



## Domestic Violence Death Review Team Report 2015-2017

### Government Response

Number	Recommendation	Lead Agency/ies	Government Response
1.1	That the <b>NSW Government</b> give consideration to becoming a member of <i>Our Watch</i> .	FACS (Women NSW)	<p>Not supported.</p> <p>The NSW Government is committed to prevention of violence against women and children, however does not intend to become a member of <i>Our Watch</i>.</p>
1.2	That the <b>DVDRT Secretariat</b> work together with <i>Our Watch</i> to analyse media reporting around murder suicides in New South Wales and disseminate its research findings.	DVDRT Secretariat	<p>Not supported.</p> <p>The NSW Government will consider working with the Australia's National Research Organisation for Women's Safety (ANROWS) to progress implementation of this recommendation.</p>
2.1	That the <b>NSW Police Force</b> reviews how it captures, records and displays data on domestic violence events with a view to making appropriate changes that would support operational police to view the incident holistically and in the context of the history of the parties and relationship. This will assist police to make informed decisions as to what action to take in the context of the incident they are dealing with.	NSW Police Force	<p>Supported.</p> <p>The NSW Police Force continuously reviews the way domestic and family violence events are recorded in the Computerised Operational Policing System and has identified opportunities to make changes to the system to allow for operational police to view incidents holistically. The detail of these proposed changes and the timeframe for implementation is currently being developed.</p>
2.2	That the <b>DVDRT</b> identify real life case studies which demonstrate	DVDRT Secretariat	Supported.

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	<p>issues/difficulties of identifying domestic violence as a complex pattern of behaviours and supply these case studies to the NSW Police Force together with relevant commentary.</p> <p>That the <b>NSW Police Force</b> incorporate these real-life case studies into the police training regime.</p>	NSW Police Force	<p>Both the DVDRT Secretariat and the NSW Police Force support this recommendation. The NSW Police Force already uses real life case studies in its training programs offered at the Police Academy, as well as in the ongoing education and training of police officers. These programs are updated as necessary with new and more current case studies. The DVDRT Secretariat will, within the next 6 months, supply the NSW Police Force with relevant case studies drawn from across section of metropolitan, regional, rural and remote locations, for their potential inclusion in the relevant courses.</p>
3	<p>That the <b>Attorney General</b> consider mechanisms to ensure that ADVOS are made for an appropriate duration, including:</p> <ul style="list-style-type: none"> <li data-bbox="467 969 916 1096">• increasing the default length of ADVOS from 12 months to a longer duration to promote enhanced victim safety; and</li> <li data-bbox="467 1096 916 1331">• requesting that the Judicial Commission of NSW update the Local Court Bench Book or other education and training to invite judicial officers to consider factors relevant to setting an appropriate duration</li> </ul>	Department of Justice	<p>Supported.</p> <p>A review will be undertaken to consider the appropriate duration of and mechanisms for the length of apprehended domestic violence orders (ADVOS) and any related issues. The review will include analysis regarding the current length of ADVOS, the timing of breaches and related offences and the period of time an offender is in custody.</p> <p>Consideration will be given to current approaches in other jurisdictions. The review will involve consultation with government, non-government, legal and judicial</p>



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	for an ADVO (including any period of time an offender is in custody, to ensure that the person in need of protection is protected upon the defendant's release).		stakeholders.  The review will begin in the second quarter of 2018.
4	That the <b>NSW Police Force</b> update its Domestic Violence Standard Operating Procedures to require that where ADVO enquiries are made at the front desk of police stations, the inquirer is taken to a private interview room (except in circumstances where this would present as a security risk). The Standard Operating Procedures should also be updated to ensure that the inquirer is provided information about domestic violence and victims' safety.	NSW Police Force	Supported.  The current NSW Police Force Domestic Violence Standard Operating Procedures (DVSOPS) instruct police to speak to victims away from the counter area. While the NSW Police Force agrees that the inquirer should be taken to a private interview room, this may not be always possible due to security risks or resource reasons (for example, the station counter should not be left unattended if there is only one armed officer in the station).  The NSW Police Force will update the DVSOPS to ensure an inquirer is provided with information on domestic violence and the risk factors as identified by the NSW Police Force Domestic Violence Safety Assessment Tool. The NSW Police Force will produce a concise information sheet and promote this internally.
5.1	That the <b>Attorney General</b> , in consultation with relevant stakeholders, review the operation of the NSW offence of strangulation	Department of Justice	Supported.  The NSW Government recognises the need for an offence that effectively addresses the



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	(contained at s37 of the <i>Crimes Act 1900 (NSW)</i> ) to determine whether this offence is operating effectively.		<p>serious harm caused by non-fatal strangulation.</p> <p>The Department of Justice has commenced consideration of the operation of the offences of strangulation (sections 37(1) and 37(2) of the <i>Crimes Act 1900 (NSW)</i>), including analysis of BOCSAR data on charges and convictions. Relevant stakeholders will be consulted on the existing offences and any potential amendment in early 2018.</p>
5.2	That the <b>NSW Police Force</b> update its Standard Operating Procedures to require that where a victim discloses strangulation, police advise the victim to seek urgent medical attention given the potential long-term health consequences of this form of assault.	NSW Police Force	<p>Supported.</p> <p>The NSW Police Force will update its Standard Operating Procedures to reflect this requirement. It is noted this recommendation has arisen from a need to increase community and agency awareness of the serious (and often unnoticeable) injuries that can be caused by strangulation.</p> <p>The NSW Health Education Centre Against Violence has taken a proactive role in this important area and incorporated the issue of strangulation into a number of courses available to NSW Health staff including the Graduate Certificate in Medical and Forensic Management of Adult Sexual Assault. Further work will follow.</p>



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6	<p>That the NSW <b>Attorney General</b> review the issue of intractable domestic violence offenders – offenders who are not deterred by civil or criminal penalties for domestic and family violence – with a view to determining whether any additional strategies can be developed for this cohort.</p>	Department of Justice	<p>Supported.</p> <p>In October 2017, the NSW Parliament passed a suite of reforms to community-based sentences as part of its criminal justice reform package. The sentencing reforms apply to all offenders dealt with by the adult courts and replace the current set of community-based sentences with three new flexible orders with differing intensity of sanctions. In descending order these are the Intensive Correction Order, Community Correction Order and the Conditional Release Order.</p> <p>The reforms increase offender access to supervised sentences and increase offenders' participation in programs to change their behaviour and reduce reoffending. With respect to domestic violence offences, under the new orders there will be a presumption at law that all offenders sentenced for a domestic violence offence should receive a supervised community based sentence or a sentence of full-time imprisonment, unless the court is satisfied another penalty is appropriate.</p> <p>The <i>Crimes (High Risk Offenders) Amendment Act 2017 (NSW)</i> was also passed in October 2017. This reform allows for better management of high risk sex and</p>



