1. **Context**

Prisoners are transported to various locations in order to attend court appearances, medical appointments, routine transfers to other prisons etc. Policy Directives 5 and 44 are relevant and should be applied as appropriate. The continued custody of the prisoner and safety of staff and the community, are paramount.

2. **Purpose**

To ensure that prisoner transfers are effected in a secure, safe, efficient and consistent manner.

*Section 4* deals with scheduled and unscheduled prisoner escorts that are to be carried out by the contractor appointed under the Department of Corrective Services' contract for the Provision of Court Security and Custodial Services. Under the contract, the contractor is responsible for the external movement and supervision of all prisoners except for those that are specifically excluded from the contract.

*Section 5* deals with prisoner escorts that are excluded from the Department of Corrective Services' contract and includes the removal of a prisoner for emergency medical treatment.

3. **General Provisions**

In this policy, the **contractor** means the organisation operating the contract for the Provision of Court Security and Custodial Services. Under the contract the contractor is responsible for the external movement and supervision of all prisoners except for those that are specifically excluded from the contract.

In this policy, a reference to the **designated superintendent** includes the Director Acacia Prison, as appropriate.

Note: Access to the On-call Doctor Roster.
The following provisions apply with regard to all escorts, irrespective of whether undertaken by prison staff or the contractor:

3.1. A Medical Appointment form (in TOMS) is the authority for the removal of the prisoner from prison and must be completed prior to any prisoner's exit from prison for medical purposes. The risk assessment component of the form shall include all available information on TOMS and, where appropriate, the Security Portal. The form is to be approved by the designated superintendent or delegate, or, after hours by the OIC of the prison.

3.2. All prisoners escorted outside a prison will be restrained unless specifically directed otherwise by the designated superintendent.

3.3. SHU/HSE prisoners are not to leave the prison for medical treatment unless external medical treatment is the only option. The Director Health Services and the Superintendent Operations are to be contacted prior to the prisoner being removed from the prison.

3.4. Where the Superintendent agrees to a minimum-security prisoner remaining unguarded once admitted to hospital, they should obtain a contract of behaviour with the prisoner using the Admittance of Prisoner to Hospital Contract (Appendix 3).

The Superintendent shall also provide hospital staff with a copy of the rules using the Information for Hospital Staff form (Appendix 4). Prisons should also retain a copy for their own records.

Prisons should forward copies of both the Admittance of Prisoner to Hospital Contract and the Information for Hospital Staff to the Superintendent Operations in conjunction with the Hospital Admittance Advice (Appendix 2).

3.5. A taxi may only be used to convey a prisoner and/or escorting staff back to prison from a medical emergency where a contracted escort vehicle, prison vehicle or ambulance is unavailable.

4. Scheduled and Unscheduled Prisoner Escorts

4.1 Designated Superintendents are to develop a Standing Order to cover the arrangements between their prison and the contractor to facilitate scheduled and unscheduled prisoner escorts. Superintendents remain responsible for the following matters, which should also be reflected in the Standing Order.

4.1.1 Any decision to remove a prisoner from the prison for the purpose of receiving medical assessment and/or treatment, which cannot by reason of impracticality or urgency, be administered within the prison. Prior to the removal of a prisoner to a hospital or other place of assessment and/or treatment the superintendent shall, where practicable, consult with the prison medical officer or a medical officer.

4.1.2 Providing the contractor with the prisoner's details and any other information necessary to enable the contractor to carry out their obligations under the Department of Corrective Services' contract.

4.1.3 Wherever practicable, the cell of a prisoner who is temporarily removed from the prison for medical treatment should be secured. Any access to the cell prior to the return of the prisoner should be recorded in the unit occurrence book.
4.1.4 Notifying the ACCO as soon as possible if the prisoner is subject to Governor's Pleasure Strict or Safe Custody, or Strict Security Life imprisonment.

4.1.5 When a prisoner is to be removed from a prison for the purpose of admission to a hospital or other place of treatment [other than placement of Wooroloo prisoners at Wooroloo District Hospital], the superintendent shall advise immediately (or as soon as practicable) the designated Superintendent of the particulars of the case.

