

Government Response to the Domestic and Family Violence Death Review and Advisory Board 2017-18 Annual Report

The Domestic and Family Violence Death Review and Advisory Board (the Board) was established as part of the Queensland Government's implementation of recommendations from the Special Taskforce on Domestic and Family Violence Final Report - '*Not Now, Not Ever*' *Putting an end to domestic and family violence in Queensland* (2015) (*Not Now, Not Ever Report*).

The Board is established under the *Coroners Act 2003* and plays an important role in reviewing domestic and family violence deaths to identify common systemic failures, gaps or issues; and make recommendations to improve systems, practices and procedures to prevent future domestic and family violence deaths.

The Board's second report, the 2017-18 Annual Report, contained **13 recommendations**.

The Government supports the intent of the Board's recommendations that seek to enhance the system response to domestic and family violence through extending upon current and planned activities with regard to:

- the supports for children exposed to domestic and family violence;
- the service delivery for people of culturally and linguistically diverse backgrounds;
- combating non-lethal strangulation;
- responding to perpetrators, including perpetrator intervention programs; and
- the role of Primary Health Networks in improving cross-agency responses to DFV within primary health care settings.

The Palaszczuk Government is committed to leading a program of reform to end domestic and family violence and has invested \$328.9 million over six years to 2021-22 to the implementation of the *Not Now, Not Ever Report* recommendations.

The Board's second report highlights that responding to domestic and violence requires government and non-government agencies across specialised and generalised service systems, to work in a cohesive, integrated way so that both victims and perpetrators receive a consistent, standardised and culturally informed service response that improves victim safety and perpetrator accountability.

The Palaszczuk Government recognises the importance of this and has invested \$26.3 million in integrated service response trials and high risk teams which aim to develop a cohesive integrated response to both victims and perpetrators.

The Government acknowledges the Board's findings that early intervention that targets vulnerable or at-risk families is of critical importance in breaking the cycle of violence. The Government will consider existing investment in service responses to children and young people affected by domestic and family violence and will seek to ensure investment in this area is contemporary and evidence informed.

The Government will also establish a new service to build the capacity of the domestic and family violence workforce across Queensland. This service will deliver appropriate multi-cultural competency training.



The Board's report suggests there is a heightened risk of homicide in those relationships where an act of non-lethal strangulation has occurred. Recognising this, and in response to the *Not Now, Not Ever: Report*, on 5 May 2016 the Government introduced a new offence of choking, suffocation or strangulation in a domestic setting. This offence carried a maximum penalty of seven years imprisonment.

The creation of this offence is an example of where the Government has led the way, with other jurisdictions now reported as considering a similar approach.

The Government will explore opportunities to improve the evidence base regarding non-lethal strangulation and will continue to support training initiatives so that responders to domestic and family violence understand the signs of, and appropriate responses to, non-lethal strangulation within a domestic and family violence context.

Since the release of the *Not Now, Not Ever Report* the Government has initiated significant systemic reforms that seek to prevent and reduce domestic and family violence. By increasing the recognition of the impact of, and circumstances surrounding, domestic and family violence deaths, such as those that occur in family relationships, the Domestic and Family Violence Death Review Board continues to play an integral role in the government's campaign to address domestic and family violence.