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			<p>violent offenders, including eligible domestic violence offenders, who pose an unacceptable risk of committing a further serious sex or violent offence. More of these offenders will now become eligible for detention or intensive supervision at the end of their sentences.</p> <p>As part of the work under the Premier's Priority program to reduce domestic violence reoffending, the application of the above criminal justice reforms to high risk, intractable domestic violence offenders will be monitored over a 12 month period. Monitoring will begin at the time the reforms come into force by October 2018. A review will then be initiated one year after the implementation of the reforms with a view to determining whether any additional strategies can be developed for this cohort. Other existing penalties, such as fines and dismissal of the charges without conviction, will also continue to be available.</p>
7.1	That the <b>Attorney General</b> , in consultation with relevant stakeholders, consider how the approaches reflected in the Domestic Violence Justice Strategy, such as the application of specialist court practice	Department of Justice	<p>Supported.</p> <p>In 2018, the Department of Justice will review the Domestic Violence Justice Strategy. The review will include a focus on improving the</p>

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	in all local courts, can be further advanced.		court experience for particularly vulnerable victims, and include consideration of:
7.2	That the <b>NSW Government</b> review the support needs of victims in contested domestic violence matters, and the adequacy of current supports, with the aim of providing consistent support across NSW. This should include an examination of the specific needs of Aboriginal women, including in relation to attending court.		<ul style="list-style-type: none"> <li>• how the application of specialist court practice in local courts can be further advanced – per recommendation 7.1</li> <li>• support needs of victims in contested domestic violence matters, and the adequacy of current supports including an examination of the specific needs of Aboriginal women attending court – per recommendation 7.2</li> </ul>
7.3	That the <b>Attorney General</b> approach the Chief Magistrate to discuss how the expertise of judicial leaders can be harnessed to further improve responses to domestic violence in courts.		<ul style="list-style-type: none"> <li>• how the expertise of judicial leaders can be harnessed to further improve responses to domestic violence in courts - per recommendation 7.3</li> <li>• other matters arising from consultation.</li> </ul> <p>Consultation will commence in the second quarter of 2018 and will include key judicial, government, and non-government stakeholders as well as service users. The review will be completed in late 2018.</p>
8.1	That the <b>NSW Government</b> consider the need for regulation of generalist counsellors, and/or other mechanisms to ensure generalist counsellors are operating in a way that respects and	FACS (Women NSW)	<p>Supported.</p> <p>Women NSW, with support from NSW Health, will progress this recommendation.</p>



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	enhances the safety of victims and children in respect of domestic and family violence.		
8.2	That the <b>NSW Government</b> engage with the Australian Psychological Association, Australian Counselling Association, Australian Association of Social Workers and other relevant professional bodies to examine ways to improve associated professionals' awareness of and response to domestic and family violence such as through continuing professional education or registration processes.	FACS (Women NSW)	<p>Supported.</p> <p>Women NSW, with support from NSW Health, will progress this recommendation.</p>
9	That <b>NSW Health</b> work with Primary Healthcare Networks, Royal Australian College of General Practitioners, Australian College of Rural and Remote Medicine, Aboriginal Medical Services, Women NSW, Australian Primary Healthcare Nurses Association and any other relevant agency or service as required, to support the development of strategies and materials for providing ongoing education to General Practitioners and practice nurses in relation to domestic and family violence.  Consideration should be given as to	NSW Health	<p>Supported.</p> <p>Work has commenced through Safer Pathway to encourage General Practitioners (GPs) to refer patients to Local Coordination Points. NSW Health is a key partner agency in Safer Pathway.</p> <p>The NSW Health Education Centre Against Violence currently offers adult sexual assault medical and forensic training that is available to GPs, this is being expanded to include a focus on domestic violence.</p> <p>NSW Health is also collaborating with the Royal Australasian College of General</p>

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	how to maximise uptake of training and whether domestic and family violence training should be required as part of Continuing Professional Development for General Practitioners.		Practitioners to provide information to GPs about supporting vulnerable families to ameliorate child protection risks including domestic and family violence. This includes a webinar which will be made available to GPs about recent legislative changes around information exchange provisions and give them access to NSW Health Child Wellbeing Units. The webinar includes case studies about domestic and family violence.
10	That the <b>NSW Government</b> appropriately resource <b>NSW Health</b> to ensure that Level 4 and above hospitals with a 24-hour emergency department are appropriately supported by 24 hour psychosocial resources to support the safety of victims.	NSW Health	<p>Response is pending further consultation and consideration.</p> <p>NSW Health has conducted a three site six month trial of screening for domestic and family violence in Emergency Departments. The final report for the <i>Domestic Violence Screening and Response in NSW Emergency Departments Project</i> will be received in May 2018. This Report will determine future feasibility of screening in Emergency Departments, and provide recommendations about response models. NSW Health will defer consideration of this recommendation until after the publication of the report.</p> <p>On-call social workers are available in Emergency Departments in most of the larger hospitals, however it is unlikely that this is the case across all Level 4 and above hospitals.</p>



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			<p>The NSW Government has invested an additional \$10 million per annum from 2017/18 to strengthen NSW Health services for victims of sexual assault, child abuse and neglect, and domestic and family violence. This funding is intended to support a state-wide VAN Services Redesign and Planning Project, to be undertaken by the Ministry of Health in partnership with Local Health Districts (Districts) and the Sydney Children's Hospital Network during 2017/18 and 2018/19. The funding is intended to enable Districts to target the provisions of 24/7 integrated psychosocial medical forensic services for sexual assault, child abuse and neglect and domestic and family violence. Future service priorities for enhancement will also be identified by the Ministry in collaboration with the Districts.</p>
11	<p>That the <b>Ambulance Service of NSW</b> work with the <b>Ministry of Health</b> (Health and Social Policy branch) to develop a specific domestic and family violence standard operating policy.</p>	NSW Health	<p>Supported.</p> <p>The NSW Health Domestic and Family Violence Policy is currently under review and recommendations related to policy change for all NSW Health services are appropriately considered as part of this review in consultation with specific clinical areas.</p> <p>The Prevention and Response to Violence,</p>