4.2 Medical Assessment – Graylands Hospital

Where it is suspected that a prisoner may require admission to Graylands Hospital or where a psychiatric assessment is required, the following procedures are to be followed:

4.2.1 Regional Prisons and Prison Farms

The local medical officer/consultant psychiatrist is to consult with the Senior Consultant Forensic Psychiatrist of the Department of Corrective Services in the first instance. The Senior Consultant Forensic Psychiatrist will decide whether the prisoner should be:

- maintained at their current location, or
- transferred to Casuarina or Bandyup Prison for assessment, or
- transferred directly to Graylands Hospital.

4.2.2 Metropolitan Prisons

The Senior Consultant Forensic Psychiatrist or Consultant Forensic Psychiatrist from Graylands will assess the prisoner and where indicated request that the prisoner be transferred to Graylands Hospital.

4.3 Removal To Graylands Hospital

4.3.1 Prior to the removal of a prisoner to Graylands Hospital, the superintendent shall advise the Director Health Services and the Psychiatrist Superintendent of Graylands (or the Deputy) of the particulars of the case.

4.3.2 When transfer to Graylands is approved, the prison's health service provider shall make arrangements for the prisoner's reception into Graylands, whilst the prison will arrange with the contractor for the transfer of the prisoner. Immediately prior to transfer to Graylands Hospital, the Duty Doctor should be informed of the transfer.

4.3.3 The superintendent is responsible for ensuring that the following documentation is provided to the contractor to accompany the prisoner being transferred to Graylands Hospital:

- Copies of all warrants under which the prisoner is held in custody
- Copy of the assessing psychiatrist's or medical officer's report
- Copy of the relevant medical/psychiatric history
- Copy of the offender escort information report.
4.3.4 A brief written summary, marked for the attention of the admitting doctor, including:

- The prisoner's security rating and level of security required
- Any escape history
- Any self harm history
- Any history of violent offences and/or charges
- Any other management concerns (eg suicidal behaviour/threats, assaults or threats to staff or other prisoners etc)
- EED (if applicable) and EDR
- Any dates on which the prisoner is required in court, if known
- Information regarding transfer of the prisoner's gratuities.

4.4 Reporting Requirements

4.4.1 In the case of any other prisoner being admitted to hospital, the superintendent/OIC shall inform the designated Superintendent and the Superintendent Operations/Manager Acacia Contract immediately. The Hospital Admittance Advice form (Appendix 2) is to be completed and faxed to the Superintendent Operations or, in the case of Acacia, the Manager Acacia contract. Notification to the ACCO will be undertaken by the Superintendent Operations or Manager Acacia Contract.

4.4.2 Where a prisoner is conveyed to a hospital by other than the contractor the contractor will be required to assume responsibility for the custody of the prisoner and his/her return to the prison, unless the prisoner is exempt as per Section 5. The Superintendent is to immediately notify the contractor of the transfer. Notification should be made to the contractor's Transport Operations section.

4.5 Notification to Next of Kin of a prisoner's removal from prison for the treatment of serious illness/injury

4.5.1 On admission to a prison, a prisoner shall be requested to complete the form Notification to Next of Kin or another person in the event of life threatening illness or serious injury. If a prisoner is not in a condition to clearly indicate their wishes then the form should be completed as soon as is practicable.

4.5.2 The superintendent shall, subject to security consideration, arrange for the prisoner's next of kin* to be advised of the removal of the prisoner to a hospital or other place of assessment/treatment as a result of serious injury or illness. (*See also s. 4.5.11)

Serious illness or injury, for the purpose of this policy, includes any illness or injury that:

- requires surgery involving the application of general anaesthetic
- involves treatment for mental illness
- may result in permanent damage to health
- or is likely to, whether treated or not, result in some disablement or permanent reduction in the prisoner's health.
A superintendent shall consider the security implications inherent in providing such advice. Notwithstanding the compassionate grounds that exist, as well as courtesy issues such as visit cancellations, hospital escorts are known to provide opportunity for escape and the involvement of external assistance. Accordingly, a superintendent may decide that due to security considerations, notification is delayed or, in particular cases, notification is not made.

