Strongly agree	2	22%
Somewhat agree	2	22%
Neither agree nor disagree	3	33%
Somewhat disagree	2	22%
Strongly disagree	0	0%
Total	9	100.00%

Table 158 | Responses to 'QPS is notified of alerts in a timely manner'

Response	Frequency	Percentage of responses
Strongly agree	1	11%

Response	Frequency	Percentage of responses
Somewhat agree	3	33%
Neither agree nor disagree	4	44%
Somewhat disagree	1	11%
Strongly disagree	0	0%
Total	9	100.00%

Table 159 | Responses to 'alert data is accurate'

Response	Frequency	Percentage of responses
Strongly agree	0	0%
Somewhat agree	4	44%
Neither agree nor disagree	5	56%
Somewhat disagree	0	0%
Strongly disagree	0	0%
Total	9	100.00%

Other questions

Table 160 | Overall rating of the impact of EMDs on improving compliance with bail conditions and reducing offending during orders

Overall rating	Frequency	Percentage of responses
1	3	11%
2	11	41%
3	7	26%
4	5	19%
5	1	4%
Total	27	100.00%

Table 161 | Overall, how would you rate the importance of wrap-around services in helping young people to comply with EM order conditions?

Overall rating	Frequency	Percentage of responses
1	0	0.00%

Overall rating	Frequency	Percentage of responses
2	2	7.41%
3	6	22.22%
4	6	22.22%
5	13	48.15%
Total	27	100.00%

Table 162 | Responses to ‘in your experience, what are the biggest challenges young people face when complying with EMD conditions?’

Response	Frequency	Percentage of responses
Lack of a stable home environment or support person	24	19.67%
Emotional or behavioural challenges interfering with compliance	15	12.30%
Challenges with understanding or following bail conditions	14	11.48%
Struggles with managing multiple court orders or bail conditions	12	9.84%
Tampering with the device or ignoring alerts	11	9.02%
Limited access to transportation	9	7.38%
Difficulty remembering curfews and charging devices	9	7.38%
The duration of the order	9	7.38%
Lack of access to proper support services after hours	7	5.74%
Technical issues or malfunctions	7	5.74%
Lack of engagement with services like YCRTs or the IBI	5	4.10%
Total	122	100.00%

Open-ended questions

What changes (if any) need to be made to transition the EM trial to a permanent initiative?

During the trial, were there any unexpected impacts, both negative and positive?

What improvements or additional support do you think could help young people with an EMD comply with bail conditions?

Appendix I : QCS survey

This appendix details the survey analysis undertaken to answer each key evaluation question. Survey questions were grouped under five sub questions:

- Thinking about the use of EMDs as a bail condition for young people, rate how you agree or disagree with the following statements.
- Thinking about the use of EMDs as part of bail conditions for young people, rate how you agree or disagree with the following statements
- Thinking about your involvement as a QCS staff-member with the EM trial, rate how you agree or disagree with the following statements
- In your experience, what challenges do you face in monitoring alerts and supporting compliance with EMD conditions? (Select all that apply)

Thinking about the use of EMDs as part of bail conditions for young people, rate how you agree or disagree with the following statements

Table 163 | Responses to 'The current EMD monitoring systems work effectively.'

Response	Frequency	Percentage of responses
Strongly agree	1	7.69%
Somewhat agree	5	38.46%
Neither agree nor disagree	0	0%
Somewhat disagree	5	38.46%
Strongly disagree	2	15.38%
Total	13	100.00%

Table 164 | Responses to 'There are adequate resources and supports in place to enable QCS's effective and efficient operations as part of the EM trial.'

Response	Frequency	Percentage of responses
Strongly agree	0	0.00%
Somewhat agree	3	23.08%
Neither agree nor disagree	4	30.77%
Somewhat disagree	2	15.38%
Strongly disagree	4	30.77%
Total	13	100.00%

Table 165 | Responses to 'Communication between relevant agencies as part of the EM trial supports effective practice for EM.'

Response	Frequency	Percentage of responses
Strongly agree	0	0%
Somewhat agree	2	15.38%
Neither agree nor disagree	0	0%
Somewhat disagree	5	38.46%
Strongly disagree	6	46.15%
Total	13	100.00%

Table 166 | Responses to 'The Alert Protocol effectively prioritises high-risk alerts over low-level issues.'