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			Abuse and Neglect Unit within the NSW Ministry of Health is also currently developing a state wide toolkit of domestic and family violence resources and information for staff. It is planned that this toolkit be shared with NSW Ambulance Services as part of the roll out of these resources.
12.1	That the revised <b>NSW Health</b> Domestic Violence Identification and Response policy address the safety needs of victims of violence who are being discharged from mental health institutions.	NSW Health	<p>Supported.</p> <p>To progress this recommendation, a NSW Health working party will be established to coordinate and facilitate implementation of the DVDRT recommendations. The Prevention and Response to Violence, Abuse and Neglect Unit will coordinate the working party.</p> <p>An action from this working party will be to develop strategies to address the safety needs of victims who are discharged from mental health institutions. This will be inserted into the revised policy.</p>
12.2	That <b>NSW Health</b> develop strategies to improve screening rates for women in mental health services.	NSW Health	<p>Supported.</p> <p>The NSW Health Service Agreement with Local Health Districts and Specialty Health Networks includes individual key performance indicators against NSW Health Strategic Priorities. In the 2017/18 Service Agreements, this includes a KPI on Routine Domestic Violence Screens conducted (%), with a</p>



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			<p>target of 70%. Local Health Districts and Networks are assessed against performance targets. Data is reported quarterly and screening rates are monitored by service stream.</p> <p>The NSW Health Education Centre Against Violence (ECAV) provides ongoing training in Districts and holds an annual forum for all NSW Health practitioners. The 2018 forum will focus on mental health and will specifically target improving screening rates.</p> <p>ECAV also distributes Z cards to targeted health areas upon request to disseminate to women throughout the screening process so they receive information about domestic and family violence, and support services. These cards are available in 18 languages.</p>
13	<p>That <b>Justice NSW</b> work with <b>NSW Health</b> in relation to the redesign of MERIT to explore strategies to integrate MERIT into the current referral and information sharing framework under Safer Pathway. This redesign should include a requirement that all workers involved in the MERIT program be trained in domestic and family violence.</p>	Department of Justice  NSW Health	<p>Supported.</p> <p>Both the Department of Justice and NSW Health support this recommendation.</p> <p>In February 2017, the Department of Justice, through Corrective Services NSW, convened a working group to commence the redesign of the MERIT program. This work is expected to be completed by late 2018. NSW Health is represented on this working group. This recommendation will be progressed through</p>

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			<p>the working group.</p> <p>NSW Health supports drug and alcohol workers, including MERIT workers, being trained to identify domestic and family violence and to provide appropriate referrals for those at risk while maintaining the therapeutic objectives of the MERIT program. Many already receive such training through the Local Health Districts, including modules on My Health Learning. NSW Health sees value in linking Alcohol and Other Drugs workers into the Safer Pathway framework.</p>
14	<p>That the <b>Independent Liquor and Gaming Authority</b>, when making determinations regarding any alcohol licensing related applications in areas identified by the NSW Bureau of Crime Statistics and Research as domestic violence 'hot spots', apply the following criteria:</p> <p>1) For any applications pertaining to an extension of trading hours, or the development of new liquor outlets or bottle-shops in domestic violence hot spots, there should be a rebuttable presumption against granting the</p>	Independent Liquor and Gaming Authority	<p>1) Supported in principle.</p> <p>It should be noted that the Independent Liquor and Gaming Authority already places significant weight upon domestic violence rates in the Local Government Area when making its licensing determinations.</p> <p>Indeed, domestic violence data has been a key reason for the Authority refusing a number of applications.</p> <p>2) Supported in principle.</p> <p>Under the existing Community Impact Statement process, there is already a</p>

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	<p>application;</p> <p>2) The Authority should require applicants to prepare Community Impact Statements for their applications and these should require the applicant to consult with community members, including a Domestic Violence Liaison Officer from the relevant Local Area Command or a Safety Action Meeting Representative from the Local Coordination Point, and applicants must respond to the concerns of these parties. Applicants also required to provide local alcohol sales industry data as part of their application; and</p> <p>3) In the case that licences or applications are successful after the applicant completes the Community Impact Statements, the licence holder should be required to display domestic violence educational material within public areas of the venue, including posters by NSW Police Force or other relevant educational material concerning domestic violence.</p>		<p>requirement for applicants to consult with community members.</p> <p>The Community Impact Statement process is currently under review by Liquor &amp; Gaming NSW, and this recommendation to require specific community members, including the Domestic Violence Liaison Officer, to be consulted as part of the process will be considered in the review.</p> <p>It should be noted that the provision of local alcohol sales industry data by applicants is not possible as this data is unavailable to applicants or to regulators.</p> <p>3) Supported in principle.</p> <p>Industry is concerned about the amount of material that already needs to be displayed in licensed venues, and there is a lack of certainty around effectiveness across a range of venues at different times of the day and in different environments. Further work would be required to ensure there are appropriate benefits that outweigh the costs.</p>
15	That <b>NSW Health</b> provide resources to a consumer based organisation and/or family and carers organisation who	NSW Health DVDRT Secretariat	Supported.  Both NSW Health and the DVDRT Secretariat

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	<p>work with people who use drugs to collaborate with the <b>DVDRT Secretariat</b> to develop a strategy for improving awareness of, and intervention in relation to, domestic and family violence amongst people on Opioid Treatment Programs in NSW.</p> <p>This strategy should aim to raise awareness and highlight the importance of this intervention point in a holistic and coordinated response to violence, highlight referral pathways available to this group of clients, increase capacity to identify and respond to domestic and family violence across the workforces administering and delivering these programs, and should be tailored to the different Opioid Treatment Program pathways currently available in NSW.</p>		<p>support this recommendation.</p> <p>To progress this recommendation, a NSW Health working party, including the Prevention and Response to Violence, Abuse and Neglect Unit, will be established to coordinate and facilitate implementation of the DVDRT recommendations. This recommendation will be addressed through this working party, which will collaborate with the DVDRT Secretariat and other relevant stakeholders.</p> <p>NSW Health, through the Alcohol and Other Drugs Branch, supports alcohol and drug workers, including staff of Opioid Treatment Program clinics, being trained to identify domestic and family violence and to provide appropriate referrals for those at risk while maintaining the therapeutic objectives of the Opioid Treatment Program. Many already receive such training through the Local Health Districts, including through modules on My Health Learning.</p> <p>NSW Health sees value in linking alcohol and drug workers into the Safer Pathway framework, including training on the use of the risk assessment tool and the information sharing mechanisms.</p>
16.1	That <b>NSW Health</b> conduct a literature review and convene a working group	NSW Health	Supported.



