Centre for Forensic Behavioural Science

Forensicare

SWINBURNE UNIVERSITY OF TECHNOLOGY

Forensic Mental Health Professional Development Program

2026 CONFERENCE DAY

10 July 2026 · Swinburne University Hawthorn Campus

Registration
AMDC Level 3 Skylounge

9.00am

Opening remarks
AMDC 301 Lecture theatre

Dr Margaret Nixon
Professional Development and Training Lead, CFBS

9.15am

Keynote Speaker
AMDC 301 Lecture theatre

Professor Michael Daffern
Clinical and Forensic Psychology; Director, CFBS

With so much uncertainty about what works for whom, why don't we encourage choice?

10.30am

Morning tea
AMDC Level 3 Skylounge

11.00am

Session one
AMDC 301 Lecture theatre

Larissa Dern and Associate Professor Tess Maguire
"What i want you to know" - Lived experience conversation

12.00pm

Session two
AMDC 301 Lecture theatre

Dr Margaret Nixon
Upskilling the FMH workforce

12.30pm

Lunch
AMDC Level 3 Skylounge

1.15pm

Keynote Speaker
AMDC 301 Lecture theatre

Professor Tony Ward
Professor of clinical and forensic psychology, University of Wellington

What is the Good Lives Model? Conception and Misconceptions

2.30pm *Session 3 - Concurrent*

AMDC 301 Lecture theatre

Dr David Thomas

Consultant Psychiatrist, Victorian Institute of Forensic Mental Health

Misreading Minds: Theory of Mind and Empathic Deficits, Autism and the pathway to serious offending/extremism

AMDC 501 Breakout room

Dr Lisa Forrester and Dr Paula Verity

Victorian Children's Court Clinic

Working in the Children's Court Clinic of Victoria

3.30pm Afternoon tea

AMDC Level 3 Skylounge

4.00pm Panel Discussion

AMDC 301 Lecture theatre

Innovations and aspirations: Moving in community justice settings

Moderator: Dr Shelley Turner (Forensicare)
Panelists: Tony Johannsen (Family Life), Prof. Stephane Shepherd (16 Yards), Adam Deacon (YFSS), A/Prof. Ashley Batastini (CFBS)

5.00pm Closing remarks

Keynote speakers

Michael Daffern - Professor of Clinical Forensic Psychology and Director, Center for Forensic Behavioural Science

With so much uncertainty about what works for whom, why don't we encourage choice?

Significant advances have been made over the last few decades in how to work effectively with people who have offended. Rehabilitation models have emerged, risk and needs assessment tools have been developed and psychological 'offence focussed' treatments have been developed. Although the responsivity principle is widely known, rarely are people who are deemed to require rehabilitation given the choice to pursue their own goals and methods for change. This presentation will explore this idea and consider where choices could be offered and the potential benefits and risks of providing choice.

Michael is Professor of Clinical Forensic Psychology and Director of the Centre for Forensic Behavioural Science, Swinburne University of Technology. He is also Consultant Principal Psychologist with the Victorian Institute of Forensic Mental Health (Forensicare). He began his career as a psychologist in the New South Wales Department of Corrective Services in 1992 and he has worked in general and forensic mental health services since this time. He divides his time between research, teaching and clinical practice. His research interests focus on the assessment and treatment of people who have offended.

Tony Ward - Professor of clinical and forensic psychology, University of Wellington

What is the Good Lives Model? Conception and misconceptions

In this keynote Professor Ward will provide a description and analysis of the Good Lives Model of Correctional Rehabilitation and briefly outline its history and development. Prof Ward will then examine its core normative and epistemic commitments and the practice implications that are derived from these. In his talk he will distinguish between etiological models, treatment theories, and practice frameworks, arguing that the GLM is a practice framework. Having established this, Prof Ward will go on to discuss common misconceptions of the GLM, that are directly related to its mischaracterisation as a correctional/forensic treatment model rather than a practice framework. Prof Ward will end by overviewing current research projects that aim to enrich the conceptual and practice components of the GLM, especially the conceptualisation of dynamic risk factors as theoretical hubs rather than causal factors and treatment targets.