4.5.3 Where a decision has been made not to inform the next of kin because of security considerations, the following applies. If the prisoner's condition changes after admission, such that medical staff have determined that death is imminent or the prisoner is physically incapable of escape, the superintendent is to be advised forthwith and will review any earlier decision not to notify the next of kin.

4.5.4 Where a decision has been made not to inform the next of kin because the illness or injury is not serious and circumstances change after admission to the extent that the prisoner's condition is then said to be serious, the superintendent is to be immediately advised and shall, subject to security issues outlined above, notify the next of kin.

4.5.5 In the event that notification is to occur, the following principles will apply:

- In the case of serious illness or injury requiring hospitalisation of a prisoner, the responsibility for informing the next of kin or other nominated person rests with the designated superintendent or delegate. There may be cases where it is considered necessary to involve specialist support services, but any decision to seek their involvement should be based on the circumstances of the particular case and the significance (ie. consequential physical/emotional impact) of the illness or injury to either the prisoner or the person to be notified.
- Whilst the department is not responsible for the response of the person being notified, there may be cases where the department has prior or relevant information concerning the person to be notified (such as poor health, age, etc). This should be taken into account during the notification process.
- Generally, actual admission into hospital will attract a higher level of consideration of advice to the next of kin, than attendance at hospital on an outpatient basis. Similarly, admission to an institution for the treatment of mental illness will attract a higher level requirement to inform the next of kin, than a short visit for assessment of mental illness.

4.5.6 If notification is to occur, discretion rests with the superintendent as to whether the next of kin or other nominated person should be notified immediately or the following day if the occurrence occurs at night. The exercise of this discretion should take into account:

- the advice of medical staff, where they are available
- the wishes of the prisoner if they are capable of expressing them clearly
- any physical or intellectual disability (including drug withdrawal), which may prevent the prisoner from clearly expressing their wishes
- any other known factors.
4.5.7 Where a prisoner's health deteriorates after hospitalisation to the extent that medical staff are of the view that there is a serious and imminent threat to life, Escort staff will immediately inform the superintendent of the relevant prison.

4.5.8 Under the contract between the Department of Corrective Services and the contractor responsible for the custody of a prisoner while that person is in hospital, the contractor is obligated "...to facilitate immediate notification of the prisoner's next of kin of any imminent and life threatening deterioration of the health of a prisoner whilst hospitalised." AIMS escort staff are to facilitate such notification by immediately contacting the superintendent of the relevant prison and inform them of the altered circumstances, as confirmed with medical staff of the hospital.

In addition, Escort staff will inform the superintendent forthwith, of any deterioration of the prisoner's health. (for example, medical staff advise of complications or the prisoner is unexpectedly transferred to an Intensive Care Unit).

It is then the designated superintendent's (or delegate's) responsibility to consider the question of notification of next of kin.

4.5.9 If the Hospital Admission Advice form (Appendix 2) indicates that the next of kin have not been advised and the prisoner subsequently requests that they be advised, escorting staff are to advise the superintendent of the request.

4.5.10 The reasons for notifying or not notifying the next of kin or another person nominated by the prisoner must be documented by the person making the decision.

4.5.11 Should a prisoner who has been diagnosed with a terminal illness request that a person (or persons) other than a person listed on the current “Notification of Next of Kin or Another Person in the Event of a Life Threatening or Serious Injury” form, be notified of the prisoner’s hospitalisation/diagnosis, the escorting officer is to immediately inform the superintendent, who will give consideration to the request in line with the provisions above.

4.6 Return of A Prisoner To Prison

4.6.1 The superintendent of the prison from which a prisoner is removed under s 83(1)(c) of the Act shall order, through liaison with the contractor, that the prisoner is to be returned to the prison as soon as the prisoner is, in the opinion of the officer in charge of the hospital or place of assessment/treatment, fit to be discharged.