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	within NSW Health to ventilate relevant issues and develop a model of practice around working with complex clients with cumulative alcohol or drug, mental health and domestic violence issues.		<p>NSW Health will progress this recommendation. The Mental Health Branch and the Alcohol and Other Drugs Branch will collaborate in the proposed working group and literature review.</p> <p>The NSW Clinical Guidelines for the Care of Persons with Comorbid Mental Illness and Substance Use Disorders in Acute Care Settings 2009 set out legal obligations of workers in Mental Health and Alcohol and Other Drugs in relation to domestic violence (page 8). Page 13 requires that a standard Alcohol and Other Drugs assessment includes screening for domestic violence. The working group may present an opportunity to review these guidelines.</p> <p>NSW Health Education Centre Against Violence (ECAV) has developed a position paper on “Interrupting Male Violence with Men who use Domestic and Family Violence.” The focus is on brief, safe and effective male family violence intervention (MFVI) practice for generalist Health and human services sector workers to respond, in a range of settings, to maintain the safety of women and children, whilst increasing responsibility and accountability of men who use domestic and family violence. This is available on the ECAV website and is distributed throughout ECAV</p>



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			domestic and family violence courses.
16.2	That <b>NSW Health</b> convene an interagency forum including with relevant expertise in drug and alcohol, mental health and domestic violence, to develop strategies for improving and co-ordinating responses to people with mental health, drug and alcohol and domestic violence perpetration or victimisation issues. This may include the development of a coordinated plan of action, referral pathways and complex program interventions across agencies.	NSW Health	Supported.  NSW Health will progress this recommendation. The Mental Health Branch and Alcohol and Other Drugs Branch will collaborate in the proposed interagency working group and literature review.
17	That <b>NSW Health</b> convene an interagency working group to consider mechanisms by which to rapidly share information between NSW Health and Justice with respect to any existing Community Treatment Orders, clients who may be in breach of Community Treatment Orders when offending, or clients who may benefit from the inclusion of Community Treatment Orders as part of bail conditions.  This working group should also consider ways to monitor compliance with Community Treatment Orders for domestic and family violence	NSW Health	Supported.  NSW Health will progress this recommendation. This recommendation is highly complex in relation to people with lived experience of mental illness under Community Treatment Orders and domestic and family violence offences. The Mental Health Branch will collaborate with the interagency working group to be convened by NSW Health to address this specialised area. Legal Aid NSW will be invited to participate in the working group.



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	offenders.		
18	That the <b>NSW Police Force</b> update its Standard Operating Procedures and adjust training material to reflect preferred practice around Elder Abuse as contained in the NSW Police Notebook Card (developed by the Elder Abuse Helpline Resource Unit).	NSW Police Force	<p>Supported.</p> <p>The NSW Police Force will amend the Standard Operating Procedures and is currently developing training and information packages in relation to abuse of vulnerable people and the elderly.</p>
19.1	That <b>NSW Health</b> give consideration to adopting a policy whereby women who do not receive antenatal screening receive postnatal screening.	NSW Health	<p>Supported.</p> <p>NSW Health's current policy (<i>PD2010_017 Maternal &amp; Child Health Primary Health Care Policy</i>) already meets the recommendation as it requires women to be screened antenatally and postnatally.</p> <p>A comprehensive primary health assessment which includes the DV routine screening questions:</p> <ul style="list-style-type: none"><li>• Occurs antenatally – at the first point of contact with NSW Health during pregnancy. This will occur at the first presentation for antenatal care or as early as possible in the antenatal period before 20 weeks of pregnancy.</li><li>• Is reviewed (or conducted if there was no antenatal comprehensive primary health assessment) at the first health home visit.</li></ul>

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			<ul style="list-style-type: none"> <li>• Is conducted by the child and family health service at the six to eight week health check postnatally. The previous assessments will be reviewed and any new or emerging issues identified. If no previous assessment has been undertaken, a comprehensive primary health care assessment will be conducted.</li> <li>• Will recommend that a further assessment be conducted at six to eight months postnatally as part of the schedule of visits to the early childhood health service when the child health assessments recommended in the child's Personal Health Record (blue book) are completed.</li> </ul> <p>The Policy specifically notes that rapport should be established so as to engage the mother prior to asking sensitive questions. The interview is to only to be conducted when privacy can be assured. Questions that are sensitive for the mother, such as those asked about domestic violence and questions about past pregnancies/ terminations, must be asked with the mother alone. In circumstances where a child is present, the questions should be asked only if the child is aged under three years. It is recommended</p>



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			that sensitive questions be asked at the beginning of the interview and then the family can be invited into the interview with the nurse and mother. It is suggested that the requirement to see the mother alone initially be included in the letter confirming the antenatal booking, to provide an expectation that this will happen. Interviews need to be conducted in a manner that facilitates the parents identifying issues and concerns, and participating in making choices about the type and level of care and support they require. The Prevention and Response to Violence, Abuse and Neglect Unit is working to develop systems for electronic data recording and reporting of Domestic Violence Routine Screening.
19.2	That <b>NSW Health</b> update its policies and practice to ensure that, where required, appropriate healthcare interpreters are made available to women in NSW receiving post-natal care in the form of home visits.	NSW Health	Supported.  This is underway. In December 2017, the Health and Social Policy Branch, Ministry of Health published the updated Policy, <i>Interpreters – Standard Procedures for Working with Health Care Interpreters</i> . It is NSW Health policy that health care interpreters are made available to people who are receiving care and are not fluent in English or are Deaf.  The policy includes a component on trauma informed training for Interpreters. It describes



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			<p>the role of health care interpreters in providing trauma-informed care. The policy also guides health practitioners on what steps to take if a woman declines a health care interpreter and the health practitioner has concerns about domestic and family violence being present.</p> <p>Supporting this process is an ongoing training program run by the NSW Health Education Centre Against Violence (ECAV). ECAV provides domestic and family violence training for interpreters interfacing with NSW Health. They also run courses for NSW Health staff on working with women in Culturally and Linguistically Diverse Communities who are experiencing violence.</p> <p>In late 2017 ECAV ran a highly successful forum for Interpreters and Bilingual Community Educators (BCEs) in collaboration with the Health Care Interpreter Services. The Forum provided opportunities to explore strategies to address complex practice issues and ethical dilemmas that arise for interpreters and BCEs in engagement with victims and perpetrators from their community. The forum discussed topics including navigating boundaries between professional and community responsibilities, safety issues and referring to specialist</p>



