

11 March 2025

Judge John Cain State Coroner, Coroners Court of Victoria, 65 Kavanagh Street Southbank VIC 3006

Via email: cpuresponses@coronerscourt.vic.gov.au

Dear Judge John Cain,

## Investigation into the death of Samantha Fraser (COR 2018 003600)

The Australian Health Practitioner Regulation Agency (Ahpra) and the 15 National Boards including the Psychology Board of Australia recognise that domestic, family and sexual violence (DFSV) is a significant and widespread problem with serious and lasting impacts upon individuals, families and communities. We appreciate the opportunity to respond to recommendation (iii):

to introduce family violence mandatory CPD for registered psychologists and psychiatrists to provide for an occupation-specific level of family violence understanding and referrals for further support where a patient/client is identified as experiencing or suspected to be experiencing family violence.

National Boards and Ahpra regulate over 930,000 health practitioners in sixteen professions through the National Registration and Accreditation Scheme (the National Scheme). Our primary role is to protect the public by ensuring Australians have access to a qualified, competent and safe health workforce. We are committed to responding to domestic, family and sexual violence (DFSV) in our capacity as regulators, having published a joint <u>statement</u> that reinforces the importance of the health workforce in identifying and responding to DFSV and also the consequences for health practitioners who are perpetrators.

## Work currently underway at Ahpra to build the skills of the health workforce to recognise and respond to DFSV

Strengthening the professional capabilities and codes of conduct for all National Scheme professions
to make explicit the expectation that health practitioners must have the knowledge, skills and
attributes required to appropriately support patients who may be experiencing DFSV.

The following steps are being taken to build the skills of the health workforce in recognising and responding to DFSV:

- o Piloting the development of a common professional capability on DFSV
- Publishing explanatory guidance, based on National Boards' existing codes of conduct, that makes clear how National Boards' expectations of good practice apply in the context of DFSV
- Embedding expectations about health practitioner knowledge and skills within reviews of National Boards' professional capabilities and codes of conduct
- Strengthening National Board CPD guidelines to highlight that DFSV is a priority for Continuing Professional Development (CPD) across National Scheme health professions. Several National Boards, including the Psychology Board, are currently reviewing their CPD registration standards which presents an opportunity to further update CPD guidelines later in 2025/26.
- Working with Ahpra Board's Independent Accreditation Committee to develop guidance for National Scheme entities on good practice professional capabilities that would build the knowledge and skills of practitioners in relation to DFSV.

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 Developing a resource hub for practitioners on the Ahpra website which would include links to training and other resources.

These actions will build upon work already undertaken by Ahpra such as the Notifier Support Service (NSS) which was launched in 2021. Using a trauma informed approach, the NSS provides additional support to notifiers involved in a sexual boundary or sexual misconduct matter with the aim of reducing distress and mitigating re-traumatisation through the investigation process.

Together, these actions will send a clear signal to practitioners, professions, the public and other stakeholders about the crucial role registered health practitioners play in recognising and responding to DFSV. These actions will also support the current training offerings and resources provided via states and territories, universities and professional associations regarding DFSV and contribute to priority work to end such violence.

## Response to the recommendation to mandate training on family violence

Recommendation (iii) calls on the Psychology Board of Australia (the Board) to introduce family violence mandatory CPD for registered psychologists.

Psychologists practice in a range of work settings not limited to seeing patients/clients. Since 2010 the general registration competencies across 8 competency domains have been deliberately high level to enable Psychologists to work across a range of settings. While assessment of risk to self and others is implicit in the training of Psychologists, it was not explicitly stated in the competencies. The Board has recently undertaken a comprehensive review of the competencies and from 1 December 2025 new <a href="Professional Competencies for Psychologists">Professional Competencies for Psychologists</a> will take effect. Competency 5: Conducts psychological interventions now contains specific reference to Psychologists' being able to conduct a range of culturally safe interventions that maximise optimal outcomes with clients and that identify and manage clients who are vulnerable or at risk to self or others.

The Board therefore now mandates the range of risk assessment and management scenarios as a threshold competency for the purposes of achieving and maintaining general registration as a psychologist. This expectation is inclusive of situations of family violence. For provisional psychologists, it is the expectation of the Board that education providers and supervisors provide training and assess the provisional psychologist's competence to safely manage situations of risk.

For Psychologists with general registration, they must complete a learning needs analysis against the professional competencies and develop an annual learning plan to maintain their individual scope of practice. The individual's scope of practice is dependent on their work role. The <a href="CPD Registration">CPD Registration</a>
Standard recognises and supports flexibility for practitioners to work across a variety of practice settings. For Psychologist's working in settings where family violence is likely to be a component of a client's presentation, the Professional Competencies for Psychologists are explicit in the expectation that Psychologists are competent to recognise, respond appropriately and refer on to specialist services.

National Boards and Ahpra are committed to increasing capability to effectively identify and respond to DFSV across the health practitioner workforce. The Board considers that the Professional Competencies for Psychologists and working with the National Boards and Ahpra to enhance existing regulatory approaches such as CPD and accreditation standards will improve capability in the Psychologist workforce.

If you have any queries regarding the information provided, please contact Matt Jessimer, Acting Executive Officer

Yours sincerely,

**Rachel Phillips** 

Chair, Psychology Board of Australia

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