4.6.2 In the case of a prisoner removed to a hospital or other place of assessment/treatment under the authority of an order made under s83(1)(c) of the Act from Hakea Prison, Wooroloo or Karnet Prison Farm or Boronia Pre-release Centre for Women, the protocols established in Section 4.4 of Health Services Policy 1.6 - Admissions Infirmary, is to be applied. A copy of the Admissions Infirmary Policy is at Appendix 1.
5. **Contract Exclusions**

The contractor is responsible for the external movement and supervision of all prisoners except for the following exclusions:

5.1 **Contract exclusions:**

5.1.1 Any prisoner classified as a High Security Escort prisoner and who is required to be moved by a high security escort.

5.1.2 Any prisoner participating in an activity program outside a prison under s 95 of the Act.

5.1.3 Any prisoner subject to deportation/removal, interstate or international transfer or extradition and any prisoner required to be moved interstate pursuant to the *Service and Execution of Process Act 1992* (Cth).

5.1.4 Any prisoner who requires immediate medical treatment which, if delayed, may be detrimental to the prisoner's well being.

5.1.5 Any prisoner in the custody of a prison who is returned to or handed over to the Western Australian Police Service for operational purposes.

5.1.6 Minimum security prisoners at Karnet, Wooroloo and Boronia are escorted to and from routine and emergency medical appointments and funerals, by prison staff. Where such a prisoner is admitted to hospital and placed under guard, the contractor is required to assume responsibility for the hospital guard and return escort.

5.3 **This Part (Part 4) of the Policy relates only to Escorts that may be required for these purposes**

With the exception of high security escorts, superintendents are required to develop a Standing Order incorporating the following procedures to ensure that the security risk in moving prisoners (for the above purposes) and possible risks to escorting staff are minimised. Responsibility for the custody and management of a prisoner under these types of escort rests with the designated Superintendent of the prison from which the prisoner is being sent. The requirements for high security escorts will be determined on an individual basis by the Emergency Support Group.

5.4 **Security**

5.4.1 The superintendent shall ensure that any prisoner under escort is in the charge of sufficient prison officers to maintain custody of the prisoner.

5.4.2 Unless otherwise authorised by the superintendent for any particular prisoner, the minimum number of prison officers appointed to take charge of a prisoner during movements shall be that which corresponds to the security rating of the prisoner in the following table:

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<thead>
<tr>
<th>Prisoner security rating</th>
<th>Minimum number of prison officers</th>
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<tbody>
<tr>
<td>Maximum</td>
<td>2</td>
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<td>Medium</td>
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</tr>
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<td>Minimum</td>
<td>1</td>
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5.4.3 In cases of multiple prisoners, security escorts eg medium and above (other than court escorts or transfers between prisons) of 5 prisoners or less, the minimum number of escorting officers to security prisoners shall be determined as follows:

- 2 prisoners – 3 officers
- more than 2 prisoners – the superintendent should consult the Emergency Support Group for appropriate security measures that suit the security risk of the prisoners and the circumstances of the escort.

5.4.4 In cases of multiple minimum-security prisoners, the number of escorting officers will be at the designated superintendent's discretion.

5.4.5 Before the commencement of any escort the superintendent or delegate shall advise, where appropriate, the place of destination and the estimated time of arrival of the escort as well as the number and class of prisoners and any other relevant factors.

5.4.6 Where a maximum or medium security prisoner is escorted to hospital by Ambulance after hours, the prisoner is to be searched prior to leaving the prison (pat, strip, metal).

5.4.7 Where a maximum or medium security prisoner is escorted to hospital by Ambulance after hours, two officers will accompany the prisoner in the ambulance. Where, on determination of risk, or limitations of ambulance capacity, it is deemed appropriate, one of the officers MAY follow the ambulance in an escort vehicle. Officers shall be equipped with authorised batons and Chemical agent (foam).

5.5 **Use of Mechanical Restraints (see also Policy Directive 5 and 44)**

5.5.1 Use of mechanical restraints during an escort shall be determined as follows:

- The superintendent may authorise the transfer of a prisoner in handcuffs or other mechanical restraints as defined in Policy Directive 5 or 44.
- The superintendent shall provide any instruction on the application of restraints in writing.
- If the superintendent has directed that restraints are not to be used, the escorting officer may, subject to Policy Directive 5 and 44, apply restraints if in his/her opinion a situation arises where no other suitable means are available to:
  - prevent the risk of escape of the prisoner or
  - prevent assault on any person or
  - to prevent the prisoner inflicting self injury.