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			<p>services.</p> <p>At this forum ECAV launched their DVD – <i>Engaging Interpreters with a Trauma Informed Approach: Screening for Domestic Violence in NSW Health Service</i> with an accompanying resource booklet <i>Information For Health Workers When Engaging Interpreters in Domestic Violence Screening</i> – which provides guidelines for health workers on when and how to book, and work with face to face telephone Interpreters, when screening migrant and refugee women for domestic violence.</p> <p>The current policy (PD2010_017 <i>Maternal &amp; Child Health Primary Health Care Policy</i>) requires that for the comprehensive primary health assessments (which incorporate the DV screening) conducted antenatally and postnatally:</p> <p style="padding-left: 40px;"><i>If the parent does not speak or understand English, the use of an interpreter will be necessary. Services are to ensure that they have the capacity to identify those parents who speak little or no English and provide appropriate access to interpreters.</i> (page 10)</p> <p>There are no plans to remove this requirement.</p>



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20.1	That the <b>Commonwealth Government</b> work with state governments and other relevant stakeholders to develop and fund a specific initiative to enable vulnerable individuals with impermanent visa status, or without a valid visa, to access affordable, appropriate and expedient medical care. This initiative must recognise the unique vulnerability of victims of domestic and family violence who may be precluded from accessing affordable services due to residency issues or barriers to access arising from fear of deportation.	FACS (Women NSW)	Minister Goward wrote to the Minister for Home Affairs on 20 December 2017 regarding this recommendation.
20.2	That the <b>Commonwealth Government</b> give consideration to expanding the Family Violence Provisions currently applicable to spousal visas to ensure that victims who are applying for permanent residency under different classes of visa are supported when escaping domestic or family violence.	FACS (Women NSW)	Minister Goward wrote to the Minister for Home Affairs on 20 December 2017 regarding this recommendation.
20.3	That the <b>Commonwealth Government</b> work with the Office of the Migration Agents Registration Authority to update accredited graduate certificate courses to include a specific topic about domestic and	FACS (Women NSW)	Minister Goward wrote to the Minister for Home Affairs on 20 December 2017 regarding this recommendation.



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	family violence as part of the syllabus. This update should highlight the specific vulnerabilities that may arise for domestic and family violence victims by virtue of having uncertain or impermanent visa status (across categories) and issues relevant to, but not confined to, the operation of the Family Violence Provisions. That the Office of the Migration Agents Registration Authority give consideration to incorporating mandatory domestic and family violence continuing professional development into educational requirements for registered Migration Agents in Australia.		
20.4	That the <b>Commonwealth Government</b> work with state governments and other relevant stakeholders to identify how non-residents experiencing domestic or family violence can be better supported in respect of access to shelter accommodation, access to more permanent housing solutions and access to appropriate financial and other supports. That as part of this work, the Commonwealth Government resource the NSW Government to provide accommodation and other	FACS (Women NSW)	Minister Goward wrote to the Minister for Home Affairs on 20 December 2017 regarding this recommendation.



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	services for domestic and family violence victims who are non-residents.		
20.5	That the <b>Commonwealth Government</b> give consideration to either updating the <i>Life in Australia</i> booklet, or producing another publication to be distributed to all persons entering Australia on a provisional or permanent visa, to highlight what domestic and family violence is, and what victims can do to seek help in Australia (including referral information).	FACS (Women NSW)	Minister Goward wrote to the Minister for Home Affairs on 20 December 2017 regarding this recommendation.
21	That <b>Women NSW</b> engage more directly with women with disability and women living in regional and remote areas regarding their challenges in accessing domestic and family violence services with a view to developing specific actions to better support and respond to these priority groups.	FACS (Women NSW)	<p>Supported.</p> <p>Women NSW leads the development of whole of government policies to improve the safety, wellbeing and economic security of women. Consultations with priority groups, such as women with disability and women living in regional and remote areas, form a key part of the policy development process.</p> <p>With respect to the NSW Government's current domestic and family violence reform agenda, priority groups, including women with disability and women living in regional and remote areas, have been directly engaged in the development of the:</p>



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			<ul style="list-style-type: none"><li>• <i>Domestic and Family Violence Blueprint for Reform 2016 – 2021: Safer Lives for Women, Men and Children</i></li><li>• <i>NSW Domestic and Family Violence Prevention and Early Intervention Strategy 2017-2021</i></li><li>• Domestic and Family Violence System Redesign.</li></ul> <p>Additionally, in 2017, through round one of the NSW Domestic and Family Violence Innovation Fund the NSW Government funded three projects which specifically address the access challenges faced by women with disability and women living in regional and remote areas:</p> <ul style="list-style-type: none"><li>• Respectful Relationships Peer Educators (People with Disability Australia)</li><li>• Building Access for Women with Disability (People with Disability Australia, Domestic Violence NSW, and Women's Community Shelters)</li><li>• Linking Communities Education Van (Linking Communities Network).</li></ul> <p>The NSW Government is also rolling out the Safer Pathway program across regional NSW, an initiative that is supported by key</p>



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			Government agencies include NSW Police.
22	That the <b>NSW Police Force</b> Aboriginal Coordination Team update the Aboriginal Client Liaison Officer position description to include an additional criteria under the 'Knowledge, Skills and Experience' section, namely the 'Ability to work effectively in dealing with domestic, family and community violence in the local community, and in particular an ability to advocate for and reinforce the importance of supporting victims of domestic violence.'	NSW Police Force	<p>Supported in principle.</p> <p>The NSW Police Force acknowledges the important role of Aboriginal Client Liaison Officers (ACLOs) in supporting all Aboriginal people, including those experienced in dealing with domestic, family and community violence. While responding to domestic violence matters is a responsibility of police officers and other specialist positions within the NSW Police Force, the ACLOs can support these other staff in working with communities.</p> <p>The NSW Police Force will explore opportunities to reflect this supportive role in the ACLO position description.</p>
23.1	That <b>NSW Justice NSW</b> , in partnership with Aboriginal community groups, develop a pilot program aimed at supporting Aboriginal women to attend court in relation to domestic violence offences in which they are a witness or victim.	Department of Justice	<p>Supported.</p> <p>The Department of Justice will engage with Aboriginal communities, relevant government agencies and legal and other stakeholders to develop a pilot program.</p> <p>As part of the upcoming review of the Domestic Violence Justice Strategy the Department of Justice will also review support needs of victims in contested domestic</p>