Tony has published over 490 chapters, articles, books, and other scholarly works in the areas of male sexual offending and general rehabilitation and practice. He is particularly interested in the critique and generation of theory within forensic psychology as well as the examination of ethical constructs in psychological practice. Tony has made a number of key theoretical contributions to the area of sexual offending and offending behaviour more generally, which include: the Self-Regulation Model of Sexual Offending (Ward & Hudson, 2000), the adaptation of the concept of Implicit Theories to sexual offending (Ward & Keenan, 1999), the Good Lives Model of Rehabilitation (Ward & Stewart, 2003) and the Integrated Theory of Sexual Offending (Ward & Beech, 2006). Tony is also lead editor of several books including Theories of Sex Offending (Wiley- Blackwell, 2016) along with Tony Beech,), and is lead author of Rehabilitation: Beyond the Risk Paradigm (Routledge, 2007), and The Good Lives Model of Correctional Rehabilitation (Springer, 2025). Tony serves on the editorial boards of several journals including Aggression and Violent Behavior, Legal and Criminological Psychology, and Psychology Crime and Law . Tony has served as Associate Editor for Sexual Abuse: A Journal of Research and Treatment and Legal and Criminological Psychology. He is a Consultant Clinical Psychologist, a Fellow of the Royal Society of New Zealand, and won the 2021 Mason Durie Medal for excellence in research in social science.

Presentations

Larissa Dern and Associate Professor Tess Maguire

"What I want you to know" – Lived Experience Conversation

Lived experience workers have an essential role in our workforce. In this role they may provide support directly to consumers, families, carers and supporters, or through leadership, consultation, system advocacy, training or research. They also create change and work to shift the culture of care to be more person-centred and recovery oriented. In this session Larissa and Tess will talk about the lived experience workforce, and how we can all work together to enhance care across inpatient and custodial settings.

Larissa has worked in Lived Experience for approximately 15 years starting her career as a Peer Worker in the Personal Helpers and Mentors Program. She worked her way through to the State Leader of Breakthru People Solutions in 2020, Managing NDIS, State and Federally funded Mental Health support and homelessness programs. Furthered her career by becoming the first Chief of Lived Experience at Forensicare in 2022. Larissa's role at Forensicare is to embed Lived experience as a discipline, address stigma and to advocate for systemic change. Larissa is passionate about people getting the right supports at the right time and in a way that supports people being the directors of their lives. "I want to see a system where people are supported to thrive, not just survive, this includes carers"

Tess Maguire has a joint appointment with the Centre for Forensic Behavioural Science Swinburne University of Technology, and the Victorian Institute of Forensic Mental Health (Forensicare). Her research focuses on forensic and mental health nursing practice. As part of her PhD she developed the Aggression Prevention Protocol, a nursing intervention to be used following use of the DASA risk assessment instrument, together known as the eDASA+APP. Since development the eDASA+APP has been implemented across Australia and in Canada, Finland, and US. Implementation has resulted in significant reduction in aggression and use of restrictive practices. Dr Maguire was the recipient of the International Association of Forensic Mental Health Services (IAFMHS), Christopher Webster Early Career Award in 2020. The eDASA + APP has received a National Award from the Australian Council on Healthcare Standard (ACHS) for clinical excellence and patient safety. She also received the Chris Abderhalden Award for Young Researchers in the Field of Aggression in Healthcare, at the 12th European Congress on Violence in Clinical Psychiatry. She has also developed various nursing frameworks and models that have been adopted by services and embedded into nursing practice locally, nationally and internationally.

Dr Margaret Nixon

Upskilling the forensic mental health workforce

Managing the needs of people with mental disorders in contact with the justice system requires highly skilled, motivated, and compassionate professionals across a range of disciplines. Their work is governed not only by their own professional standards of practice but is also required to meet community expectations and legislative requirements, often with minimal resources. The work these professionals undertake is often challenging, emotionally taxing, and sometimes involves a risk to their own personal safety. Not surprisingly, significant turnover in staffing is common, leading to a continual and often reactive need for upskilling, education, and professional development. More sustainable models of professional education for the forensic mental health workforce would not only provide better care for the people we work with, but reduce costs, staff attrition, and improve safety. This brief call to arms makes suggestion to organisation about considering staff education as an integral part of their model of care.

Margaret is a Senior Lecturer in Forensic Behavioural Science, the Professional Development and Training Lead at the CFBS, and has been the Course Director of the Swinburne's FBS Professional Master's program for the last eight years. She has developed and delivered education to organisations in the forensic sector in both Australia and overseas and frequently consults with health and forensic agencies regarding their professional development needs.