5.5.2 At no time when an escort vehicle is in motion may a prisoner be handcuffed to any part of the vehicle.

5.5.3 Where a maximum or medium security prisoner is escorted to hospital by ambulance after hours, the prisoner is to be restrained in the ambulance (diagonally), with handcuffs and leg irons on opposing limbs if practicable. (Refer Policy Directive 44 for restraint of pregnant prisoners).

5.6 **Break down of an Escort Vehicle or other emergency.**

If an escort vehicle breaks down or if an emergency occurs then the following shall take place:
• The prison officer in charge of the escort shall take all reasonable means to prevent the escape of the prisoner(s) and shall inform the nearest police station and prison of his location and the nature of the emergency.
• The superintendent of any prison contacted shall render whatever assistance by way of staff and other assistance he/she deems necessary and practicable in the circumstances.

5.7 Interstate Escorts
Prior to arranging an authorised interstate/international escort, advice is to be sought from the Director Security Services.

5.8 Air Escorts
• It is a requirement under Australian Air Navigation Regulations (Reg.297P) that the authority arranging the carriage of a person in custody by air shall provide the operator of the aircraft with details of the prisoner escort.
• Where the carriage of a person in custody is to be undertaken by aircraft, the following procedures must be adhered to:
  o the aircraft operator must be advised at the time of booking that the proposed passenger is a person in custody and the grounds on which the person is in lawful custody
  o on arrival at the airport, and not less than 20 minutes prior to departure of the flight, the escorting officer must identify himself/herself and the prisoner to the airline passenger-handling officer
  o a maximum of 2 prisoners accompanied by escorting officers may be carried in an aircraft at any one time
  o escorting officers must be seated alongside their prisoners during flight
  o officers undertaking air escort duty should be carefully selected having regard for the risk factors involved, their previous escort experience, and their capability to subdue the prisoner particularly in the event of crew or other passengers being placed at risk
  o neither the escorting officer nor the prisoner will be served intoxicating liquor during the flight, nor should the escorting officer have consumed any intoxicating liquor during the 24 hours prior to boarding the aircraft
  o an aircraft operator or the pilot-in-charge is under no obligation to carry persons in custody and may impose such additional restrictions as they see fit
  o the carriage of firearms/weapons and dangerous goods such as debilitating substances (pepper sprays, chemical agents) are not permitted in the cabin of an aircraft
  o restraints should not, under normal circumstances, include the prisoner being shackled to any part of an aircraft.
• The above procedures also apply to passengers being escorted only as far as the airport. Under the provisions of Air Navigation Regulations 1947 (Cth), certain persons may be carried on an aircraft without escort, provided the aircraft operator is granted an ‘instrument’ from the Department of Transport.
• A notification form, which must be provided at the time of booking, should be in the following format and signed by the designated superintendent.
It is requested that travel without escort be provided for:

<table>
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<th>Name of passenger:</th>
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<td>__________________</td>
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<table>
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<th>on (name of operator):</th>
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<th>The purpose of travel is:</th>
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<tr>
<th>In my judgement (name of passenger):</th>
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Is fit to travel unescorted and will in no way constitute a hazard to the safety of the aircraft

5.9 "At Risk" Prisoners

The prison's health service provider and/or unit/staff managers (where appropriate) will advise superintendents of any concerns they have for the health of prisoners being transferred from a prison. Superintendents must ensure that appropriate procedures are in place for these concerns to be communicated to escorting officers and for the subsequent notification to staff at the place of destination and any staff contracted or authorised to supervise the prisoner.

At Risk Prisoners who are being transferred to another prison and are being monitored by the Prisoner Risk Assessment Group (PRAG), must be accompanied on the transfer by the yellow ARMS file.

5.10 Procedures for escorting officers on emergency medical escorts

Refer also to Policy Directive 44.

5.10.1 Protocol For Guarding Prisoner Patients

The designated Superintendent of each prison is to seek an agreed protocol with hospitals that provide emergency medical treatment for prisoners. The agreed protocol is to be incorporated into the Standing Orders of the prison.