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			<p>violence matters, and the adequacy of current supports - including an examination of the specific needs of Aboriginal women attending court. It is expected this will also inform development of the pilot.</p> <p>Consultation will commence in the second quarter of 2018. The proposed model will be finalised in late 2018, aligning with the finalisation of the review of the Domestic Violence Justice Strategy.</p> <p>The need for future funding will be determined through the development of the pilot.</p>
23.2	That the <b>NSW Government</b> fund the pilot program anticipated in 23.1.	Department of Justice	<p>Supported in principle.</p> <p>This recommendation is supported in principle subject to funding approval.</p>
24	That the <b>NSW Government</b> conduct or commission research examining the forms, prevalence and impact of reproductive coercion in NSW and use this, and the international evidence base, to develop a strategy for addressing reproductive coercion in its various manifestations, including through family planning clinics, women's health clinical services, termination providers, general practice	FACS (Women NSW)	<p>Supported.</p> <p>Women NSW, with support from NSW Health, will progress this recommendation.</p>

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	and youth health services.		
25	<p>That <b>NSW Health</b> convene a working group to consider strategies to support the safety of family members or carers looking after or living with persons who are suffering from mental illness and concurrently using domestic and family violence (police reported or anecdotal).</p> <p>The working group should consider risk assessment processes concerning the safety of family members or carers (including their risk of violence victimisation from their family member experiencing mental health issues) as part of Community Treatment Order assessments, discharge plans from mental health institutions or from other institutions who may be providing mental health care, and outpatient management plans.</p>	NSW Health	<p>Supported.</p> <p>NSW Health will progress the recommendation through the NSW Health working party which will include the Prevention and Response to Violence, Abuse and Neglect Unit. At a policy level the Mental Health Branch is revising and extending the current statewide policy for mental health discharge planning and transfer of care. The draft policy makes specific reference to assessing for the risk of domestic violence, for both the perpetrator and the victim. The treating team will be required to explore strategies for managing identified risk to be included in discharge planning and communication as part of the transfer of care process. The updated <i>Mental Health Act 2007</i> (NSW) and the current mental health transfer of care policy stipulate a requirement to involve parents and/or carers in the care planning process from admission through the transfer of care.</p>
26	That <b>Corrective Services NSW</b> approach the Chief Magistrate to discuss strategies to ensure that Corrective Services NSW has sufficient time to conduct risk	Department of Justice (Corrective Services NSW)	<p>Supported.</p> <p>The Department of Justice is exploring options to amend legislation regarding the back dating of sentences, which will assist in</p>

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	assessments for offenders who are on remand prior to the offender being sentenced and released. If it is determined that change in court practices is required, consideration should be given to how best to effect such change and whether changes should be codified.		the management of offenders exiting custody to the community.
27.1	That <b>NSW Health</b> ensure that any domestic and family violence training delivered to NSW Health staff, or by NSW Health staff to healthcare service providers (such as by Education Centre Against Violence), discuss and provide referral information relevant to workers who themselves may be experiencing domestic and family violence.	NSW Health	<p>Supported.</p> <p>NSW Health Education Centre Against Violence (ECAV) currently runs a course "<i>Domestic violence for LHD senior executive/board members</i>" which specifically target NSW Health Managers to improve their awareness and knowledge about the prevalence and effects of domestic and family violence and develop management strategies in regard to the implementation of domestic violence workplace provisions. There is scope to expand this pending further funding.</p> <p>ECAV will continue to promote training opportunities and support to health workers, including for managers, in relation to domestic and family violence.</p> <p>With suitable resources the Emergency Care Institute would be well placed to develop appropriate training packages for Emergency Department Staff in NSW.</p>



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27.2	<p>That <b>NSW Health</b> provide information about domestic and family violence leave to all staff by circulating a bulletin which should also include educational information about domestic and family violence. Information about supports available for workers should also be displayed on local health district intranets and other relevant intranets administered by NSW Health.</p>	NSW Health	<p>Supported.</p> <p>Information Bulletin 2011_029 – Family Leave Provisions previously outlined information about domestic and family violence leave for NSW Health staff. In late 2017, this was reviewed and updated and information is now incorporated in the NSW Health PD2017_028: Leave Matters for the NSW Health Service (Section 12.10). Chief Executives are required to ensure that this Policy Directive is communicated to, and implemented by all employees involved in the administration, management or approval of leave.</p> <p>In addition to this, a domestic and family violence toolkit of resources is currently being developed for each Local Health District with key information including referral pathways and information for health workers who may be experiencing violence themselves. This will be available in 2018 in hard copy in hospitals and online.</p>
27.3	<p>That the <b>Commonwealth Government</b> require that all aged care providers deliver information to their staff about domestic and family violence, including information about how to access support.</p>	FACS (Women NSW)	<p>Minister Goward wrote to the Minister for Aged Care on 20 December 2017 regarding this recommendation.</p>



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28.1	That the <b>NSW Government</b> give consideration to amending its domestic and family violence leave guidelines to include a statutory declaration as evidence of domestic and family violence.	NSW Industrial Relations	<p>Supported in principle.</p> <p>Clause 84A of the <i>Crown Employees (Public Service Conditions of Employment) Reviewed Award 2009</i> (Award) provides that in respect of leave for matters arising from domestic and family violence, a Department Head will need to be satisfied, on reasonable grounds, that domestic and family violence has occurred.</p> <p>Although the Award states that evidence may be presented in the form of an agreed document issued by the Police Force, a Court, a Doctor, a Domestic Violence Support Service or Lawyer, provision of evidence is not mandatory but "may" be required by a Department Head.</p> <p>NSW Industrial Relations will give consideration to amending the Award and associated guidelines to include the ability for presentation of a statutory declaration as evidence of domestic and family violence, when it undertakes a broader review of the current provisions for domestic and family violence leave for NSW Government employees.</p>
28.2	That the <b>NSW Government</b> monitor the uptake and use of the domestic	Public Service Commission	Supported in principle.