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Recommendations	Lead Agency	Response
<p>Recommendation 1</p> <p>That the Queensland Government consider what services or programs are available to support children who experience or witness domestic and family violence across the state. These should be domestic and family violence informed, with a focus on early intervention and prevention, as well as targeted services to respond to children who have, or are, experiencing domestic and family violence, with a view to enhancing their availability and accessibility.</p> <p>This should also include consideration of how to better identify and respond to cumulative harm; the roles and responsibilities of family support services in providing domestic and family violence informed assistance to at-risk families; and opportunities to expand existing culturally appropriate, trauma informed counselling services for children.</p>	<p>Department of Child Safety, Youth and Women</p>	<p>Accept in principle</p> <p>The Department of Child Safety, Youth and Women will undertake a review of current investment in service responses to children and young people impacted by domestic and family violence. The review will provide an audit of service responses currently being delivered, explore the strengths of these responses and identify gaps and areas requiring further exploration. The outcomes of the review will inform policy and program development with a view to ensuring existing, and any future investment in this area is contemporary and evidence informed.</p>
<p>Recommendation 2</p> <p>That the Department of Child Safety, Youth and Women ensure current efforts that aim to build workforce capacity include the delivery of appropriate multi-cultural competency training to both specialist and mainstream service providers to enhance responses to people experiencing domestic and family violence from culturally and linguistically diverse backgrounds.</p> <p>This should take into consideration, but not be limited to, cultural risks and protective factors, different patterns of service engagement, and potential barriers to service access for both victims and perpetrators.</p>	<p>Department of Child Safety, Youth and Women</p>	<p>Accept</p> <p>The Department of Child Safety, Youth and Women is establishing a new Workforce Capacity and Capability Building Service to support the domestic and family violence (DFV) workforce across Queensland. A number of priority training areas have been identified for the service to deliver on within the first year of operation, including working with culturally and linguistically diverse cohorts.</p>

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<p>Recommendation 3</p> <p>Noting that the Third Action Plan of the <i>Queensland Domestic and Family Violence Prevention Strategy 2016-26</i> will soon commence development, the Board recommends that a priority area of focus include improving system responses to victims and perpetrators of domestic and family violence from a culturally and linguistically diverse background.</p> <p>This should aim to extend upon those activities already undertaken as part of the delivery of the Second Action Plan, and focus on enhancing the capacity of community members, including identified female leaders, to implement locally-led solutions, which build on initiatives currently underway at a state and national level.</p>	<p>Department of Child Safety, Youth and Women</p>	<p>Accept</p> <p>Improving system responses to victims and perpetrators of domestic and family violence (DFV) from culturally and linguistically diverse (CALD) backgrounds will remain a priority area of focus for the development of integrated DFV service responses and inter-agency models for responding to high risk cases.</p> <p>The Department of Child Safety, Youth and Women has commissioned the development of contemporary, evidence based practice standards for the DFV sector to ensure high quality service delivery across Queensland. This will include the development of practice standards for appropriate responses for victims and perpetrators from CALD backgrounds.</p>
<p>Recommendation 4</p> <p>That the Department of Child Safety, Youth and Women establish an appropriately resourced service to provide specialist consultancy advice and assistance to mainstream organisations who are providing support to victims and perpetrators of domestic and family violence from a culturally and linguistically diverse background.</p> <p>This service should have sufficient expertise to provide advice about state and national legal and support services and systems to assist people from culturally and linguistically diverse backgrounds to understand and navigate these systems.</p>	<p>Department of Child Safety, Youth and Women</p>	<p>Accept in principle</p> <p>The Department of Child Safety, Youth and Women (DCSYW) has commissioned the development of contemporary, evidence based practice standards for the domestic and family violence (DFV) sector and is establishing a new Workforce Capacity and Capability Building Service to support the DFV workforce across Queensland.</p> <p>Both initiatives will improve responses to culturally and linguistically diverse (CALD) cohorts. Following their implementation, DCSYW will further investigate the need to enhance or resource a service to provide specialist consulting advice to mainstream DFV organisations who are providing support to victims and perpetrators of DFV from a CALD background.</p>