Presentations

Dr David Thomas

Misreading minds: Theory of mind and empathetic deficits, autism and the pathway to serious offending/extremism

Autism spectrum disorder (ASD) is a lifelong, pervasive neurodevelopmental condition characterised by qualitative abnormalities in reciprocal social interactions, communication patterns, restricted interests, and rigidity of cognition and behaviour thought and behaviour. The profile of autism within forensic mental health and criminal justice systems has increased significantly over the past 40 years, this being driven in large part by high-profile acts of physical and sexual violence, including grievance-based violence, extremism and terrorism committed by individuals diagnosed with autism or believed to be autistic.

Autistic individuals often present with qualitative differences in mentalisation competencies compared to non-autistic individuals – so called deficits in empathy and theory of mind. There however remains significant ambiguity across both concepts – how they are defined, conceptually understood and assessed/measured. Empathy, a multidimensional construct, has attracted a great deal of research over many decades, but no single agreed-upon definition of empathy exists. The boundaries between empathy, theory of mind are hazy. Their interactions with clinical constructs such as psychopathy remain poorly understood. There is growing evidence that the presence of atypicality in empathy and ToM systems influences how individuals offend while the risk of serious violent offending appears to be mostly driven by factors such as childhood adversity, trauma, social exclusion and situational factors rather than a simple "ToM/empathic deficit -> violence" pathway. Autism is therefore best considered a vulnerability profile that results in serious offending when combined with significant problems with circumscribed interests, cognitive or behavioural rigidity, emotion regulation and exposure to grievance fuelled or extremist milieus.

This presentation synthesises key empirical and conceptual work on empathy and ToM in autism and other forensically relevant disorders. It will examine how cognitive and affective components of empathy and ToM differ in ASD compared with psychopathy and conduct disorder, how these differences influence misinterpretation, grievance, rumination and susceptibility to antisocial or extremist narratives. Through detailed case vignettes, we will illustrate three broad trajectory patterns: reactive, grievance driven violence under misinterpretation and poor regulation; circumscribed interest and template driven pathways into planned high end violence; and co offending driven by social naivety and influenceability. The overarching aims are to improve the participants' ability to: (1) distinguish autistic empathic and ToM profiles from psychopathic profiles, (2) integrate social–cognitive findings into nuanced risk formulations; (3) design management plans that target modifiable factors such as comorbid psychopathology, trauma, social isolation, online immersion and misbeliefs about consent, justice or harm and (4) adopt a more precise, less stigmatizing use of "empathy" and "theory of mind" concepts in forensic reports and court testimony.

David is a psychiatrist with the Victorian Institute for Forensic Mental Health (Forensicare) and Hon Research Fellow with the Centre for Forensic Behavioural Science, Swinburne University of Technology. He has worked as a Consultant in Neurodevelopmental Psychiatry in the UK since 2001. Between 2001 and 2007 he was the autism lead across the 4 boroughs of North East London, set up autism-specific services across North and North East London and developed and delivered autism-focused training to the Metropolitan Police. After undertaking additional training in Forensic Psychiatry, he moved to the East London NHS Foundation trust where he helped set up a new secure service for people with intellectual disabilities. In 2011 he was appointed Clinical Director of Cedar House Hospital, a forensic hospital in Kent for individuals with neurodevelopmental disorders and in 2014 was appointed Medical Director of the Adult Mental Health and Intellectual Disability division of Four Seasons Healthcare, with responsibility for 6 secure hospitals, 2 step-down rehabilitation units and 4 community-based recovery hospitals. He moved to Melbourne in 2017 and currently works with Forensicare's Problem Behaviour Program. He has also provided consultant input to the Glaser Clinic (Community Forensic Disability Service) since January 2018.

Presentations

Dr Lisa Forrester

Working in the Children's Court Clinic of Victoria

The Children's Court Clinic functions are outlined in the Children, Youth and Families (CYF) Act 2005 under Section 546, however, the key role of the Clinic is to undertake clinical assessments of children, young people and families, and to submit reports to the court to assist in judicial decision making. Referrals received by the Clinic tend to fall into the following categories: referral for a psychological family assessment; referral for a psychological assessment/risk assessment of a young person involved in offending behaviour; referral for a neuropsychological assessment of an individual (child or an adult); and, referral for a psychiatric assessment of an individual (child or an adult). However, within these categories, there are a broad and diverse range of issues that might be listed for assessment and consideration.
This presentation aims to provide an overview of the work undertaken by the Clinical team of the Children's Court Clinic, focusing on how to work within an evidence-based framework, whilst acknowledging the limitations of a cross-sectional, one-off assessment model. We hope that this can be an interactive session, with opportunities for discussion and questions.