Response	Frequency	Percentage of responses
Strongly agree	3	23.08%
Somewhat agree	6	46.15%
Neither agree nor disagree	1	7.69%
Somewhat disagree	2	15.38%
Strongly disagree	1	7.69%
Total	13	100.00%

Table 167 | Responses to 'Information sharing between agencies as part of the EM trial improves EMD compliance.'

Response	Frequency	Percentage of responses
Strongly agree	3	23.08%
Somewhat agree	3	23.08%
Neither agree nor disagree	2	15.38%
Somewhat disagree	3	23.08%
Strongly disagree	2	15.38%
Total	13	100.00%

Table 168 | Responses to 'Workloads associated with monitoring alerts as part of the EM trial are manageable for QCS staff.'

Response	Frequency	Percentage of responses
Strongly agree	2	15.38%
Somewhat agree	5	38.46%
Neither agree nor disagree	0	0%
Somewhat disagree	5	38.46%
Strongly disagree	1	7.69%
Total	13	100.00%

Table 169 | Responses to 'In your experience, what challenges do you face in monitoring alerts and supporting compliance with EMD conditions? (Select all that apply)'

Response	Frequency	Percentage of responses
High volumes of alerts, making it difficult to prioritise effectively	3	4.55%
Difficulty distinguishing between low-level and high-risk alerts	0	0.00%
Insufficient staffing to monitor and respond to alerts in a timely manner	6	9.09%
Inadequate training or resources to handle complex cases, technical or operational issues	6	9.09%
Challenges with inter-agency communication and coordination to address	13	19.70%
Issues with alert data from the system (e.g., delays or inaccuracy)	3	4.55%
Issues with device reliability (e.g., GPS drift, low battery accuracy)	6	9.09%
Limited clarity in alert protocols or escalation pathways	6	9.09%
Lack of access to after-hours support from relevant agencies	9	13.64%
Challenges engaging young people or their support networks to resolve alerts	10	15.15%
Differences in monitoring requirements or processes for young people compared to adults	3	4.55%

Response	Frequency	Percentage of responses
(e.g., additional complexities, differing alert volumes or responses)		
Other	1	1.52%
Total	66	100.00%

Appendix J : Stakeholders Engaged

Table 170 | Number of young people, family-members and support persons engaged by location

Location	Number of young persons / families / support persons engaged
Gold Coast	9
Logan	5
Townsville	3
South Brisbane	2
Toowoomba	1

Table 171 | Number of other stakeholders engaged by organisation

Department / Organisation	Number of stakeholders engaged
YJ (Managers)	18
YCRT (Managers)	6
IBI / BSS	12
Legal Aid	2
ATSILS	1
QCS	1
QPS	4
Magistrates	3

Table 172 | Number of other stakeholders engaged by organisation and location

Department / Organisation	Location	Number of stakeholders engaged
YJ (Managers) – 18 total	Caboolture	1
	Cairns	1
	Hervey Bay and Maryborough	1
	Ipswich	1

Department / Organisation	Location	Number of stakeholders engaged
	Logan	1
	Mackay	1
	Mount Isa	1
	North Brisbane	4
	Redlands	1
	South Brisbane	2
	Toowoomba and Roma	1
	Townsville	2
	Western Districts	1
	Gold Coast	2
YCRT (Managers) – 6 total	Logan	1
	Townsville, Mt Isa & Mackay	1
	Brisbane North, Brisbane South	1
	Mackay & Townsville	1
	Brisbane North, Brisbane South & Redlands	1
IBI / BSS – 12 total	Cairns and Yarrabah	1
	Gold Coast and Logan	1
	Inala & Ipswich	2
	Hervey Bay & Mackay	1
	Mt Isa	1
	South Burnett	1
	SEQ	2
	Toowoomba & Roma	1
	Townsville	1
Legal Aid – 2	Brisbane	2
ATSILS – 1	Brisbane	1

Department / Organisation	Location	Number of stakeholders engaged
QPS – 4	Brisbane	4



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A bigger idea
of success

750

PEOPLE

75

PRINCIPALS

9

OFFICES

91%

of clients rate their experience and our service as excellent or good. This makes Nous the best performer for overall client service – *Bouton Research, 2024*