Except as provided in the Introduction to this section, the contractor is responsible for escorts and supervisory duties associated with all scheduled and unscheduled medical appointments.

The following procedures apply in the event that a prisoner requires immediate treatment which, if delayed, may be detrimental to the prisoner's well being. The contractor is to be notified and (except where excluded) arrangements made for the contractor's staff to take over supervisory duties of the prisoner.

5.10.2 General Security Issues

Subject to the following points, the prisoner should be kept under surveillance at all times until the supervisory duty is handed over to the Department of Corrective Services' contractor:

- while exercising the primary responsibility with regard to security and the continued charge and supervision of the patient, the escorting officer shall have due regard in the circumstances to decency, self-respect and privacy of the prisoner during the course of any medical consultation, examination and treatment.
• an escorting officer, being first satisfied that the continued charge and supervision of the prisoner and the security of the hospital or the place of treatment will not be jeopardised, may permit a prisoner patient under escort to be consulted, examined and/or treated outside of an officer's view. The escorting officer is to remain outside the door or in close proximity to the place of treatment at all times.

• escorting officers are to leave the room if requested by a medical officer during the prisoner patient's consultation, examination or treatment providing the security of the escort is not breached.

• prisoner patients are allowed use of the toilet in privacy, provided the escorting officer is satisfied that the continued charge and supervision of the prisoner/patient and the security of the hospital will not be jeopardised.

5.10.3 Number of Escorting Officers

The designated Superintendent may, at his/her discretion, class a prisoner as "high profile" for the purpose of an escort and increase the number of escorting officers accordingly.

Superintendents should consider each case on their individual circumstances taking into consideration the following factors - security rating, any pending court appearances, length of sentence, general behaviour, medical/psychological condition, reason(s) for immediate medical treatment and the nature of the offences or charges against the prisoner.

5.10.4 Gender of Escorting Officers

Whenever possible, at least 1 of the escorting prison officers is to be of the same gender as the prisoner who is being admitted as an outpatient or in-patient for any obstetric and/or gynaecological consultation, examination and/or treatment at a clinic or hospital. This will ensure that due regard is afforded to decency, self-respect and privacy during the course of any medical examination, treatment or ablutions.

5.10.5 Use of Instruments of Restraint on Prisoner Patients

The use of instruments of restraint is to be in accordance with Policy Directive 5 or 44, as the case may be. Escorting officers are to apply handcuffs/leg irons as a means of restraint for maximum and medium security prisoner patients. Handcuffs/leg irons may be used in other cases where the prisoner patient's behaviour, further charges or intelligence known about them justifies the use of handcuffs/leg irons, or where no other suitable means are available to prevent the risk of escape or injury to any person or self-injury to the prisoner patient.

Advice on the use of instruments of restraint to be sought from the superintendent if:

• a prisoner patient has a significant injury whereby handcuffs/leg irons cannot be secured.

• a medical officer specifically advises against their use on medical reasons (eg MRI scan) or

• the prisoner patient's general medical condition renders handcuffing/leg irons inappropriate, (eg incapacity to walk, seriously ill etc).
If, in the opinion of the escorting officer, a prisoner patient is seriously ill to the extent that it is apparent that security will not be breached, the officer may remove the restraints. If this occurs, the superintendent is to be advised immediately.

Instruments of restraint may be removed at the request of a medical officer while the patient is undergoing consultation, examination or treatment subject to the directions of the prison superintendent and any delegations to the senior escorting officer who may do so after assessing that their removal will not jeopardise the security of the escort.

6 Related Key legislation / Policies

- Prisons Act 1981
- Policy Directive 5 – Use of Force
- Policy Directive 44 – Escorting and Supervision of Pregnant or Postnatal Prisoners

Review

This policy is to be reviewed within two years of approval.

Approval:

Deputy Commissioner Adult Custodial

Date: 16 March 2011

This Policy takes effect upon publication.

Contact Person:

The following persons may be approached on a routine basis in relation to this policy:
Superintendent Operations

Version History

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