The **Children's Court Clinic** of Victoria, established in the 1940s, predominantly services the Family Division and Criminal Divisions of the Children's Court, although referrals can be received from other jurisdictions. It consists of a clinical team comprising clinical/forensic/developmental and educational psychologists, as well as a neuropsychologist, with sessional staff, inclusive of psychologists and psychiatrists, being utilised when the demand for reports is high.

Dr. Lisa Forrester is a Senior Clinical and Forensic Psychologist with over 20 years' experience in assessment and treatment across forensic and clinical settings for youth and adults. Her roles have included positions at Forensicare, the Royal Children's Hospital, and public mental health services, spanning inpatient, community, and correctional contexts. She holds a Doctor of Psychology (Clinical) from La Trobe University and is a board-approved supervisor with clinical and forensic endorsement. Dr. Forrester has served as Clinic Director at the Children's Court Clinic since 2021, following her role as Senior Clinical and Forensic Psychologist.

Panel discussion

Innovations and aspirations: Moving in community justice settings

Moderator

Dr Shelley Turner

Shelley is the Executive Director, Hospital Operations at Forensicare (The Victorian Institute for Forensic Mental Health) and holds honorary academic appointments as a Senior Lecturer at Monash University and a Senior Research Fellow at Swinburne University's Centre for Forensic Behavioural Sciences. With extensive experience across youth and adult justice systems, Shelley's work focuses on lived experience and ethical models for forensic practice. She is the co-author of Co-production and Criminal Justice and has recently published a chapter in Co-production in Youth Justice.

Panel members

Tony Johannsen

Tony is a clinical leader within the Australian community sector, known for driving innovation, trauma capable practice, and clinical excellence. Starting in the AOD sector as a forensic clinician, supervisor, and program manager, he developed a deep interest in complex presentations, program design, and system reform. After upskilling as a Men's Behaviour Change Facilitator, Tony expanded his Forensic practice to include working with men who use family violence. There he identified major gaps in mainstream approaches and began creating bespoke interventions grounded in personal responsibility, behavioural accountability, child safety, and relational repair. A passionate existential psychotherapist and clinical supervisor, Tony applies his clinical, leadership, and systems expertise to drive evidence informed innovation and practice excellence in his role as Director of Clinical Practice, Evidence & Quality at Family Life.

Professor Stephane Sheppherd

Stephane is Co-CEO of 16 Yards, a lived-experience centred organisation that provides a range of strengths-based lived experience mentoring services across the justice, family services and education sectors. He is also a Professor of Forensic Psychology and leads the 'Justice, Young People and Community' (JYC) lab at Deakin University which focuses on the trajectories, experiences and needs of Australian multi-cultural young people in justice-settings.

Dr Adam Deacon

Adam is a Consultant Child & Adolescent Forensic Psychiatrist with over twenty year experience working in forensic mental health settings, including Forensicare community forensic mental health, high security prisons, youth justice detention at Parkville, Malmsbury and Tasmania, and he has been the clinical lead of the Bayside Health Youth Forensic Specialist Service since its inception in 2019. He has advocated for investment in community forensic youth mental health service development, and he is currently involved in the shaping of the expanded Statewide Community Forensic Youth Mental Health Service. He also works in private practice providing expert reports for the prosecution and defence, manages elite athletes as a Sport Psychiatrist, and is soon to attend the Glasgow Commonwealth Games as the Australian Team psychiatrist.

Associate Professor Ashley Batastini

Ashley earned her Ph.D. in Counseling Psychology at Texas Tech University in the United States in 2015. Her work focuses on developing novel intervention strategies for higher-risk populations, improving access to appropriate interventions at various stages of criminal legal involvement, and addressing systemic factors within the correctional setting that can diminish the efficacy of interventions. Her research often considers ways to integrate technology into forensic and correctional mental health services. Assoc. Prof. Batastini is also a registered psychologist in Australia.