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	and family violence leave provisions, including to monitor how frequently and on what grounds the leave provisions are being used.	NSW Industrial Relations	<p>NSW public sector employees are required to first exhaust sick leave and family and community services leave before accessing special leave for absences from the workplace to attend to matters arising from domestic and family violence situations. Therefore, it may be difficult to capture useful data on the uptake and use of this leave.</p> <p>Notwithstanding these limitations, the Public Service Commission and NSW Industrial Relations, in collaboration with public sector agencies, will examine the feasibility of monitoring the uptake and use of domestic and family violence leave.</p>
29.1	That the NSW Government fund <b>FACS-Housing</b> to expand its allocation of housing for clients escaping domestic and family violence.	FACS (Women NSW)	<p>Supported in principle, subject to available resources.</p> <p>The NSW Government is committed to supporting people who are escaping domestic and family violence and will consider additional accommodation solutions in any future funding made available for social and affordable housing.</p>
29.2	That <b>FACS-Housing</b> include information about the availability of temporary accommodation on its website 'Link2Home' highlighting that	FACS (Housing Statewide Services)	<p>Supported in principle.</p> <p>Temporary accommodation is administered under the Rentstart Assistance Policy. This</p>

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	for victims of domestic violence such accommodation is not subject to the 28-day limit.		policy already specifies that the temporary accommodation entitlement can be extended beyond 28 days for exceptional circumstances. This includes domestic violence. The wording in this policy has been updated to be clear on this inclusion. Other relevant web pages have also been amended.
29.3	That <b>FACS-Housing</b> continue to liaise with DVNSW and other relevant stakeholders to ensure that the Link2Home processes for clients experiencing domestic or family violence remain appropriate.	FACS (Housing Statewide Services)	Supported.  FACS (Housing Statewide Services) and Link2Home continue to network with relevant stakeholders on a regular basis to ensure communication and feedback on processes is taken into account to make improvements.
30	That <b>FACS-Housing</b> evaluate its current pilot project which provides perpetrators with temporary accommodation linked to referrals and support.	FACS (Housing Statewide Services)	Supported.  The project commenced in November 2017 and will be evaluated in mid 2018, however note that the pilot only looks at low level perpetrators of violence and is contained to the Mt Druitt and Blacktown Police Command, hence the application of its findings will be limited.
31.1	That <b>FACS-Housing</b> monitor the uptake and use of its new client information and service 'app' once launched, and consider strategies to ensure the 'app', and the broader Housing Connect Program, is	FACS (Housing Statewide Services)	Supported.  FACS has taken a User Centric Design approach to the app, and over the past few months has engaged directly with many end users including Housing clients from diverse



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	accessible to clients, and in particular culturally and linguistically diverse clients and clients who are not digitally savvy.		<p>backgrounds and support providers that work with these clients in order to ensure the design is as far as possible best suited to the various audiences and users of the app.</p> <p>The design is also intended to cater for clients who have a basic knowledge of mobile technology and may be new to using apps i.e the design will be simple, intuitive and will use graphics, icons and diagrams as far as possible which is a clear design trait to which our clients have responded favourably too with other online services that we have developed.</p> <p>End users will also be integral to the FACS user experience testing regime to ensure the app has been built in accordance with the design requirements and principles.</p> <p>Once in operation FACS will have access to analytics which will help us understand how our clients are using the app, and demographic information on use which will help inform future enhancements.</p> <p>As with all FACS Online/mobile services we will also produce both digital and hard copy collateral that helps explain to our clients in simple terms how to access and use the app. Digital information such as videos are usually</p>



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			<p>translated into multiple languages.</p> <p>The app is scheduled for release in the second half of 2018.</p>
31.2	<p>That <b>FACS-Housing</b> update its security contracts to require that subcontractors call police where they see, suspect or are informed about domestic violence episodes occurring on, or in relation to, FACS-Housing properties.</p>	FACS (Housing Statewide Services)	<p>Supported.</p> <p>The recommendation is supported, noting that the reference should be to FACS properties where security and maintenance activities are undertaken by contractors.</p> <p>The contract being referred to is the Land and Housing Corporation's (LAHC) Security Contract including Monitoring of CCTV and Foot Patrol Service (the Security contract).</p> <p>The Security contractor is required to</p> <ul style="list-style-type: none"><li data-bbox="1388 933 1974 1049"><i>...for any emergency incidents contact the appropriate emergency services (e.g. ambulance, fire brigade or police) as soon as possible....</i></li><li data-bbox="1388 1091 1974 1282"><i>Immediately report any person/s to the NSW Police and the Principal who are engaged in:...(b) acting aggressively or violently towards other people; and (c) engaging in suspicious or illegal activities...(Clause 2.3.4, Specification)</i></li></ul> <p>Because the Asset Maintenance Services</p>

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			<p>(AMS) contractors also deal with clients and may encounter emergency situations, these provisions are also contained in the AMS contract.</p> <p>In addition to the specific requirements of the Security Contract, both the Security Contract and the AMS Contract require the contractor to comply with the contractor's code of conduct, which requires:</p> <ul style="list-style-type: none"> <li>• <i>Clause 20 – If any person sees an illegal act or a crime in progress they must immediately inform the Police; and</i></li> <li>• <i>Clause 22 - If there is any immediate danger to life and property, the appropriate emergency service must be called immediately. Also notify the Principal's representative.</i></li> </ul> <p>Both contracts require LAHC's contractors to pass on their contractual obligations to sub-contractors, including the requirement to report illegal activities and call emergency services.</p>
31.3	<p>That <b>FACS-Housing</b> work with the <b>NSW Police Force</b> to ensure the provision of timely and up to date housing information for use by officers (including in relation to the information</p>	<p>FACS (Housing Statewide Services) NSW Police Force</p>	<p>Supported.</p> <p>Both FACS (Housing Statewide Services) and the NSW Police Force support the recommendation. FACS (Housing Statewide</p>



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	referred to in Recommendation 29.2).		Services) will review and update housing information provided to Police once changes to the <i>Residential Tenancies Act 2010</i> (NSW) relating to domestic and family violence have been approved by Cabinet. In the interim, FACS (Housing Statewide Services) will provide the NSW Police Force with relevant information to be included in the Domestic Violence Standard Operating Procedures, and publicised to operational police.
32.1	That <b>Victims Services</b> work with the <b>NSW Police Force</b> to formalise a policy or memorandum of understanding in relation to crime scene clean up in all cases where a crime scene is established following a homicide or serious assault from which death may result. This policy should clearly articulate the role of each agency in ensuring that crime scene clean-up is coordinated in a timely fashion and that families are appropriately supported in accessing financial assistance where required.	Department of Justice (Victims Services)  NSW Police Force	Not supported.  The NSW Police Force and the Department of Justice support the need to streamline the coordination of crime scene clean ups and to ensure families are appropriately supported in accessing financial assistance under the <i>Victim's Rights and Support Act 2013</i> (NSW).  The Victims Advisory Board (VAB) is currently examining the issue of forensic cleaning generally, including for domestic violence. This includes consideration of minimum standards for forensic cleaning and accountability for cleaners in the handover of crime scene following the clean. It also includes supporting families to access financial assistance under the <i>Victim's Rights and Support Act 2013</i> (NSW) to aid with crime scene clean-up.