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<p>Recommendation 5</p> <p>That Queensland Health and the Queensland Police Service examine the role of clinical forensic evidence in securing convictions for non-lethal strangulation within a domestic and family violence context, with a view to identifying opportunities for improvement and standardisation in processes.</p>	<p>Queensland Health</p> <p>Queensland Police Service</p>	<p>Accept</p> <p>Queensland Health to lead establishment and coordination of a working group with membership comprising Department of Justice and Attorney General, Queensland Health and the Queensland Police Service.</p> <p>The working group will:</p> <ul style="list-style-type: none"> • monitor developing local and international evidence on the role and usefulness of forensic material in securing convictions for non-lethal strangulation in domestic and family violence; • consider the current state in Queensland regarding the use of forensic evidence to secure convictions through a scan of sample cases and through consultation with key stakeholders involved in prosecuting under the QLD legislation; and • consider existing methods for gathering forensic evidence and consult with stakeholders to identify where improvements may be made.
<p>Recommendation 6</p> <p>That Queensland Health explore opportunities to increase public health clinicians' (including ambulance officers, accident and emergency staff, drug and alcohol services, mental health clinicians) knowledge of the signs of, and appropriate responses to, non-lethal strangulation within a domestic and family violence context.</p> <p>This should include an evaluation of the current Queensland Health training modules (i.e. Understanding domestic and family violence, Clinical responses to domestic and family violence) to ensure they include relevant information to assist health practitioners identify and respond to non-lethal strangulation.</p>	<p>Queensland Health</p>	<p>Accept</p> <p>Queensland Health is working with an expert reference group to guide a process evaluation of its DFV Toolkit of Resources for health clinicians and workers (the Toolkit). Queensland Health will consider subsequent recommendations for how the Toolkit may be augmented to respond to existing and emerging strategic priorities.</p> <p>The revised Toolkit will be promoted across Queensland's public health sector.</p>

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		Queensland Health and Queensland Ambulance Service will work together to explore opportunities to improve first responders' knowledge of the risks, signs, symptoms and indicators related to non-lethal strangulation in DFV.
<p>Recommendation 7</p> <p>That the Queensland Police Service evaluates their existing training in relation to domestic and family violence to increase frontline responding officers' knowledge of the signs of, and appropriate responses to, non-lethal strangulation.</p>	Queensland Police Service	<p>Accept</p> <p>A review of QPS training products indicates that material relating to the signs of, and response to non-lethal strangulation is embedded across an officer's career from recruit training onwards. Products include:</p> <ul style="list-style-type: none"> • specialist training for strangulation in Recruit training, the First Year Constable program, and the Constable Development Program; • online learning products; • the new Domestic and Family Violence DFV Specialist Course, designed to enhance the Service's specialist DFV officers' capability of leading multi-agency investigations and coordination of comprehensive responses to incidents of DFV; • specific modules in the Detective Training Program; and • the Vulnerable Persons Training Package. <p>All training undergoes evaluation as part of continual improvement processes and to ensure material is contemporary and reflects emerging trends.</p> <p>The Vulnerable Persons Training package has already undergone evaluation, with frontline officers finding the</p>

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		<p>pocket size strangulation tri-fold reference card a useful tool when attending DFV incidents.</p> <p>The DFV Specialist Course is due to undergo evaluation in 2019.</p> <p>The QPS will continue to actively highlight to officers, via Bulletins, Newsletters and all staff messaging, the training products that are available to better educate and help assist them when dealing with DFV matters, including non-lethal strangulation.</p>
<p>Recommendation 8</p> <p>That Queensland Health explore data-linking opportunities with other relevant departments to improve the evidence base regarding the ongoing health impacts of non-lethal strangulation.</p>	<p>Queensland Health (Queensland Police Service, partner)</p>	<p>Accept</p> <p>Queensland Health and the Queensland Police Service (QPS) will continue to work together to facilitate linking QPS records to emergency department, hospital admission and death registration data.</p>
<p>Recommendation 9</p> <p>That the Royal Australian College of General Practitioners explore opportunities to increase general practitioners' knowledge of the signs of, and appropriate responses to, non-lethal strangulation within a domestic and family violence context, inclusive of appropriate referral pathways.</p>	<p>Queensland Health</p>	<p>Accept in principle</p> <p>While the Royal Australian College of General Practitioners (RACGP) and its members sit outside of the jurisdiction of Queensland Health, Queensland Health will initiate discussions with RACGP regarding the Domestic and Family Violence Death Review and Advisory Board, its findings and the intent of Recommendation 9.</p> <p>If requested, Queensland Health can provide the DFV Toolkit of Resources for health clinicians and workers resources in an editable format that can be augmented for RACGP's audience.</p>

