

Ref: OUT25/1915



28 October 2025

Kate Sanderson
Coroner's Registrar
Coroner's Support Services,
Coroners Court of Victoria,
65 Kavanagh Street
Southbank VIC 3006

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

Dear Registrar Sanderson,

Investigation into the death of William Heddergot (COR 2020 006253)

On behalf of the Australian Health Practitioner Regulation Agency (Ahpra) and the Psychology Board of Australia (the Board), we acknowledge the Finding into the death of William Heddergot. We extend our deepest condolences to the family, friends, kin, and community affected by this loss.

Ahpra and the 15 National Boards recognise that family, domestic and sexual violence (FDSV) is a significant and widespread problem with serious and lasting impacts upon individuals, families and communities.

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 FDSV in our capacity as regulators, having published a [joint statement](#) that reinforces the importance of the health workforce in identifying and responding to FDSV and also the consequences for health practitioners who perpetrate FDSV.

We note the recommendation made under section 72(2) of the *Coroners Act 2008* (Vic) (the Act), which is directed to the Board. We refer to recent correspondence of 18 September 2025 confirming that the recommendation intended to reference Australian psychologists rather than psychiatrists, and appreciate the opportunity to respond to recommendation (ii):

That the Psychology Board of Australia work with the Australian Psychological Society to implement mandatory family violence training and CPD for Australian psychologists [sic].

On behalf of the Board, I provide this written response to the recommendation, in accordance with the requirements under sections 72(3) and 72(4) of the Act.

In response to the recommendation, the Board confirms that an alternative to the recommendation has been implemented, with some further implementation activities yet to occur.

Updated Professional Competencies to take effect 1 December 2025

Psychologists in Australia practise in a regulatory framework established by the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law). The Board has powers under the National Law to develop standards, codes and guidelines about the eligibility of individuals for registration in the psychology profession.

National competency-based benchmarks are used across the health professions in the National Scheme, to ensure that only suitably qualified and competent people in the health profession are registered. The Board establishes the benchmarks for safe and effective practice as a psychologist in Australia, and these

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Ahpra and the National Boards regulate these registered health professions: Aboriginal and Torres Strait Islander health practice, Chinese medicine, chiropractic, dental, medical, medical radiation practice, midwifery, nursing, occupational therapy, optometry, osteopathy, paramedicine, pharmacy, physiotherapy, podiatry and psychology.

competencies define the essential knowledge, skills, and professional attributes required for safe and effective psychological practice.

Since commencement of the National Scheme in 2010, the competencies for general registration have been deliberately high level across 8 competency domains, to reflect that psychologists practice in a range of work settings not limited to seeing patients/clients. While assessment of risk to self and others has been implicit in the training of psychologists, it was not explicitly stated in the competencies.

Prior to receiving the Coroner's finding, the Board has undertaken a comprehensive review of these competencies and developed revised [Professional Competencies for Psychologists \(Professional Competencies\)](#). The new Professional Competencies includes Competency 5, which 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.

This means that from 1 December 2025, the Board will require competency in a range of risk assessment and management scenarios as a threshold for achieving and maintaining general registration as a psychologist.

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 new 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 [CPD Registration Standard](#) recognises and supports flexibility for practitioners to work across a variety of practice settings. For psychologists working in settings where family violence is likely to be a component of a client's presentation, the Professional Competencies include the expectation that psychologists are competent to recognise risk, respond appropriately and refer on to specialist assistance.

Additional Measures Undertaken or Planned in Response to the Recommendation

Since receiving the Coroner's findings, the Board has communicated to all psychologists through its recent newsletter to registrants and stakeholders, to encourage integration of training that deepens knowledge of FDSV into their CPD planning, particularly where it supports the development of Competency 5 in the revised *Professional Competencies for Psychologists*.

In alignment with the Scheme-wide initiative, the Board will engage with all psychology professional associations, including the APS, with a view to strengthening sector-wide capability in responding to FDSV.

National Boards and Ahpra are committed to increasing capability to effectively identify and respond to FDSV across the health practitioner workforce, including reviewing regulatory frameworks such as CPD and accreditation standards to improve this capability in the psychologist workforce.

If you have any queries regarding the response provided, please contact Ida Lee, Executive Officer – Psychology.

Yours sincerely



Rachel Phillips

Chair, Psychology Board of Australia