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			<p>Through these detailed considerations, the VAB will identify the most appropriate mechanisms for addressing the issues raised by the DVDRT in this recommendation in the wider NSW crime scene context. This work will be undertaken by the VAB in 2018, with a view to completion by the end of the year.</p> <p>Victims Services, which provides secretariat support to the VAB, will lead this process. This will include consultation with NSW Police Force and other relevant stakeholders.</p>
32.2	<p><b>That Victims Services and the NSW Police Force</b> work together with homicide victims support organisations to develop or update any existing information package, such as the <i>Family Members of Homicide Victims</i> brochure, for secondary victims of homicide. This package should contain clear and plain English information about victims' immediate needs, actions required of the secondary victim, support services available and how to engage support, and next steps after a family member or loved one is killed. Agencies should develop a strategy for making this package available to all secondary victims of homicide as soon as practicable after the fatal assault.</p>	<p>Department of Justice (Victims Services)</p> <p>NSW Police Force</p>	<p>Supported in principle.</p> <p>The NSW Police Force and the Department of Justice support enhancing the care and support available to secondary victims of homicide following a fatal assault.</p> <p>Victims Services currently maintains an information package: "Family Members of Homicide Victims". Victims Services will update this information package to address the points raised by the DVDRT in this recommendation, in consultation with the NSW Police Force and other stakeholders.</p> <p>Victims Services will work with the NSW Police Force and other relevant stakeholders to develop a strategy to ensure this information package is made available to all</p>



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			<p>secondary victims after a fatal assault. Victims Services will work towards producing a preliminary strategy by December 2018.</p> <p>Victims Services has ongoing regular discussions with NSW Police to identify update needs to the information provided and to ensure it is made available to all relevant victims. Victims Services and NSW Police will continue to do so into the future.</p>
33	<p><b>That Victims Services, Department of Family and Community Services, NSW Health, the Department of Education and Communities and other relevant organisations work together to improve access to support and advocacy for young people and children who are a secondary victim to a homicide, including where carers may be reluctant to engage with services.</b></p>	<p>Department of Justice (Victims Services)</p> <p>Department of Family and Community Services</p> <p>NSW Health</p> <p>Department of Education</p>	<p>Supported.</p> <p>The Department of Justice (Victims Services), FACS, NSW Health and the Department of Education all support this recommendation.</p> <p>Each of these agencies is represented on the Safer Pathway Implementation Working Group (IWG), convened by Victims Services, and participate in the IWG's Homicide Death Review process.</p> <p>IWG members support the principle of streamlining information sharing on an interagency level to improve supports and advocacy as part of the formalised DV Homicide review process. Victims Services is currently in the process of designing a 'Frontline Agency Internal Record Review'</p>



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			<p>template to facilitate consistent information sharing which can incorporate information pertaining to support needs of secondary victims into the DV Homicide review.</p> <p>Victims Services respects the autonomy and the role of the carer as guardian for the child, and will provide additional information and options to support the carer in making decisions in the best interest of the child.</p> <p>FACS will also continue to work with the other agencies to enhance service delivery to this cohort of children. Amendments to casework practice will be considered to ensure this cohort of children receive the same comprehensive level and quality of care as children in the care of the Minister for Family and Community Services (which the Coroner commands).</p> <p>The Department of Education provides personalised support to school aged children and young people as needed. This support includes school counselling services available to all students in NSW public schools.</p>
34	That <b>Victims Services</b> update its online information and any material	Department of Justice (Victims Services)	Not supported.



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	<p>that accompanies the making of a Provisional Order for restitution to indicate that the defendant can challenge the making of an order in circumstances where the defendant has an ongoing relationship with a victim who has been granted compensation.</p>		<p>Provisional Orders are circumstantial, and therefore they must be considered on a case-by-case basis. It is not always the case that defendants are able to have their debt reduced or waived on the specific grounds that they have an ongoing relationship with a victim who has been granted support. Rather, Victims Services has discretion under the <i>Victims Rights and Support Act 2013 (NSW)</i> to consider the defendant's individual situation and their objections to a Provisional Order.</p> <p>Victims Services is additionally concerned that if information about objecting on the basis of a continuing relationship is made available, that the defendant may be encouraged to maintain a potentially harmful relationship with the victim in order to reduce or avoid payment of the restitution debt.</p> <p>For these reasons it is not appropriate to publish generic information on objections to a provisional order made on the basis of a continuing relationship.</p> <p>Victims Services acknowledges that defendants should be informed of their right to object to a Provisional Order that has been made. Victims Services maintains a practice of providing clear, direct and simple</p>



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			information on Provisional Orders available online, and in correspondence that accompanies Provisional Orders.
35	That the <b>NSW Government</b> review legislation to allow for the making of Victim Impact Statements in circumstances where the defendant is found unfit and not acquitted, or not guilty by reason of mental illness under the <i>Mental Health (Forensic Provisions) Act 1990</i> (NSW).	Department of Justice	<p>Pending.</p> <p>Making VIS available to victims in circumstances where the defendant is found unfit and not acquitted or not guilty by reason of mental illness under the <i>Mental Health (Forensic Provisions) Act 1990</i> (NSW) has been considered as part of the Review of the Mental Health Tribunal ('Whealy Review'). It is expected the government response to the Whealy Review will be finalised mid-2018.</p> <p>The NSW Department of Justice Sentencing Council's review of victims involvement in sentencing is also currently considering this issue. The Sentencing Council's review is expected to conclude in March 2018.</p>
36	That <b>NSW Health</b> together with the Mental Health Commissioner review the adequacy of supports available for victims of domestic and family violence, or secondary victims of domestic violence related homicides in NSW, where the person charged has been assessed as having a mental illness or intellectual disability.	NSW Health	<p>Pending.</p> <p>The Mental Health Tribunal review that is currently under Government consideration examined the processes and procedures used by the Tribunal to ensure it is appropriately balanced particularly as they relate to community safety, the interests of victims and their families, versus the care and treatment needs of forensic patients. This will</p>



<b>Number</b>	<b>Recommendation</b>	<b>Lead Agency/ies</b>	<b>Government Response</b>
	The review should consider strategies to improve the identification of domestic violence cases by mental health professionals, including the Mental Health Review Tribunal.		<p>include how victim support and engagement can be better provided.</p> <p>The Mental Health Commission was consulted as part of this review. The Commission as well as other agencies will be consulted in the implementation of this recommendation.</p>