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<p>Recommendation 10</p> <p>That the Queensland Government funds the development of a training package or module for professionals from generalist services (e.g. mental health services, child safety services, psychologists, general practitioners, alcohol and other drug treatment services). This should focus on how to respond to perpetrators, maintain the safety of victims and their children, and align with the <i>National Outcome Standards for Perpetrator Intervention Programs</i>.</p> <p>This training package/module should be made available to all organisations, services and agencies who may come into contact with perpetrators of domestic and family violence.</p>	<p>Department of Child Safety, Youth and Women</p>	<p>Accept in principle</p> <p>The Queensland Government will explore options for progressing this recommendation in partnership with stakeholders and building on existing training modules offered by training providers.</p>
<p>Recommendation 11</p> <p>That the Department of Child Safety, Youth and Women explore ways of supplementing men's behaviour change programs with initial and/or ongoing motivational work to support treatment adherence, reduction in recidivism risk, and improved safety for victims of domestic and family violence.</p>	<p>Department of Child Safety, Youth and Women</p>	<p>Accept</p> <p>The Department of Child Safety, Youth and Women will explore the use of alternative interventions whilst perpetrators wait to attend men's behaviour change programs. Identified opportunities will be considered as part of future policy and planning for perpetrator intervention reforms.</p>
<p>Recommendation 12</p> <p>That the Department of Child Safety, Youth and Women conducts a feasibility study about the use of online men's behaviour change programs.</p> <p>This study should:</p> <ul style="list-style-type: none"> • focus on whether programs delivered in this modality are effective; • identify specific cohorts, contexts, and localities where this modality may be suitable (e.g. rural/remote, treatment-resistant perpetrators, young people); • be developed using the collective knowledge of experts in this area; and 	<p>Department of Child Safety, Youth and Women</p>	<p>Accept</p> <p>The Department of Child Safety, Youth and Women will undertake a cross-jurisdictional analysis of Australian and international current and planned use of online interventions. Identified opportunities will be considered as part of future policy and planning for perpetrator intervention reforms.</p>

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<ul style="list-style-type: none"> • be informed by, and adhere to, relevant best practice safety standards to ensure the protection of victims and their children remains a paramount priority. 		
<p>Recommendation 13</p> <p>Improving cross-agency responses to DFV That Primary Health Networks throughout Queensland play a leadership role in training and workforce development initiatives that seek to improve cross-agency responses to domestic and family violence within primary health care settings.</p> <p>This should focus on enhancing local partnerships between specialist domestic and family violence support services, and primary health care providers.</p>	<p>Queensland Health</p>	<p>Accept in principle</p> <p>Queensland Health will liaise with the Primary Health Networks regarding Recommendation 13.</p> <p>The National Health Reform Agreement (NHRA) sets out roles and responsibilities for the Commonwealth and State levels of government in relation to providing health services. The Commonwealth Government has designated responsibility for establishing Primary Health Networks to promote coordinated GP and primary health care service delivery. While Primary Health Networks sit outside of the jurisdiction of Queensland Health, Queensland Health will initiate discussions with Primary Health Networks regarding the Domestic and Family Violence Death Review and Advisory Board, its findings and the intent of Recommendation 13.</p> <p>The DFV Toolkit of Resources for health clinicians and workers includes training information and material on the <i>Recognise, Respond, Refer</i> model and is publicly available for use by health educators, trainers, clinicians and workers across the public, private and primary health care sectors. If requested, the Queensland Health can provide resources in an editable form that can be augmented for Primary Health Network's audience.</p>

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